

Florida Statewide Guardian ad Litem Office



Alan F. Abramowitz, Executive Director

August 14, 2020

R. Philip Twogood Coordinator OPPAGA 111 W Madison Street Room 312 Tallahassee, Florida 32399

RE: Report of GAL direct-support organization

Dear Coordinator Twogood;

Pursuant to section 20.058, Florida Statutes, please find attached the report from the Florida Guardian ad Litem Program concerning its direct-support organization, the Florida Guardian ad Litem Foundation, along with a copy of the Code of Ethics and the most recent IRS Form 990. This information has been made available to the public via a link on the Program's website.

The Foundation continues to create new opportunities for public-private partnerships. Its support benefits the GAL Program and the children we represent in a variety of ways, including but not limited to:

- raising awareness of issues facing abused, abandoned, and neglected children and of the need to give them guardians ad litem to represent, advocate for, and support them.
- leading collaborative efforts statewide to achieve better outcomes for Florida's most vulnerable children.
- supporting children directly by raising private funds for normalcy activities and through a scholarship program for foster youth pursuing secondary education.
- enhancing representation through recruitment, retention, and training initiatives.

The Foundation continues to be an invaluable resource to the GAL Program and the abused and neglected children we represent. *In light of the considerations above, and others, the Guardian ad Litem Program recommends continuing association with the Florida Guardian ad Litem Foundation.* If you have any questions, please feel free to contact me.

Sincerely,

Alan F. Abramowitz

IN

DIRECT SUPPORT ORGANIZATION 2020 REPORT

IMPLEMENTATION OF FLORIDA STATUES CHAPTER 20.058

Direct Support Organization (DSO) Name: Florida Guardian ad Litem Foundation

Mailing Address: P.O. Box 10688 Tallahassee, FL 32302

Telephone Number: (850) 922-7213 Website Address: www.flgal.org

Statute Authority:

39.8298 Guardian Ad Litem direct-support organization.—

- (1) AUTHORITY.—The Statewide Guardian Ad Litem Office created under s. <u>39.8296</u> is authorized to create a direct-support organization.
- (a) The direct-support organization must be a Florida corporation not for profit, incorporated under the provisions of chapter 617. The direct-support organization shall be exempt from paying fees under s. 617.0122.
- (b) The direct-support organization shall be organized and operated to conduct programs and activities; raise funds; request and receive grants, gifts, and bequests of moneys; acquire, receive, hold, invest, and administer, in its own name, securities, funds, objects of value, or other property, real or personal; and make expenditures to or for the direct or indirect benefit of the Statewide Guardian Ad Litem Office.
- (c) If the executive director of the Statewide Guardian Ad Litem Office determines the direct-support organization is operating in a manner that is inconsistent with the goals and purposes of the Statewide Guardian Ad Litem Office or not acting in the best interest of the state, the executive director may terminate the contract and thereafter the organization may not use the name of the Statewide Guardian Ad Litem Office.
- (2) CONTRACT.—The direct-support organization shall operate under a written contract with the Statewide Guardian Ad Litem Office. The written contract must, at a minimum, provide for:
- (a) Approval of the articles of incorporation and bylaws of the direct-support organization by the executive director of the Statewide Guardian Ad Litem Office.
- (b) Submission of an annual budget for the approval by the executive director of the Statewide Guardian Ad Litem Office.
- (c) The reversion without penalty to the Statewide Guardian Ad Litem Office, or to the state if the Statewide Guardian Ad Litem Office ceases to exist, of all moneys and property held in trust by the direct-support organization for the Statewide Guardian Ad Litem Office if the direct-support organization ceases to exist or if the contract is terminated.
- (d) The fiscal year of the direct-support organization, which must begin July 1 of each year and end June 30 of the following year.
- (e) The disclosure of material provisions of the contract and the distinction between the Statewide Guardian Ad Litem Office and the direct-support organization to donors of gifts, contributions, or bequests, as well as on all promotional and fundraising publications.
- (3) BOARD OF DIRECTORS.—The executive director of the Statewide Guardian Ad Litem Office shall appoint a board of directors for the direct-support organization. The executive director may designate employees of the Statewide Guardian Ad Litem Office to serve on the board of directors. Members of the board shall serve at the pleasure of the executive director.
 - (4) USE OF PROPERTY AND SERVICES.—The executive director of the Statewide Guardian Ad Litem Office:
- (a) May authorize the use of facilities and property other than money that are owned by the Statewide Guardian Ad Litem Office to be used by the direct-support organization.
- (b) May authorize the use of personal services provided by employees of the Statewide Guardian Ad Litem Office. For the purposes of this section, the term "personal services" includes full-time personnel and part-time personnel as well as payroll processing.
- (c) May prescribe the conditions by which the direct-support organization may use property, facilities, or personal services of the office.
- (d) Shall not authorize the use of property, facilities, or personal services of the direct-support organization if the organization does not provide equal employment opportunities to all persons, regardless of race, color, religion, sex, age, or national origin.
- (5) MONEYS.—Moneys of the direct-support organization may be held in a separate depository account in the name of the direct-support organization and subject to the provisions of the contract with the Statewide Guardian Ad Litem Office.
- (6) ANNUAL AUDIT.—The direct-support organization shall provide for an annual financial audit in accordance with s. <u>215.981</u>.
- (7) LIMITS ON DIRECT-SUPPORT ORGANIZATION.—The direct-support organization shall not exercise any power under s. <u>617.0302</u>(12) or (16). No state employee shall receive compensation from the direct-support organization for service on the board of directors or for services rendered to the direct-support organization.

DSO's Mission:

The Florida Guardian ad Litem Foundation's (GAL Foundation) mission is to provide additional resources for the GAL Program, its volunteers, and its affiliated circuit non-profit organizations in order to promote Guardian ad Litem representation for abused, neglected and abandoned children in Florida's dependency system.

Brief Description of the DSO's Results Obtained:

- The Foundation raised over \$70,000 and distributed it to local non-profit organizations that support the GAL Programs in the circuits, allowing those organizations to support children and volunteers in their local communities.
- In addition, the GAL Foundation obtained over \$50,000 in funding from private foundations to support foster care youth with normalcy activities.
- The GAL Foundation was also awarded \$32,500 in funding in order to provide training events for GAL staff and volunteers.
- The Foundation continued its TRIUMPH scholarship program to recognize outstanding foster care youth continuing their education at a post-secondary institution. Youth in foster care face incredible challenges and need the support of friends, teachers, organizations, and the community. The GAL Foundation would like to be a part of this extended support system and recognize those youth who embody the spirit of the TRIUMPH Award. The TRIUMPH Award recognizes demonstration of: determination, resiliency, aspiration, overcoming obstacles, and academic achievement.

All 20 Guardian ad Litem Judicial Circuits had the opportunity to nominate a deserving youth. Three youth were selected to participate in the finalist competition. The three finalists will all receive a laptop computer to help further their educational success. Additionally, first place will receive a \$10,000 college scholarship, second place will receive a \$6,000 college scholarship and third place will receive a \$4,500 college scholarship. This is more than double the amount awarded last year.

- Two additional members were added to the GAL Foundation's Board of Directors to increase the ability of the GAL Foundation to support the GAL Program statewide.
- The GAL Foundation raised over \$70,000 dollars to launch a Statewide Marketing campaign through social media and radio PSAs.
- The GAL Foundation continued its efforts to increase GAL awareness in order to recruit additional volunteers through its support of statewide events such as Children's Week.
- The GAL Foundation secured over \$180,000 dollars in VOCA funds to benefit the 2nd Judicial Circuit GAL Program in order to support and enhance representation of children in that circuit.
- The GAL Foundation won an \$80,000 CJA grant which funded a statewide project to train Guardian ad Litem staff and stakeholders on topics impacting permanency for children. Through this grant, GAL facilitated communications among stakeholders to improve practices in the dependency court; encouraged stakeholder collaboration across circuits on practices that reduce time to permanency; and identified improvements in state and federal law and rules affecting permanency for children.

Brief Description of the DSO's Plans for the Next Three Fiscal Years:

The Board of Directors of the Florida Guardian ad Litem Foundation established a Five Year Strategic Plan. The plan has clear objectives, timelines, and covers the time period of 2018-2023:

- Goal 1: Enhance the GALF's capacity to support GAL programs statewide and the children they represent.
 - Strategy A: Increase board capacity
 - Objective 1: Develop new board members with consideration of diversity, geography, and expertise (marketing and PR)
 - Objective 2: Tap into knowledge, skills and resources of current board members
 - Strategy B: Strengthen internal partnerships
 - Strategy C: Increase funding streams for foundation sustainability
- Goal 2: Cultivate strategic relationships at state and local levels to increase support for Florida's most vulnerable children.
 - Strategy A: Increase public private partnerships statewide
 - Strategy B: Bolster relationships with key legislators at the state and local level
 - Strategy C: Coordinate funding for lobbying efforts on behalf of all GAL nonprofit arms statewide
- Goal 3: Lead collaborative contribution efforts statewide to achieve better outcomes for Florida's most vulnerable children.
 - Strategy A: Raise funds to support volunteer efforts throughout the state
 - Strategy B: Raise funds to support GAL staff development and growth
 - Strategy C: Raise funds to support local programs' needs that cannot be met by their local non-profits
- Goal 4: Increase awareness of Florida Guardian ad Litem's efforts on behalf of abused, abandoned and neglected children.
 - Strategy A: Support statewide PR and marketing initiatives
 - > Objective 1: Create media opportunities through partnership
 - Strategy B: Increase GAL brand awareness
 - Strategy C: Create a communications plan to enhance internal stakeholder engagement

Florida Statewide Guardian ad Litem Foundation Code of Ethics Adopted July 2014

I. INTRODUCTION (Purpose and Intent)

The Florida Statewide Guardian ad Litem Foundation (Foundation) is a Direct Support Organization authorized by §39.8298, Florida Statutes. The Foundation's mission is to provide additional resources for the Florida Guardian ad Litem Programs, its volunteers, and its affiliated circuit non-profit organizations in order to promote Guardian ad Litem representation for abused, neglected, and abandoned children in Florida's dependency system. Pursuant to §112.3251, the Foundation has adopted a code of ethics to guide its employees, board members and committee members in their conduct when acting on behalf of the Foundation.

II. STATEMENT OF POLICY

A. SOLICITATION OR ACCEPTANCE OF GIFTS

☑ Influence of Judgment. No employee/member of the Foundation may solicit or accept anything of value, including a gift, loan, reward, promise of future employment, favor, or service, based upon any understanding that the member's / employee's official actions or judgment would be influenced thereby.

② **Personal Benefit.** No employee/member of the Foundation may **solicit** any gift from a lobbyist or Foundation vendor, where such gift is for the personal benefit of the employee/member or any other person.

B. DISCLOSURE OR USE OF CERTAIN INFORMATION

No current or former employee/member of the Foundation may disclose or use non-public information obtained because of their Foundation employment or position as a member for the personal gain or benefit of themselves or any other person or business entity.

C. DOING BUSINESS WITH ONE'S AGENCY

No employee/member of the Foundation who participates through decision, approval, disapproval, recommendation, preparation of any part of a purchase request, influences the content of any specification or procurement standard, renders advice, investigates, audits or acts in any other advisory capacity in the procurement of contractual services may become or be the employee of a person contracting with the Foundation.

D. UNAUTHORIZED COMPENSATION.

No Foundation employee/members or their spouse or minor child shall, at any time, accept any compensation, payment, or thing of value when such employee/member knows, or, with the exercise of reasonable care, should know, that it was given to influence a vote or other action in which the employee/member was expected to participate in his or her official capacity.

No employee / member of the Foundation shall use or attempt to use his or her Foundation position or any property or resource within his or her trust, or perform his or her duties to secure a special privilege, benefit, or exemption for himself, herself, or others.

E. ACKNOWLEDGEMENT AND DISCLOSURE

All Foundation employee/member are required to provide a signed Acknowledgement regarding provisions of the Foundation Code of Ethics.

F. RESTRICTIONS ON VOTING

No Foundation employee/member shall vote on any matter that the employee/member knows would inure to his or her special private gain or loss. Any employee/member who abstains from voting in an official capacity upon any measure that the employee/member knows would inure to his or her special private gain or loss, or who votes in an official capacity on a measure that he or she knows would inure to the special private gain or loss of any principal by whom the employee/member is retained or to the parent organization or subsidiary of a corporate principal by which the employee/member is retained other than an agency;¹ or which the employee/member knows would inure to the special private gain or loss of his or her relative or business associate, shall make every reasonable effort to disclose the nature of his or her interest as a public record in a memorandum filed with the person responsible for recording the minutes of the meeting, who shall incorporate the memorandum in the minutes. If it is not possible for the employee/member to file a memorandum before the vote, the memorandum must be filed with the person responsible for recording the minutes of the meeting no later than 15 days after the vote.

¹ "Agency" means any state, regional, county, local, or municipal government entity of this state, whether executive, judicial, or legislative; any department, division, bureau, commission, authority, or political subdivision of this state therein; or any public school, community college, or state university.

Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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		initial return	Number and street (or P.O. box if mail is not delivered to street address) Room		45-	<u>0501348</u>
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		termin-	City or town, state or province, country, and ZIP or foreign postal code		850	<u>-922-7275</u>
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ě	10) Inve	stment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	858.
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	12~0	10	LHA For Paperwork Reduction Act Notice, see the separate instructions	************	****************	Yes No

	m 990 (2018) FLORIDA GUARDIAN AD LITEM FOUNDATION INC 45-0501348 Page
Minimum .	Check if Schedule O contains a response or note to any line in this Part III
1	and the orderization a mission.
	SEE SCHEDULE O
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2	Did the organization undertake any significant program services during the year which were not listed on the
	If "Yes," describe these new services on Schedule O.
3	
	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No.
1	Describe the organization to schedule O.
	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the arms of the services.
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a	(Code) (Expenses \$ 54,349. including grants of \$) (Revenue \$ 2,089.
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ï	GUARDIAN AD LITEM FOUNDATION HAS CONTINUALLY WORKED TO PROVIDE SUPPORT
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7	NEED IS IDENTIFIED, THE FOUNDATION PROVIDES TARGETED SUPPORT FOR UNIQUE
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	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		105	No
	II res, complete Schedule A	1	X	
	Schedule of Contributors?	2	X	+
•	bid the organization engage in direct or indirect political campaign activities on behalf of an in apparatus	 -	+	-
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4	and display the control of the contr	13	 	1
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£	a section to t(c)(4), 50 ((c)(5), of 5())(c)(6) organization that requires manufacture	+-	1	
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e	and displaced maintain any donor advised funds or any similar funds or appropriate	5		X
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8	of works of art, historical treasures, or other similar assets?	7		<u>X</u>
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9	bid the organization report an amount in Part X, line 21, for escrow or custodial account liability, same as	8		<u>X</u>
	art A, or provide credit counseling, debt management, credit repair, or debt pegotiation assistant			
	" res, complete schedule D, Part IV		ĺ	••
10	and organization, directly of infough a related organization, hold accepts in terms and	9		<u>X</u>
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11	The results of the complete Schedule D. Davis VI. Lin. Com. L.	10		<u>X</u>
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		1	
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ŧ	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a		<u>X</u>
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•	bid the organization report an amount for investments - program related in Day V line 10 th at the control of t	11b		<u>X</u>
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C	bid the organization report an amount for other assets in Part X line 15 that is 5% or more of its tast	11c		<u>X</u>
			1	37
e	Did the organization report an amount for other liabilities in Part X. line 252 if Was 1 and 1 a	11d		<u>X</u>
f		11e		X
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	To readic D, r arts Ar any Arr			37
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	12a		X
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14a	and the United Control of the United Control of the United Control	13	-	X
b	the organization have aggregate revenues or expenses of more than \$10,000 from secretarities (14a		<u>X</u>
	and service activities outside the United States or aggregate foreign in the states of			
15	" (65, CUITIDELE SCREGUIE F. Parts Land IV	14b		х
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16	1 res. complete Schedule F. Parte II and IV	15		х
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17	THE COMPLETE SCHOOLING E Date III and III	16	. .	v
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	Lo little and the organization attach a conv of its audited financial and	20a	+	<u> </u>
		20b	+	Managaman .
822000	good and it. Column (4), line 17 If "Yes " complete Schedule I Posts Load !!	٠, ا	۲	
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FLORIDA GUARDIAN AD LITEM FOUNDATION INC Part IV | Checklist of Required Schedules (continued) 45-0501348 Page 4 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Yes No Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current X 22 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the 23 X last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Х 24a c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24b any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 240 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit 24d 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 X 25a that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L. Part I 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or 25b Х former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial 26 X contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity 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 27 X instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV **b** A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, 28b X director, trustee, or direct or indirect owner? If "Yes, " complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 28c Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X 29 contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? X 30 If "Yes," complete Schedule N, Part I 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete X Schedule N. Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 32 X sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 33 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 34 X b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity X 35a within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 35b If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 Х 36 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 37 Х Note. All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance 38 Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable Yes No **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1a c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 0

832004 12-31-18

(gambling) winnings to prize winners?

Form 990 (2018)

Form 990 (2018 FLORIDA GUARDIAN AD LITEM FOUNDATION INC Statements Regarding Other IRS Filings and Tax Compliance (continued) 45-0501348 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements. Yes No filed for the calendar year ending with or within the year covered by this return 0 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250 you may be required to e-file (see instructions) 2h 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? **b** If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O X За 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a 3b financial account in a foreign country (such as a bank account, securities account, or other financial account)? **b** If "Yes," enter the name of the foreign country: Х 4a See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X 5a c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5b X 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit 5c any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts X 6a were not tax deductible? Organizations that may receive deductible contributions under section 170(c). 6b a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If "Yes." did the organization notify the donor of the value of the goods or services provided? X c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required 7b to file Form 8282? Х d If "Yes," indicate the number of Forms 8282 filed during the year 7c 7d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? X g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7f h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7 a Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 7h sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9a 10 Section 501(c)(7) organizations. Enter: 9b a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders **b** Gross income from other sources (Do not net amounts due or paid to other sources against 11a amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b. If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12a 12h 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 13a **b** Enter the amount of reserves the organization is required to maintain by the states in which the

Form 990 (2018)

14a

14b

15

16

X

X

X

organization is licensed to issue qualified health plans

If "Yes." see instructions and file Form 4720, Schedule N.

excess parachute payment(s) during the year?

If "Yes," complete Form 4720, Schedule O.

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

c Enter the amount of reserves on hand

13b

13c

Form	aan	(2018)	
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FLORIDA GUARDIAN AD LITEM FOUNDATION INC 45-0501348 Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	Check if Schedule O contains a response or note to any line in this Part VI ction A. Governing Body and Management			7
1	Enter the number of voting more have of the	Marie Ma	Yes	T _N
	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting circles are sent and the end of the tax year.	9	1	+
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive account.			
1	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.			
2	Did any officer, director, trustee, or key conditions and the same of the same	9		
	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?	\neg		l
3	A TOTAL OF ICA CHIDIOAGE	2		x
Ī	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a supervision	-	_	†
4		3		x
5	and organization make any significant changes to its governing documents since the	4		X
6	south aware during the year of a significant diversion of the great in the	5	+	X
7a	and the members of stockholders?	6	+	X
7 8	and a station have members, stockholders, or other persons who had the necessary	<u> </u>	+	┝≏
	The state of the governing body?			4,
0	governance decisions of the organization reserved to for subject to approve the	7 <u>a</u>	-	X
	The same of the sa			
8	the organization contemporaneously document the meetings held or written actions undertaken during the sace by the dis-	7b		X
a	The state of the s	1		
b	Each committee with authority to act on behalf of the governing body?	8a	X	
9	is there any officer, director, trustee, or key employee listed in Part VII. Section A	8b	X	
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	9		X
	on about policies not required by the Internal Revenue Code.)	***************************************		
10a	Did the organization have local chapters, branches, or affiliates?		Yes	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are sensitive.	10a		X
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any used by the account of the process.	10b		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a	Х	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			***************************************
b	Were officers, directors, or trustees, and key employees regulated if "No," go to line 13	12a	X	
C	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	************
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	Did the organization have a written whistleblower policy?	12c	Х	
14	Did the organization have a written wristreblower policy?	13		X
	Did the organization have a written document retention and destruction policy?	14		X
	Did the process for determining compensation of the following persons include a review and approval by independent	14		4 h
	the deliberation and deliberation of the deliberation and		- 1	
h	Significant Social Executive Director, or too management official	15a		v
•	Other officers or key employees of the organization	15b		$\frac{x}{x}$
۵.	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	136		Δ_
~~	bid the organization invest in, contribute assets to, or participate in a joint venture or significant	1 1		
		1	- 1	**
D	f "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a		<u>X</u>
	applicable leuglal lax law and take ctone to cote and take		- 1	
	on C. Disclosure	16b		
7 (ist the states with which a copy of this Form 990 is required to be filed NONE	***************************************		
,	section 6104 requires an organization to make its Forms 1023 (1024 or 1024 for 1024	-		
t	or public inspection. Indicate how you made these available. Check all that apply.	only) av	/ailable	
	Another's website X lines			
) [Describe in Schedule O whether (and if so, how) the organization made it account of the (explain in Schedule O)			
	tatements available to the state of interest policy and	financia	į	
s	tation ents available to the public during the tax year.	··· ·car ·cares		
5	tate the name, address, and telephone number of the person who was a	······································		
E	tate the name, address, and telephone number of the person who possesses the organization's books and records CLARK - 850-410-4642 O BOX 10688, TALLAHASSEE, FL. 32302-2699	······································		

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rorm	990	1201	23)

FLORIDA GUARDIAN AD LITEM FOUNDATION INC

45-0501348

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

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

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.

- er or in columns (U), (E), and (F) in 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees;

X Check this box if neither the organi	(B)			1	C)	- New York	-	(D)		T
Name and Title	Average			Pos	sitio	n		1	(E)	(F)
	hours per	(d	(do not check more the box, unless person is b			than one		Reportable	Reportable	Estimated
	week	off	icer a	nd a c	direct	or/trus	n an itee)	compensation	compensation	amount of
	(list any		T	Τ	T	T	T	from	from related	other
	hours for	darec				_	İ	the	organizations	compensation
	related	33	96)			Safe	l	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	organizations	I SI	Table 1		نۇ ئ	ã		(M-5) 1088-MISC)		organization
	below	23	18 mg		ploy	2 8				and related
***	line)	individual frustee or director	fostitutional tristee	Officer	Кеу етфоуее	Highest compensated employee	ormer			organization
(1) KRISTI AIELLO	10.00	† <u> </u>	╁╧╴	0	Ι×	# 5	- <u></u>			
BOARD MEMBER	20.00	x								
(2) LORI DUARTE-ROBERTS	10.00	1	┼		├-	├_		0.	0.	0
BOARD PRESIDENT	10.00	١								
(3) BERT EARP		X		X				0.	0.	0
BOARD TREASURER	10.00									
		X		X				0.	0.	^
	10.00							~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	V .	0
BOARD MEMBER		X						0.		_
(5) RICH NEWSOME	10.00			\neg	-		-	V •	0.	0
BOARD MEMBER	***************************************	х								
(6) TOM ROBINSON	10.00	**		-	******		\dashv	0.	0.	0
BOARD MEMBER		х				-	- 1			
(7) LESLIE SCHULTZ-KIN	10.00	^					_	0.	0.	0
BOARD MEMBER	10.00					- 1	l			CONTROL DESCRIPTION OF THE PROPERTY OF THE PRO
(8) NEIKO SHEA	10.00	X		4	_			0.	0.	0
BOARD MEMBER	10.00		- 1		ı				-	
(9) CHRISTINA WEAVER		X	\perp					0.	0.	0
	10.00		1		T		T			0
BOARD MEMBER		X	1					0.		•
(10) ERIC CLARK	40.00			_	\neg	_	一十		0.	0
CEO				x					_	
The state of the s	***************************************	\dashv	-+	-	\dashv	\dashv	\dashv	0.	0.	0
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		\dashv	 -	+	-	_	_			

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		+	+	+	+	_	\bot			
2007 12-31-18			ı	ĺ	-			1	1	

Form 990 (2018)

2018.04030 FLORIDA GUARDIAN AD LITEM 509815.1

**	J	Check if Schedule O contains a response		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue exclude from tax under sections 512 - 514
Contributions, Gifts, Grants		a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e				/	512 - 514
Contributions		f All other contributions, gifts, grants, and	392,144.				
			Business Code 611430	392,144. 858.	858.		
Program Service Revenue		cd					
<u>ል</u>	l '	f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interes	b	858.			
	4 5	other similar amounts) Income from investment of tax-exempt bond pro Royalties	I	38.			38.
	6 a	Less: rental expenses Rental income or (loss) Net rental income or (loss)	(ii) Personal				
ORANIO IL COMPANIA IN LA CARROLLA LA CARROLLA COMPANIA IN LA CARROLLA COMPANIA INCLUENZA COMPANIA INCLUENZA CO	b c d	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss)	(ii) Other				
Other Revenue	b	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a Less: direct expenses b	900.				
	9 a b	Net income or (loss) from fundraising events Gross income from gaming activities. See Part IV. line 19 Less: direct expenses b Net income or (loss) from gaming activities		900.			900.
1	10 a b	Gross sales of inventory, less returns and allowances a Less: cost of goods sold b Net income or (loss) from sales of inventory					
1		Miscellaneous Revenue Bu	siness Code	3,319.	3,319.		
4	e	All other revenue Total. Add lines 11a-11d Total revenue. See instructions		3,319. 397,259.	4,177.	0.	

-	ction 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon	se or note to any line in t	his Part IX		ſ
76 1	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	and domestic governments. See Part IV, line 21	33,220.	33,220.		- CADOLIGES
2	Grants and other assistance to domestic		30/220.		
	individuals. See Part IV, line 22	10,000.	10,000.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				·
6	trustees, and key employees				
0	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B)				
8	Other salaries and wages Pension plan accruals and contributions (include	258.	245.	13.	
~	section 401/k) and 402/b) ampliant to the section 401/k) ampliant to the section 401/	West-security		***************************************	
9	section 401(k) and 403(b) employer contributions) Other employee benefits				
0	Payroll taxon				
1	Fees for services (non-employees):				
a			***		
ь	Management Legal	200			
c	Accounting	300.		300.	
d		6,750.		6,750.	
e	Professional fundraising services. See Part IV, line 17	7,500.	7,500.		
f	Investment management fees				
9	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	135		4.5.	
2	Advertising and promotion	135. 1,456.	1,383.	135.	
3	Office expenses	7,562.	7,184.	73.	·
1	Information technology		/,104.	378.	
5	Royalties				
3	Occupancy				
•	Iravel	1,210.	1,149.		
;	Payments of travel or entertainment expenses		4,127.	61.	
	for any federal, state, or local public officials				
)	Conferences, conventions, and meetings	17,811.	17,811.		
•	Interest				
	Payments to affiliates				
	Depreciation, depletion, and amortization				
	Insurance	1,312.	1,246.	66.	
	Other expenses, Itemize expenses not covered above. (List miscellaneous expenses in line 24e, If line				
	C4t dillount exceeds 111% of tipe 25 column (4)				
•	amount, list line 24e expenses on Schedule (A) AWARD EXPENSES				
	MISCELLANEOUS	21,973.	21,973.		
	FILING FEES	7,067.	6,714.	353.	
d d	CARA ENTER	287.	273.	14.	
	All other expenses				**************************************
ا.	Total functional expenses. Add lines 1 through 24e loint costs. Complete this line only if the organization	116,841.	108,698.	8,143.	0.
r	eported in column (B) joint costs from a combined				
e	ducational campaign and fundraising solicitation.				
***	theck here if following SOP 98-2 (ASC 958-720)				

rart,	A Dalance Sneet	DILL TOWN TING	37	VOUL348 Page
-	Check if Schedule O contains a response or note to any line in this Part X			
		(A)	''''''''	T CO
т.		Beginning of year		(B) End of year
	and the state of t	106,626	. 1	39,800
4	3 Tomportary cash investments		2	75 04
3	1 - 5 - 2 and grants receivable, riet		3	75,044
4	tioodania receivable, riet			270 500
5	2021 and other receivables from current and former officers, directors		14	278,500
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L	1		
6	and other receivables from other disqualified persons (as defined under		5	
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing		1 1	
	employers and sponsoring organizations of section 501(c)(9) voluntary		1 1	
:	employees' beneficiary organizations (see instr). Complete Part II of Cab I		1 1	
7	Notes and loans receivable, net		6	
8	Inventories for sale or use		7	
9	Prepaid expenses and deferred charges		8	
10	a Land, buildings, and equipment: cost or other		9	
	basis. Complete Part VI of Schedule D 10a			
	b Less: accumulated depreciation 10b	No.		
11	Investments - publicly traded securities		10c	-
12	Investments - other securities. See Part IV, line 11		11	
13	Investments · program-related. See Part IV, line 11		12	
14	Intangible assets		13	
15	Other assets. See Part IV line 11	······································	14	
16	Total assets. Add lines 1 through 15 (must equal line 34)	199.	15	1,534
17	Accounts payable and accrued expenses	106,825.	16	394,878
18	Grants payable		17	7,111
19	Date the state of		18	
20	Tax-exempt hand lightities		19	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		20	
22	Loans and other payables to current and former officers, directors, trustees,	15,520.	21	14,710
	key employees, highest compensated employees, and disqualified persons.			
	Complete Part II of Schoolule I	B0000		
23	Secured mortgages and notes payable to unrelated third parties		22	
24	Unsecured notes and loans payable to unrelated third parties		23	
25	Other liabilities (including federal income tax, payables to related third		24	
	parties, and other liabilities not included on lines 17-24). Complete Part X of			
	Schedule D		-	
26	Total liabilities. Add lines 17 through 25		25	
		15,520.	26	21,821.
	organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.		1	
27	Unrestricted net access			
28	Temporarily restricted net assets	91,305.	27	373,057.
29	Permanently restricted not asset		28	
	Organizations that do not follow SFAS 117 (ASC 958), check here		29	
	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds			
31	Paid-in or capital surplus, or land, building, or equipment fund		30	
32	Retained earnings, endowment, accumulated income, or other funds		31	
33	Otal net assets or fund halancee		32	
34	Total liabilities and net assets/fund balances	91,305.	33	373,057.
	2 3 10 to to assets runo parences	106,825.	34	394 878

394,878. Form **990** (2018)

	art XI Reconciliation of Not Accept	45-05	01348	a (age 1:
L.	Treconciliation of Net Assets	-			age
134Verbonnes	Check if Schedule O contains a response or note to any line in this Part XI				-
1	Total rayanus (
2	Total revenue (must equal Part VIII, column (A), line 12)	1	39	7.2	259.
3	Total expenses (must equal Part IX, column (A), line 25)	2			341.
4	Revenue less expenses. Subtract line 2 from line 1	3			18.
5	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			05.
6	Net unrealized gains (losses) on investments Donated services and use of facilities	5	***************************************		
7	Investment expenses	6			-
8	Prior period adjustments	7	***************************************	************	-
9		8		1,3	34.
10	Other changes in net assets or fund balances (explain in Schedule O)	9	***************************************		0.
	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))			-	***************************************
Pe	rt XII Financial Statements and Reporting	10	37	3,0	57.
·	Check if Schedule O sectoics and neporting				-
	Check if Schedule O contains a response or note to any line in this Part XII				
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			Yes	No
	If the organization changed its method of second time. Cash X Accrual Other				
2a	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule ().		·	1
	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:	on a			
	Parameter Control of the Control of				
b	Dotti Consolidated and separate pasis				
	If "Yes." check a box below to indicate whether the formal dependent accountant?	*********	2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:	basis,			
	Consider the state of the state				
С					
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and sales.	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
За	If the organization changed either its oversight process or selection process during the tax year, explain in School As a result of a federal award, was the organization required to a federal award.	ule O.		1	
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing Act and OMB Circular A-133?	le Audit			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require		3a		X
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	d audit		Ţ	
	any steps taken to undergo such audits		3b		-
			Form !	990 (2018)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

FLORIDA GUARDIAN AD LITEM FOUNDATION INC

Employer identification number

Pá	art I	Reason for Public	c Charity Statu	S (All organizations mus	FOUN	DATIO	N INC		45-0501348
The	organ	ization is not a private for	radation by	• (All Organizations mus	t complete	this part.)	See instructions		
1		a mar a private 100	indation because it	IS: (FOI lines 1 through 15	charle ne	sheama bee	. 4		
2		A CHARGO CONVENTION OF	churches, or assoc	iation of churches describ	and in ear	tion 1704	o)(1)(A)(i).		
3		Section and an area in Se	Ction 170(b)(T)(A)(II). (Attach Schedule Fir	nem gan a	000 E711			
4	\vdash	A nospital of a cooperati	ve nospital service.	Organization described in			Miii).		
*	L	A medical research organity, and state:	nization operated in	conjunction with a hosp	tal describ	ed in sec	tion 170/b)/1)/A)	(iii) En	tor the beautation
_		city, and state:						(m). List	rer une nospital s name
5		An organization operated section 170(b)(1)(A)(iv)	I for the benefit of a	college or university own	ed or ope	rated by a	00vernmental	is done	*L , , .
		W. W. M. M.	(Complete Fait II.)					ii descr	ibed in
6		A federal, state, or local of	overnment or gove	mmental unit described i	n coction	470/LV4V	AV. 1		
7	X	An organization that norm section 170(b)(1)(A)(vi),	nally receives a sub	stantial part of its suppor	from a a	уг дајот	A)(V).		
		section 170(b)(1)(A)(vi).	(Complete Part II.)	part of its suppor	t iroin a gt	vernment	al unit or from the	genera	al public described in
8		A community trust descri	bed in section 170	(hV1VAVui) (Complete C	mark H S				
9		An agricultural research of	roanization describ	ed in continuation	art II.)				
		An agricultural research or university or a non-land	torant college of as	ed in section 170(b)(1)()	()(ix) oper	ated in cor	njunction with a la	and-grai	nt college
		or university or a non-land university:	rgram conege of aç	inculture (see instruction:	s). Enter th	e name, ci	ty, and state of the	ne colle	ge or
0	-	·							
		An organization that norm activities related to its exe	rally receives: (1) mi	ore than 33 1/3% of its su	pport fron	n contribut	ions, membershi	p fees, a	and gross receipts from
				ne (less section 511 tax) :	rom busin	esses acq	uired by the orga	nization	after lune 20 1075
4									arter salle 50, 1975.
1		An organization organized	and operated excl	usively to test for public s	afety. See	section	509(a)(4)		
2	-	garnzation organized	i and operated excl	usively for the honofit of	n notam	Alexander			
									e purposes of one or
	,								
a		Type I. A supporting org	anization operated	supervised, or controlled	huita au	ubiera liue	s 12e, 12t, and 1	2g.	
		the supported organizati	ion(s) the power to	regularly appoint or elect	oy its su	oported or	ganization(s), typ	ically by	giving /
		organization. You must	complete Part IV	Soctions A sent D	a majority	of the dire	ctors or trustees	of the s	Supporting
b		Type II. A supporting on	ranization supervio	Sections A and B.					
		Control or management	of the currenting	ed or controlled in conne	ction with	its s upport	ed organization(s	s), by ha	iving
		3	at the aubbottitid di	garrization vested in the	same pers	ons that co	ontrol or manage	the sup	ported
С		. (-)	ar actimists Latt L	L Sections A and C					
•	t	Type III functionally inte	grated. A support	ing organization operated	I in connec	ction with,	and functionally	integrat	ed with
d			with the migrification	isi. Tou must comolete	Dart IV C		Ph		
u		. The m non-innerional	y integrated. A sul	Oporting gragnization one	ratad in a	nenen an an Albania	Cas. ta	1 Organi	ization/e\
			and area. The Citable	"Lauon denerally must ca	tictu a nice	ribarctions an	and the second second	a Organi	zation(s)
			TOU INUST CO	Billulete Part IV Section	e A and D		* *		veness
е		and box it the orga	anization received a	l written determination fro	m the IDC	the is in a	Tunal Time H 3		
		many mitogration, o	. Abe in non-initial	onally integrated support	na nrasni:	ration	r type i, type ii, i	ype III	
f	Enter t	the fromber of Supported (organizations		ng organi	cation,			
9	Provid	e the following information	about the support	ed organization(e)			the street control of the control of		
	(i) N	and or supported	(ii) EIN	(iii) Type of organization	(iv) is the org	alization listed	1614	***************************************	
		organization		(described on lines 1-10	in your govern	nta qocoments	(v) Amount of mo		(vi) Amount of other
				above (see instructions))	Yes	No	support (see instru	uctions)	support (see instructions
	-								
								Personal Property Control	
***********	THE PERSON NAMED IN								

-	-								

-	***************************************		No.						
The area	-								
	-	Contract of the Contract of th							
al									

Schedule A (Form 990 or 990-EZ) 2018 FLORIDA GUARDIAN AD LITEM FOUNDATION INC 45-0501348 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Se	ection A. Public Support			10.7			
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	T (80043		-
	Gifts, grants, contributions, and		10/2010	(6) 2016	(d) 2017	(e) 2018	(f) Total
	membership fees received. (Do not						
	include any "unusual grants.")		20,005.	167 744	102 525	200 4	
2	Tax revenues levied for the organ-		20,003.	107,744.	103,535.	392,144.	683,428.
	ization's benefit and either paid to						
	or expended on its behalf						
3	tarac or convices or racinties						
	furnished by a governmental unit to						
	the organization without charge						
4	i viani i da inida i miloagii a		20,005.	167,744.	103,535.	202 144	600 400
5	The portion of total contributions				100,000.	392,144.	683,428.
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included				THAT IN		
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						683,428.
	ction B. Total Support	***************************************					003,428.
Cale	ndar year (or fiscal year beginning in) 📂 📗	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	10.5
	Amounts from line 4	***************************************	20,005.	167,744.	103,535.	392,144.	(f) Total 683,428.
8	Gross income from interest.						003,420.
	dividends, payments received on		T-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C	l	I		
	securities loans, rents, royalties,		-				
_	and income from similar sources		3.	5.	21.	38.	67.
9	Net income from unrelated business		-				<u> </u>
	activities, whether or not the						
40	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 7 through 10		5,700.		8,234.		13,934.
	Gross receipts from related activities, et		Activities in the control of				697,429.
13	First five years. If the Form 900 is fault	c. (see instruction	s)			12	31,423.
	First five years. If the Form 990 is for the organization, check this box and stop he	ne organization's f	irst, second, third,	fourth, or fifth tax	year as a section !	501(c)(3)	
Sec	tion C. Computation of Public	Support Perc	entage				>
	Public support percentage for 2018 (line			(man /6)			
10	Public support percentage from 2017 S	chedule A Dart II	line 14		-		97.99 %
16a :	33 1/3% support test - 2018. If the org stop here. The organization qualifies as	anization did not	theck the box on t	ino 12 and the sa		15	95.43 %
b:	33 1/3% support test - 2017. If the organization qualifie	anization did not	check a box on line	9 13 or 160, and lin	no 15 in 00 4 (50)	**	▶ X
1/a	10% -facts-and-circumstances test - 2	2018. If the organ	ization did not ob	sole a have an item a	2 10 - 10		
		and on commorances	S Lessi Check thic	DOV god when he.		d line 14 is 10% or	more,
-	19013-and-chcumstances test - 2	1017. If the organ	ization did not che	ole a barran time a			>
							% or
							functions
8 F	Private foundation. If the organization of	id not check a bo	x on line 13, 16a	16b, 17a, or 17b, a	heck this have and	ation	
					Cata -	see instructions	
					ocuedo	ıle A (Form 990 or	990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018 FLORIDA GUARDIAN AD LITEM FOUNDATION INC 45-0501348 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Calendar year (or fiscal year beginning in) ⊳ 📗	(a) 2014	(b) 2015	(c) 2016	1.000.0		T
1 Gifts, grants, contributions, and			(C) 2016	(d) 2017	(e) 2018	(f) Total
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in			ļ			
any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that	-					
are not an unrelated trade or bus-		e e e e e e e e e e e e e e e e e e e				
iness under section 513		***************************************				
	***************************************		L	1		
the dryan.						
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		DE CONTRACTOR DE				
Total. Add lines 1 through 5			 			
7a Amounts included on lines 1, 2, and				 		**************************************
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received						
from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						
c Add lines 7a and 7b						
Public support. (Subtract kne 7c from kne 6.)						
ection B. Total Support		<u> </u>				
endar year (or fiscal year beginning in)	1-1-0011					
Amounts from line 6	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
a Gross income from interest	***************************************		***************************************			(i) otal
dividends, payments received on						***************************************
securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
a our circo promisso rayable income				The second line of the second li	-	-
(less section 511 town) from but						
(less section 511 taxes) from businesses			di Albania			
acquired after June 30, 1975			di d			
acquired after June 30, 1975 C Add lines 10a and 10b						
acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business				<u> </u>		
acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is				- i		
acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
acquired after June 30, 1975 Add lines 10a and 10b 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 activities and the second control of the second control o						
acquired after June 30, 1975 c Add lines 10a and 10b 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)						
acquired after June 30, 1975 c Add lines 10a and 10b 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.)						
acquired after June 30, 1975 c Add lines 10a and 10b 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.) First five years. If the Form 990 is for the	Organization's	first page of the				
acquired after June 30, 1975 c Add lines 10a and 10b 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.) First five years. If the Form 990 is for the check this box and stop here.	organization's	first. second, third	fourth, or fifth tax	year as a section 5	i01(c)(3) organizatic	n,
acquired after June 30, 1975 c Add lines 10a and 10b 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.) First five years. If the Form 990 is for the check this box and stop here	upport Perc	entage		year as a section 5	i01(c)(3) organizatio	n,
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acquired after June 30, 1975 c Add lines 10a and 10b 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.) First five years. If the Form 990 is for the check this box and stop here ction C. Computation of Public S Public support percentage from 2017 Seb	upport Pero	entage rided by line 13, co			01(c)(3) organizatio	
acquired after June 30, 1975 c Add lines 10a and 10b 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.) First five years. If the Form 990 is for the check this box and stop here ction C. Computation of Public S Public support percentage from 2017 Seb	upport Pero	entage rided by line 13, co				To the state of th
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(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 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 class or purpose, describe the designation. If historic and continuing relationship, explain. 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 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 (b) and (c) 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 organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) 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")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) 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 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) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? 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 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 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.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 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.)

-	-		Ye	s	No
	1-1-	-		_	
	2				
	3a	+	-	-	
	3b	4		4	***************************************
	30				
	3c	†	**********	+	
	<u>4a</u>	1		┙	***********
	4b	-			
		T		†	
				1	
	4c	t		\dagger	
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-	9c				dir Annaque _{lla}
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				*******	- Andrews
900	10b	~···			

Schedule A (Form 990 or 990-EZ) 2018

P	nedule A (Form 990 or 990 EZ) 2018 FLORIDA GUARDIAN AD LITEM FOUNDATION INC 45-09 art IV Supporting Organizations (continued)	5013	48	Page
11		Weeken market suppless	Ye	s N
	and a surface of a gift of contribution from any of the following passage?		10	+
	A person who directly or indirectly controls, either alone or together with persons described in the second			
	and governing body of a supported organization?	11a	.	
	A family member of a person described in (a) above?		-	+
Se	ction B. Type I Supporting Organizations	11b		╅
	stion 5. Type I Supporting Organizations			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		Yes	N
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported associated as a life times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization is the organization of the organiz			
	controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or company the power than the power to appoint and/or company the power than the power to appoint and/or company the power than the power t		1	1
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions as statistics.			
2	organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any, applied to such powers during the tax year.	1		
	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated supported organization of the than the supported organization of the third organization organiza			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			1
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			1
Sec	supervised, or controlled the supporting organization. Ition C. Type II Supporting Organizations	2		
		Walter Street Control of the Control	T	T
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	***************************************	Yes	No
	structions of each of the organization's supported organization(s)? If "No " describe in Part VI to			
	or than agent ent of the supporting organization was vested in the same persons that controlled or many and		1 0	
Sec	<u> </u>	1		
	tion D. All Type III Supporting Organizations		-L	L
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	-	Yes	No
	organization's tax year. (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?			
2	Were any of the organization's officers directors or tried at a finite date of notification, to the extent not previously provided?	1		
	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(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
3	the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described in (2) did the association with the supported organization(s).	2		
	By reason of the relationship described in (2), did the organization's supported organization(s), significant voice in the organization's investment actions and the organization of the o			
	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			
	SMANTED DINGERIZATIONS DIRVERT IN THIS FEMANT			
ect	tion E. Type III Functionally Integrated Supporting Organizations	3	<u> </u>	*******
1	Check the box next to the method that the organization used to satisfy the Integral Part Text of	-		
a	The state of the s			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI house			
2		ictions)	Yes	
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	***************************************	Tes	No
	The organization was responsive?			
	The state of garingations and explain how these activities directly furthered their support		- 1	
	and how the accoming to those supported organizations, and how the accoming to			
	The source of the supplied supplied to the source of the s	_		
D	Did the activities described in (a) constitute activities that, but for the occapitation is	2a	-+	-
	supported organization(s) would have been engaged in?	1		
	to the organization's position that its supported organization(s) would have appeared in the	-		
	at the digarization's involvement	_		
	Parent of Supported Organizations. Answer (a) and (b) below. ———————————————————————————————————	2b	$-\!$	-
a	and the organization have the power to regularly appoint or elect a majority of the officers afficed	- 1		
	of the supported organizations? Provide details in Dant VI		l	
U	and the organization exercise a substantial degree of direction over the policies.	<u>3a</u>		-
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	- 1		
025		<u>3b</u>		-
	Schedula A /Farra 200			

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Sc P	hedule A (Form 990 or 990-EZ) 2018 FLORIDA GUARDIAN AD LITerated Type III Non-Functionally Integrated 509(a)(3) Supporting	EM F	OUNDATIO	N INC 4	5-0501348 Page 4
1					
	the organization satisfied the Integral Part Test as a qualifying		- NI - 00 1070	(explain in Pa	irt VI.) See instructions.
80	Sopporting Organizations most co	omplete	Sections A throu	gh E.	
	ction A - Adjusted Net Income		(A) Prior	Year	(B) Current Year
_1	Net short-term capital gain	Т.	ļ		(optional)
_2	Recoveries of prior-year distributions	+ 1			
_3		2	 		
_4		3	 		
5	Depreciation and depletion	4			
6	Portion of operating expenses paid or incurred for production or	5_			
	collection of gross income or for management, conservation, or			ļ	
***************************************	maintenance of property held for production of income (see instructions)				
7	Other expenses (see instructions)	6			
8		7			
٥		8			
Sec 1	tion B - Minimum Asset Amount		(A) Prior	Year	(B) Current Year (optional)
•	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year): Average monthly value of securities			14 74 147 1 1	
	Average monthly cash balances	1a			
		1b			
	Fair market value of other non-exempt-use assets	1c			
	Total (add lines 1a, 1b, and 1c)	1d			
	Discount claimed for blockage or other				
2	factors (explain in detail in Part VI):				
3	Acquisition indebtedness applicable to non-exempt-use assets	2			
4	Subtract line 2 from line 1d	3			
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,				
	see instructions)	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by .035	6			
	Recoveries of prior-year distributions	7	Andrew Control of the		
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	on C - Distributable Amount				Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	T 1			
2	Enter 85% of line 1	2			
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3			
4	Enter greater of line 2 or line 3	1 4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to	╅			
-	emergency temporary reduction (see instructions)	6			
7	Check here if the current year is the organization's first as a non-functionally instructions).	integrat-	d Tuna III -		
***	instructions).	Aiste	rype III suppo	rting organiza	tion (see

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990 EZ) 2018 FLORIDA GUARDIAN AD LITEM FOUNDATION INC 45-0501348 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions 1 Amounts paid to supported organizations to accomplish exempt purposes **Current Year** 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI). See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions Distributable amount for 2018 from Section C, line 6 Line 8 amount divided by line 9 amount 10 Section E - Distribution Allocations (see instructions) (iii) **Underdistributions Excess Distributions** Distributable Pre-2018 Amount for 2018 Distributable amount for 2018 from Section C, line 6 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI). See instructions 3 Excess distributions carryover, if any, to 2018 a From 2013 **b** From 2014 c From 2015 d From 2016 e From 2017 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2018 distributable amount i Carryover from 2013 not applied (see instructions) Remainder, Subtract lines 3g, 3h, and 3i from 3f. Distributions for 2018 from Section D. line 7: a Applied to underdistributions of prior years b Applied to 2018 distributable amount c Remainder, Subtract lines 4a and 4b from 4. 5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions 6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2019. Add lines 3j and 4c. Breakdown of line 7: a Excess from 2014 b Excess from 2015 c Excess from 2016 d Excess from 2017 e Excess from 2018

Schedule A (Form 990 or 990-EZ) 2018

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

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

Name of the organization

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Filers of: Section: Form 990 or 990-EZ X 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable to 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable to 501(c)(3) taxable private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Note: Only a section 501(c)(7), (8), or (10) organization can check boxe General Rule For an organization filing Form 990, 990-EZ, or 990-PF that reconstruction form any one contributor. Complete Parts I and II. Section 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule any one contributor, during the year, total contributions of the or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing year, total contributions of more than \$1,000 exclusively for religious, total contributions of more than \$1,000 exclusively for religious. Charitable, etc., pur is checked, enter here the total contributions that were received purpose. Don't complete any of the parts unless the General File religious, charitable, etc., contributions totaling \$5,000 or more aution: An organization that isn't covered by the General Rule and/or total it it must answer "No" on Part IV, line 2, of its Form 990-or check that it it must answer "No" on Part IV, line 2, of its Form 990-or check that it it must answer "No" on Part IV, line 2, of its Form 990-or check that it it must answer "No" on Part IV, line 2, of its Form 990-or check that it it must answer "No" on Part IV, line 2, of its Form 990-or check that it it must answer "No" on Part IV, line 2, of its Form 990-or check that it it must answer "No" on Part IV, line 2, of its Form 990-or check that it must answer "No" on Part IV, line 2, of its Form 990-or check that it it must answer "No" on Part IV, line 2, of its Form 990-or check that it it must answer "No" on Part IV, line 2, of its Form 990-or check that it must answer "No" on Part IV, lin	EM FOUNDATION I	NC 45-0501348
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527 political organization	zation	
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any one contributor, during the year, total contributions of the or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) fit year, total contributions of more than \$1,000 exclusively for religious. Complete Parts I (6 II, and III. For an organization described in section 501(c)(7), (8), or (10) fit year, contributions exclusively for religious, charitable, etc., pur is checked, enter here the total contributions that were received purpose. Don't complete any of the parts unless the General Fireligious, charitable, etc., contributions totaling \$5,000 or more ution: An organization that isn't covered by the General Bule and/or the	30 or 000 E7 that	
or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7). (8), or (10) fi year, total contributions of more than \$1,000 exclusively for reliprevention of cruelty to children or animals. Complete Parts I (e II, and III. For an organization described in section 501(c)(7), (8), or (10) fill year, contributions exclusively for religious, charitable, etc., pur is checked, enter here the total contributions that were received purpose. Don't complete any of the parts unless the General Fireligious, charitable, etc., contributions totaling \$5,000 or more ution: An organization that isn't covered by the General Bule and/or the parts.		
For an organization described in section 501(c)(7). (8), or (10) fi year, total contributions of more than \$1,000 exclusively for reliprevention of cruelty to children or animals. Complete Parts I (et II, and III. For an organization described in section 501(c)(7), (8), or (10) fill year, contributions exclusively for religious, charitable, etc., pur is checked, enter here the total contributions that were received purpose. Don't complete any of the parts unless the General Fireligious, charitable, etc., contributions totaling \$5,000 or more ution: An organization that isn't covered by the General Rule and/or the	greater of (1) \$5,000; or (2) 29	% of the amount on (i) Form 990. Part VIII. lin
prevention of cruelty to children or animals. Complete Parts I (et II, and III. For an organization described in section 501(c)(7), (8), or (10) fill year, contributions exclusively for religious, charitable, etc., pur is checked, enter here the total contributions that were received purpose. Don't complete any of the parts unless the General Fireligious, charitable, etc., contributions totaling \$5,000 or more ution: An organization that isn't covered by the General Rule and/or the second seco		the section of the se
prevention of cruelty to children or animals. Complete Parts I (et II, and III. For an organization described in section 501(c)(7), (8), or (10) fill year, contributions exclusively for religious, charitable, etc., pur is checked, enter here the total contributions that were received purpose. Don't complete any of the parts unless the General Fireligious, charitable, etc., contributions totaling \$5,000 or more ution: An organization that isn't covered by the General Rule and/or the second seco	ng Form 990 or 990 F7 that en	DODING from an
II, and III. For an organization described in section 501(c)(7), (8), or (10) fill year, contributions exclusively for religious, charitable, etc., pur is checked, enter here the total contributions that were received purpose. Don't complete any of the parts unless the General Fireligious, charitable, etc., contributions totaling \$5,000 or more ution: An organization that isn't covered by the General Rule and/or the second s		
is checked, enter here the total contributions that were received purpose. Don't complete any of the parts unless the General F religious, charitable, etc., contributions totaling \$5,000 or more ution: An organization that isn't covered by the General Bule and/or the contributions.	ntering "N/A" in column (b) ins	stead of the contributor name and address).
is checked, enter here the total contributions that were received purpose. Don't complete any of the parts unless the General F religious, charitable, etc., contributions totaling \$5,000 or more ution: An organization that isn't covered by the General Bule and/or the contributions.		
is checked, enter here the total contributions that were received purpose. Don't complete any of the parts unless the General F religious, charitable, etc., contributions totaling \$5,000 or more ution: An organization that isn't covered by the General Bule and/or the contributions.	ng Form 990 or 990-EZ that re	eceived from any one contributor, during the
religious, charitable, etc., contributions totaling \$5,000 or more ution: An organization that isn't covered by the General Bule and/or the	during the area (ons totaled more than \$1,000. If this box
ution: An organization that isn't covered by the General Bule and/or the	HE applies to this organization	n because it received
ution: An organization that isn't covered by the General Rule and/or t	during the year	Social received nonexclusively
	e Special Rules donn't El- O	object to D. (Fig. 1995)
		Z or on its Form 990.PF. Park I to a C.
rtify that it doesn't meet the filing requirements of Schedule B (Form 98	0, 990-EZ, or 990-PF).	= 3. 4 ha i oith 350°F, Part I, line 2, to
A For Paperwork Reduction Act Notice, see the instructions for Form 990,		Schedule B (Form 990, 990-EZ, or 990-PE) (

Employer identification number

FLORIDA GUARDIAN AD LITEM FOUNDATION INC

45-0501348

Part I	Contributors		15-0501348
	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GUARDIAN TRUST FOUNDATION		Person X
	901 CHESTNUT STREET, SUITE C	ss25,000.	Payroll
And the second second	CLEARWATER, FL 33756	-	(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	CHARLES A. FRUEAUFF FOUNDATION	-	Person X
	200 RIVER MARKET AVE #100	s10,000.	Payroll Noncash
www.anananananananananananananananananan	LITTLE ROCK, AR 72201		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	NETWORK FOR GOOD		Person X
	1140 CONNECTICUT AVE NW #700	\$15,825.	Payroll Noncash
Are more delicating the production on a company of	WASHINGTON, DC 20036	·	(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	BROADRICK FAMILY FOUNDATION		Person X
	19103 MERRY LANE	\$20,000.	Payroll Noncash
***************************************	LUTZ, FL 33548		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	CENTENE MANAGEMENT COMPANY, LLC		Person X
	7700 FORSYTH BOULEVARD	\$10,000.	Payroll Noncash
	ST LOUIS, MO 63105		(Complete Part II for noncash contributions.)
(a)	(b)	(c)	4.41
No.	Name, address, and ZIP + 4 ESTATE OF PATRICK COLLING TAXABLE	Total contributions	(d) Type of contribution
6	ESTATE OF PATRICK COLLINS LAW OFFICES OF PAUL J. BURKHART C/O NIKKI DEVIDZE		Person X
	800 VILLAGE SQUARE CROSSING, SUITE 115	\$ 278,500.	Payroll Noncash
823452 11-08-	PALM BEACH GARDENS, FL 33410		(Complete Part II for noncash contributions.)

Employer identification number

FLORIDA GUARDIAN AD LITEM FOUNDATION INC

45-0501348

(n) T	Noncash Property (see instructions). Use duplicate copies of F	rart ii if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a)		\$	4800 a 1900 a
No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a)			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
:			
		\$	-
(a) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-			
***		\$	
a) o. om irt i	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
a) o. om rt i	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

DI 00				Employer identification number				
Part III	A GUARDIAN AD LITEM FO	OUNDATION INC		45 0501240				
r di t in	from any one contributor. Complete columns	itions to organizations described in s	section 501(c)(7), (8), or (10) to	45-0501348				
	companing Part III, only the total of explication returns		ntry For organizations	S				
(a) No.	Use duplicate copies of Part III if additiona	space is needed.	to and keep to the mit mid but	8 1				
from Part I	(b) Purpose of gift	(b) Purpose of gift (c) Use of gift						
		(5) Out of gift	(d) Desc	ription of how gift is held				

		(e) Transfer of git	4					
		_						
-	Transferee's name, address, a	nd ZIP + 4	Relationship of tran	sferor to transferee				
-			Transforming of trai	steror to transferee				
-								
-								
(a) No.			-					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descr	iption of how gift is held				
			(-,	proof of now gift is neig				
-								
	(e) Transfer of gift							
	Year-day-day-							
-	Transferee's name, address, ar	Relationship of trans	feror to transferee					
(=) ()		WHEN THE PROPERTY OF THE PROPE						
(a) No. from	(b) Purpose of gift							
Part I	(a), a post of git	(c) Use of gift	(d) Descri	ption of how gift is held				
-								
		In Transfer of the						
	(e) Transfer of gift							
	Transferee's name, address, an	<u> d ZIP + 4</u>	Relationship of trans	Relationship of transferor to transferee				
			readionship of trans	eror to transferee				
~~~								
(a) No. from								
Part	(b) Purpose of gift	(c) Use of gift	(d) Descrip	tion of how gift is held				
			(a) Descrip	tion of now girt is held				
				CONTRACTOR CONTRACTOR OF THE CONTRACTOR CONT				
	(e) Transfer of gift							
	Transferacio	-						
	Transferee's name, address, and	ZIP + 4	Relationship of transfe	eror to transferee				
Management								
		**************************************						
3454 11-08-18				And healthy document of the second and the second a				

## SCHEDULE C (Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ➤ Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then ● Section 501(c)(3) organizations. Complete Parts I-A and B. Do not complete Part I-C.

- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy

Section 501(c)(4), (5), or (6) organiz	ations: Complete Part III.			
FLORID	A GUARDIAN AD LI ganization is exempt ur	TEM FOUNDAT	ION INC ) or is a section 52	Employer identification number 45-0501348
<ol> <li>Provide a description of the organical Political campaign activity expend</li> <li>Volunteer hours for political campaign</li> </ol>	ization's direct and indirect poli	tical campaign activities	s in Part IV,	<b>▶</b> \$
2 Enter the amount of any excise tax 3 If the organization incurred a section 4a Was a correction made?  b If "Yes," describe in Part IV	cincurred by the organization u incurred by organization mana on 4955 tax, did it file Form 472	nder section 4955 gers under section 495 0 for this year?	5	Yes No
<ul> <li>2 Enter the amount directly expended</li> <li>2 Enter the amount of the filing organ exempt function activities</li> <li>3 Total exempt function expenditures line 17b</li> <li>4 Did the filing organization file Form</li> <li>5 Enter the names, addresses and en made payments. For each organiza contributions received that were prepolitical action committee (PAC). If</li> </ul>	d by the filing organization for s nization's funds contributed to c s. Add lines 1 and 2. Enter here 1120-POL for this year? nployer identification number (E tion listed, enter the amount pa	and on Form 1120-POL	ction activities section 527  Diitical organizations to v zation's funds. Also ente	► \$ Yes No which the filing organization
(a) Name	(b) Address	(c) EIN	(d) Amount paid fro filing organization funds. If none, enter	s contributions received and
or Paperwork Reduction Act Notice, s	ee the Instructions for T			

LHA

Schedule C (Form 990 or 990-EZ) 2018

832041 11-08-18

Schedule C (Form 990 or 990-EZ) 2018  Part II-A   Complete if the organization 501(h))	FLORIDA GU ganization is exc	ARDIAN AD LI	TEM FOUNDAT:	ION IN 45-(	0501348 Page	
A Check ► if the filing organization	ation belongs to an a	ffiliated group (and list in	n Part IV each affiliated	group member's nam	e address EIN	
anportoco, and and	re or excess lobbying	g expenditures).		3 t	e, address, Ella,	
B Check ▶ if the filing organiza	ation checked box A	and "limited control" pro	ovisions apply.			
Lim (The term "expen	its on Lobbying Exp ditures" means amo	enditures ounts paid or incurred.		(a) Filing organization's totals	(b) Affiliated group totals	
1a Total lobbying expenditures to influ	uence public opinion	(grass roots lobbying)				
b Total lobbying expenditures to infli	b Total lobbying expenditures to influence a legislative body (direct lobbying)					
<ul> <li>Total lobbying expenditures (add li</li> </ul>	nes 1a and 1b)			7,500. 7,500.		
d Other exempt purpose expenditure				109,341.		
e Total exempt purpose expenditure	s (add lines 1c and 1	d)		116,841.		
f Lobbying nontaxable amount. Ente	er the amount from the	ne following table in both	n columns.	23,368.		
If the amount on line 1e, column (a) o		bbying nontaxable am			1 15 15 15 15 15 15 15 15 15 15 15 15 15	
Not over \$500,000	20% o	f the amount on line 1e.				
Over \$500,000 but not over \$1,000	0,000 \$100.0	000 plus 15% of the exce	ess over \$500,000			
Over \$1,000,000 but not over \$1,5	00,000   \$175,0	000 plus 10% of the exce	ess over \$1,000,000			
Over \$1,500,000 but not over \$17,	000,000 \$225,0	000 plus 5% of the exces	ss over \$1,500,000			
Over \$17,000,000	\$1,000	,000.				
	***************************************	****				
g Grassroots nontaxable amount (en	ter 25% of line 1f)			5,842.		
h Subtract line 1g from line 1a. If zero	o or less, enter -0-			0.		
i Subtract line 1f from line 1c. If zero	or less, enter -0-			0.		
if there is an amount other than zer	o on either line 1h or	line 1i, did the organiza	tion file Form 4720			
reporting section 4911 tax for this	/ear?		4406113.200.200.200.200.200.200.200.200.200.20		Yes No	
(Some organizations th	at made a section 5	eraging Period Under ( 01(h) election do not h rate instructions for lin	ave to complete all of	the five columns be		
	Lobbying Expe	nditures During 4-Yea	Averaging Period			
Calendar year						
(or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) Total	
					``	
20 Labbulan manta at l	4 000					
2a Lobbying nontaxable amount	4,880.	30,693.	16,839.	23,368.	75,780.	
b Lobbying ceiling amount (150% of line 2a, column(e))						
(130% Of lifte 2a, column(e))					113,670.	
C Total labbuing supports	F 404			1		
c Total lobbying expenditures	5,404.	8,000.	7,635.	7,500.	28,539.	
d Grassroots nontaxable amount	1 224	7 (7)			***************************************	
e Grassroots ceiling amount	1,220.	7,673.	4,210.	5,842.	18,945.	
(150% of line 2d, column (e))						
- January (e)			- F. 1 - F.		28,418.	
f Grassroots lobbying expenditures					THE STATE OF THE S	

Schedule C (Form 990 or 990-EZ) 2018

Schedule C (Form 990 or 990-EZ) 2018 FLORIDA GUARDIAN AD LITEM FOUNDATION IN 45-0501348 Page 3

Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		(b)	
or referendum, through the use of:  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 18?		No	An	ount
or referendum, through the use of:  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 18?				**************************************
Volunteers?     Paid staff or management (include compensation in expenses reported on lines 1c through 18?)				
b Paid staff or management (include compensation in expenses reported on lines 1c through 18?				
Place starr or management (include compensation in expenses reported on lines 1c through 1i)?				
• Micola advertisettletts (				
d Mailings to members, legislators, or the public?				
Publications, or published or broadcast statements?  Grants to other organizations for lobbyles.				***************************************
to care organizations for lobbying purposes?				**************************************
g Direct contact with legislators, their staffs, government officials, or a legislative body?		-		***************************************
Other patients of any similar means?				
i Other activities?		***************************************		
j Total. Add lines 1c through 1i				
bid the activities in line 1 cause the organization to be not described in section 501/6/2/2			-	
of If "Yes," enter the amount of any tax incurred under section 4912				
If "Yes," enter the amount of any tax incurred by organization managers under section 4912			***************************************	***
In the filling organization incurred a section 4912 tax, did it file Form 4720 for this years.				***********
rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	ion 501(c)(5)	, or sec	tion	
Ware published a No. 11. 11. 11. 11. 11. 11. 11. 11. 11. 1	:	T	Yes	No
Were substantially all (90% or more) dues received nondeductible by members?		1	***************************************	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
Did the organization agree to carry over lobbying and political campaign activity expenditures from till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(4), section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III. A fine section 501(c)(6) and if either (a) BOTH Port III.	the prior year?			
answered "Yes."	d "No," OR (i	b) Part I	II-A, line	3, is
Dues, assessments and similar amounts from members		11		****
Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the coating 507(e).	itical	<b></b>		***************************************
expenses for which the section 52/(1) tax was paid).				
Current year		2a		
Carryover from last year		2b		
rotal	The state of the s		***************************************	-
Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	CONTRACTOR CONTRACTOR	2c		
in notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex-		3	***************************************	wind the second
does the organization agree to carryover to the reasonable estimate of popularities lobbying and	nolitical			
experience next year?	pomoai			
Taxable amount of lobbying and political expenditures (see instructions)		4		
t IV Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group ctions); and Part II-B, line 1. Also, complete this part for any control of the second		5		

## SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

FLORIDA GUARDIAN AD LITEM FOUNDATION INC

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or

Employer identification number 45-0501348

*******	organization answered "Yes" on Form 990, Part IV, lin	ne 6.	r Acco	ounts. Complete if the
		(a) Donor advised funds	(b) !	Funds and other accounts
1	Total number at end of year		(-/	ando dire accounts
2	33-19-11 value of contributions to (during year)			
3	33 - 3 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -		***************************************	
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	funde	
_	and the organization's property, subject to the organization's	exclusive legal controls		
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that arous 6	ad only	Yes No
	purposes and not for the benefit of the donor of	r donor advisor, or for any other nurpose on	ed Only	
Б	Prince Divate Delient;			
-	Complete if the ord	lanization answered "Ves" on Form 000, D-	t IV. line	Yes No
1	and the organization easements need by the organization	in (check all that apply)	/	
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of a histori	cally imp	ortant land area
	Protection of natural habitat	Preservation of a certific	d histori	ic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi day of the tax year.	ed conservation contribution in the form of	CORRE	votion account and a
			COLISE	Hold at the Ford of the Tax
	Total number of conservation easements		28	Held at the End of the Tax Year
ł	Total doleage restricted by conservation assamente			
•	true of conservation easements on a certified historic stru	Cture included in (a)		
•	and a second case in the included in (c) acquired a	fter 7/25/06, and not on a historic structure		
	"Stee in the National Register		- 1	
3	releasements modified, transferred, rele	ased, extinguished, or terminated by the orr	anizatio	n during the tou
	AND THE PROPERTY OF THE PROPER			Trucking the tax
4	Number of states where property subject to conservation ease	ement is located		
5	Does the organization have a written policy regarding the period	odic monitoring inspection bandling of		
_	violations, and enforcement of the conservation easements it i	nolde?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	andling of violations, and enforcing conserv	ition eas	Yes No
-				
7	Amount of expenses incurred in monitoring, inspecting, handli  \$\rightarrow\$\$	ng of violations, and enforcing conservation	easeme	nts during the year
				into during the year
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170(h)(4)	(B)(i)	
9	and section 170(n)(4)(B)(ii)?			Yes No
9	describe now the organization reports conservation	ageamante in its		ind halance sheet and
	and a the founde to the organization	n's financial statements that describes the	rganizat	tion's accounting for
Pa	conservation easements. t III   Organizations Maintaining Collections of		<b>3</b>	accounting for
	Oliections of A	Art, Historical Treasures, or Other	Simila	ar Assets.
12	- This is a signification answered Tes on Form 9	90 Part IV line 0		
14	If the organization elected, as permitted under SFAS 116 (ASC historical treasures, or other similar assets held for public publ	958), not to report in its revenue statement	and bala	ince sheet works of art
	and a door is the public extill	WILDER EDUCATION OF FOCOGRAP in facility	of public	Service provide in Day VIII
h	the text of the footnote to its financial statements that describe	s these items.	,	os mos, provide, in rait XIII,
U	If the organization elected, as permitted under SFAS 116 (ASC treasures, or other similar assets held for public exhibition, edu-	958), to report in its revenue statement and	balance	Sheet works of any historical
	treasures, or other similar assets held for public exhibition, edu- relating to these items:	cation, or research in furtherance of public s	ervice n	rovide the following amount
	relating to these items:	,		the following amounts
	(i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X	Control of the Contro	<b>&gt;</b>	\$
2				\$
2			. provide	
				•
-	restated molecular term 990, Part VIII, line 1		-	\$
			. •	The state of the s
	to the struction act Notice, see the instructions for	r Form 990.		Schedule D (Form 990) 2018
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Part III Organizations Maintaining  3 Using the organization's acquisition access	A GUARDIAN  Collections of A	AD LITEM I	OUNDA	I NOI	NC 45-0	501348	3 Page
3 Using the organization's acquisition, acces (check all that apply):	sion, and other record	te check any of the	easures,	or Other	Similar Asse	ts (contin	uedi
(check all that apply):	and other record	15, Check any or the	tollowing th	nat are a sig	Inificant use of its	collection	items
a Public exhibition							
b Scholarly research	,	Loan or ex	change pro	grams			
c Preservation for future generations	•	Other					
4 Provide a description of the organization is	antinus i i i						
<ul> <li>4 Provide a description of the organization's of</li> <li>5 During the year, did the organization solicity</li> </ul>	collections and explai	n how they further	the organiza	tion's exem	pt purpose in Par	t XIII.	
o your and organization south	Or receive donations	of art historical tra-		her similar a	assets		
Part IV Escrow and Custodial Arras	naintained as part of t	he organization's c	ollection?			Yes	No.
Part IV Escrow and Custodial Arrar reported an amount on Form 990, P.	art X. line 21	ete if the organizati	on answered	d "Yes" on F	orm 990, Part IV	line 9, or	
1a Is the organization an agent, trustee, custoo	tian or other intermed	iany for contribution	So or other s				
on Form 990, Part X?		ary for contribution	is or other a	ssets not in	cluded		-
b If "Yes," explain the arrangement in Part XII	and complete the fol	lawina tahla	*** - * * * * * * * * * * * * * *			Yes	X No
•	and complete the lo	owing table:				-	
c Beginning balance					<u> </u>	Amount	
d Additions during the year					1c	***************************************	-
d Additions during the year  e Distributions during the year	***************************************				1d		
Distributions during the year     Ending balance				eren eren eren gere	1e		
					11		
					/?	Yes	No
b If "Yes," explain the arrangement in Part XIII Part V Endowment Funds, Complete	Check here if the ex	planation has been	provided on	Part XIII	*******		X
Part V   Endowment Funds. Complete	if the organization and	swered "Yes" on Fo	orm 990, Par	t IV, line 10			
1a Beginning of year balance	(a) Current year	(b) Prior year	(c) Two ye		1) Three years back	(e) Four v	ears back
and the contract of the contra						1-1-1-1	adio odon
Andrew Control of the							***************************************
c Net investment earnings, gains, and losses							-
d Grants or scholarships						<del> </del>	-
e Other expenditures for facilities							
and programs							
f Administrative expenses					**************************************	<del> </del>	
g End of year balance				·	***************************************		***************************************
2 Provide the estimated percentage of the curr	ent year end balance	(line 1g. column (a)	) held as:			<u> </u>	
a board designated or quasi-endowment		%	,				
b Permanent endowment	%	w					
c Temporarily restricted endowment	%						
The percentages on lines 2a, 2b, and 2c show	uld equal 100%.						
3a Are there endowment funds not in the posser by:	ssion of the organizat	ion that are hold on	d administra				
by:	- Galling	on that are neld an	o auministei	ed for the c	organization		
(i) unrelated organizations							es No
(ii) related organizations						3a(i)	
b If "Yes" on line 3a(ii), are the related organizat	tions listed as require	ton Schodule DO				3a(ii)	
4 Describe in Part XIII the intended uses of the	Organization's andow	mont funds				3b	
Part VI Land, Buildings, and Equipme	ent.	ment fullus.				******	
Complete if the organization answered	"Yes" on Form 990	Part IV line 11a Ca	000 Earm 000	David V. E.	4.0		
Description of property	(a) Cost or oth						
•	basis (investme	, , , , , , ,				(d) Book v	alue
1a Land		nt) basis (d	20101)	aepre	ciation		-
<b>b</b> Buildings							
c Leasehold improvements				-			
d Equipment							
e Other				NOVEMBER OF THE PROPERTY OF TH			
				***************************************		***************************************	
otal. Add lines 1a through 1e. (Column (d) must eq	ual Form 990, Part X	column (B). line 10:	-1		<b>&gt;</b>		0.
					Schedule I		

	es" on Form 990 Part IV lie	o 11h Cas Casson		
Complete if the organization answered "Y (a) Description of security or category (including name of securi	(b) Book value	(c) Method of	Part X, line 12.	
Financial derivatives		(c) Metriod of	valuation: Cost	or end-of-year market value
2) Closely-held equity interests			The state of the s	
3) Other				
(A)			Control of the Party of the Par	
(B)				
(C)				
(D)				
(E)				
(F)			· · · · · · · · · · · · · · · · · · ·	
(G)				
(H)				**************************************
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
investments - Program Related.				
Complete if the organization answered "Ye (a) Description of investment	s" on Form 990, Part IV, line	11c. See Form 990, I	Part X. line 13.	
(1)	(b) Book value	(c) Method of vi	aluation: Cost o	r end-of-year market value
(2)				- 3 - COUNTRY VAIUE
(3)				
(4)				
(5)			**************************************	
(6)				
(7)				
(8)				
artia   Other Assets.				
Complete if the organization answered "Yes	on Form 990, Part IV, line	11d. See Form 990, P	art X, line 15.	
Complete if the organization answered "Yes (a		11d. See Form 990, P	art X, line 15.	(b) Book value
Complete if the organization answered "Yes (a	on Form 990, Part IV, line	11d. See Form 990, P	art X, line 15.	(b) Book value
Complete if the organization answered "Yes (a)	on Form 990, Part IV, line	11d. See Form 990, P	art X, line 15.	(b) Book value
Complete if the organization answered "Yes (a) (2) (3)	on Form 990, Part IV, line	11d. See Form 990, P	art X, line 15.	(b) Book value
Complete if the organization answered "Yes (a) (2) (3) (4)	on Form 990, Part IV, line	11d. See Form 990, P	art X, line 15.	(b) Book value
Complete if the organization answered "Yes (a) (2) (3) (4) (5)	on Form 990, Part IV, line	11d. See Form 990, P	art X, line 15.	(b) Book value
Complete if the organization answered "Yes (a	on Form 990, Part IV, line	11d. See Form 990, P	art X, line 15.	(b) Book value
Complete if the organization answered "Yes (a) (2) (3) (4) (5) (6) (7)	on Form 990, Part IV, line	11d. See Form 990, P	art X, line 15.	(b) Book value
Complete if the organization answered "Yes (a) (2) (3) (4) (5) (6) (7) (8)	on Form 990, Part IV, line	11d. See Form 990, P	art X, line 15.	(b) Book value
Complete if the organization answered "Yes (a (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9	" on Form 990, Part IV, line a) Description	11d. See Form 990, P	art X, line 15.	(b) Book value
Complete if the organization answered "Yes (a (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (Column (b) must equal Form 990, Part X col. (B) lin rt X Other Liabilities.  Complete if the organization answered "Yes"	" on Form 990, Part IV, line  Description  1 Description	1e or 11f. See Form 9		
Complete if the organization answered "Yes (a)  [1]  [2]  [3]  [4]  [5]  [6]  [7]  [8]  [9]  [a]  [b]  [c]  [c]  [c]  [c]  [d]  [d]  [d]  [d	" on Form 990, Part IV, line  Description  1 Description			
Complete if the organization answered "Yes (a)  [1]  [2]  [3]  [4]  [5]  [6]  [7]  [8]  [9]  [a]  [Column (b) must equal Form 990, Part X col. (B) limit X Other Liabilities.  Complete if the organization answered "Yes"  (a) Description of liability  [1] Federal income taxes	" on Form 990, Part IV, line  Description  1 Description	1e or 11f. See Form 9		
Complete if the organization answered "Yes (a)  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (II. (Column (b) must equal Form 990, Part X, col. (B) limit (T)  (T)  (A) Description of liability  (B) Federal income taxes  (2)	" on Form 990, Part IV, line  Description  1 Description	1e or 11f. See Form 9		
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Complete if the organization answered "Yes (a)  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (a)  (Column (b) must equal Form 990, Part X coi. (B) limits (Column (b) must equal Form 990, Part X coi. (B) limits (a)  (a) Description of liability  (b) Description of liability  (c)  (a) Description of liability  (b) Federal income taxes  (c)  (d)  (e)  (f)	" on Form 990, Part IV, line  Description  1 Description	1e or 11f. See Form 9		
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Complete if the organization answered "Yes (a)  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (a)  (Column (b) must equal Form 990, Part X coi. (B) limits (Column (b) must equal Form 990, Part X coi. (B) limits (a)  (a) Description of liability  (b) Description of liability  (c)  (a) Description of liability  (b) Federal income taxes  (c)  (d)  (e)  (f)	on Form 990, Part IV, line Description  e 15)  on Form 990, Part IV, line 1	1e or 11f. See Form 9		

Schedule D (Form 990) 2018

	t XI Reconciliation of Revenue per Audit of Fig.	TEM FOUNDATION INC	45-0501348	Page 4
<u> </u>	T XI Reconciliation of Revenue per Audited Financial S	tatements With Revenue pe	r Return.	· age
1	Part IV	line 12a.		
2	Total revenue, gains, and other support per audited financial statements		1	
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			-
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
_	Add lines 2a through 2d		<del></del>	
3	Cubtract line 2e from line 1	The state of the s	2e	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	The state of the s	3	···
a	Investment expenses not included on Form 990. Part VIII, line 7h	48		
	Other (Describe in Part XIII.)			
	Add lines 4a and 4b			
5 Doz	total revenue, Add lines 3 and 4c (This must be a	The state of the s	40	***************************************
rar	Signature of Expenses per Audited Financial S	tatements With Expenses of	er Return	
***************************************	Somplete if the Organization answered "Yes" on Form 990, Part IV	ine 12a.	(IVLWIII,	
1	lotal expenses and losses per audited financial statements			~
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	······································		
а	Donated services and use of facilities	2a		
b	Prior year adjustments Other Insses	2b		
-	110110000	20		
	Other (Describe in Part XIII.)	2d		
	Add lines 2a through 2d	[20]		
	Subtract line 26 from line 1	**************************************		-
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		3	***************************************
а	nvestment expenses not included on Form 990. Part VIII, line 7h	4a		
b	Other (Describe in Part XIII.)	4b		
	Add lines 4a and 4b	No.		
5	otal expenses. Add lines 3 and 4c (This must as a first	(8)	46	····
	The state of the s		. 5	····
Provide	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and d and 4b; and Part XII, lines 2d and 4b; Also complete this and the second to the secon	4. Part IV lines th and the Dad V E.		
lines 2	d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a	ny additional information	e 4; Part X, line 2; Part XI,	
***************************************		y == 0.00 marting (i).		
D 3 D 0				
PART	IV, LINE 2B:			
กนธ	ACENCY TIPE TO			***************************************
INE	AGENCY FUND IS CUSTODIAL IN NATURE AND	D DOES NOT INVOLVE	MEASUREMENT O	F
RRCI	TIME OF ODDDAMIONS			T.
<u>IVESC</u>	LTS OF OPERATIONS. THE FOUNDATION'S AC	SENCY FUND ACCOUNTS	FOR	
				-
ACII	VITIES RELATED TO STATEWIDE CIRCUIT GO	JARDIAN AD LITEM NO	N-PROFITS FOR	
	UIT 5 AND 7.		TO TON	-
	OII J AND /.			
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				- Transmission
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SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Attach to Form 990.

Name of the organiz

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

Does the organization maintain records criteria used to award the grants or assistance. Describe in Part IV the organization s property.	ocedures for mon	toring the use of orang	Marianta da Maria de la composición dela composición de la composición de la composición dela composición de la composición de la composición del composición dela com			* 1	Yes X
Committee and Other Assistance to	Domestic Organi	Zations and Domesti	ic Gaussammant - F		anization answered "	Van' on Ferm 000 D.	At a second
recipient that received more than 5 1 (a) Name and address of organization	The state of the s		(10) an element to taker	ed.		ies on roan eso, Pan	IV. line 21, for any
or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
BROADRICE FAMILY FOUNDATION							VOLUNTEER TRAINING
19103 MERRY LANE				-			EVENTS, SOCIAL MEDIA
LUT2, FL 33548	27-2894614	501(C)(3)	20,000.	0.			MARKETING FOR RECRUITMEN
May 22 A Page And							AND NORMALCY ACTIVITIES.
THE JIM MORAN FOUNDATION 188 JIM MORAN BLVD		-					VOLUNTEER TRAINING
DEERFIELD BEACH, FL 33442		- Control					EVENTS, SOCIAL MEDIA
DEACH, PL 33442	65-1058044	501(C)(3)	2,720.	0.			MARKETING FOR RECRUITMENT AND HORMALCY ACTIVITIES.
CHARLES A. FRUEAUFF FOUNDATION							VOLUNTEER TRAINING
200 RIVER MARKET AVE \$100				•			EVENTS, SOCIAL MEDIA
LITTLE ROCK, AR 72201	13-5605371	501(0)(3)		and the same of th			MARKETING FOR RECRUITMENT
BUARDIAN AD LITEM FOUNDATION OF			6,000.	0.			AND NORMALCY ACTIVITIES.
AMPA BAY, INC 14250 49TH							VOLUNTEER TRAINING
TREET NORTH, SUITE 4000 -							EVENTS, SOCIAL MEDIA
LEARWATER, FL 33762	59-2961546	501(C)(3)	2,250,	٥.			MARKETING FOR RECRUITMENT
totane or the		Mark Sales Communication Control of the Control of					AND NORMALCY ACTIVITIES.
OICES OF CHILDREN OF TAMPA BAY	and the second						OLUNTEER TRAINING
NC 3314 W. HENDERSON BLVD. TE. 207 - TAMPA FL 33609			99				EVENTS, SOCIAL MEDIA
20 TARPA, PL 33609	59-2737702	501(C)(3)	2,250.	0.			CARKETING FOR RECRUITMENT
Superior Control of Co							AND NORMALCY ACTIVITIES.
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aperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2018)

832101 11-02-18

Schedule I (Form 990) (2018) FLORIDA GUA Part III Grants and Other Assistance to Domestic Indi Part III can be duplicated if additional space is ne	RDIAN AD LITI viduals. Complete if the	organization answ	ered "Yes" on Form §	990, Part IV, line 22.	45-0501348 Page
(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
CHOLARSHIPS					
CULTURE I FE	3	10,000.	0.		

art IV Supplemental Information Provide the offerent					
art IV Supplemental Information. Provide the information	on required in Part I, line	2; Part III, column (b); and any other add	ditional information.	
			The state of the s		
00 11-02-16					
ne i composito		33			Schedule I (Form 990) (2018)

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Department of the Treasury Internal Revenue Se Name of the organization

Employer identification number

FLORIDA GUARDIAN AD LITEM FOUNDATION INC 45-0501348 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: PROVIDE ASSISTANCE AND CONSULTATION TO THE 21 STATE NON-PROFITS THAT SUPPORT THE LOCAL GAL PROGRAM. WORK WITH THE STATE PROGRAM OFFICE TO RECRUIT NEW VOLUNTEERS AND PROGRAM PROMOTION. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THE FLORIDA GUARDIAN AD LITEM FOUNDATION'S MISSION IS TO PROVIDE ADDITIONAL RESOURCES FOR THE GAL PROGRAM, ITS VOLUNTEERS, AND ITS AFFILIATED CIRCUIT NON-PROFIT ORGANIZATIONS IN ORDER TO PROMOTE GUARDIAN AD LITEM REPRESENTATION FOR ABUSED, NEGLECTED AND ABANDONED CHILDREN IN FLORIDA'S DEPENDENCY SYSTEM. FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: VOLUNTEERS. THE FOUNDATION FUNDS SUCH THINGS AS MEDICAL NEEDS AND MONEY FOR ACTIVITIES RELATED TO NORMALCY FOR CHILDREN REPRESENTED BY GUARDIAN AD LITEM VOLUNTEERS. THROUGH ADDITIONAL FINANCIAL SUPPORT OF THE FLORIDA GUARDIAN AD LITEM PROGRAM, THE GUARDIAN AD LITEM FOUNDATION IS HELPING CREATE A NEW REALITY, WHERE EVERY ABUSED, ABANDONED AND NEGLECTED CHILD IN FLORIDA HAS A VOICE IN COURT THROUGH THEIR GUARDIAN AD LITEM. FORM 990, PART VI, SECTION B, LINE 11B: ORGANIZATION REVIEWS RETURN AT QUARTERLY MEETING BEFORE FILING.

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

ALL OFFICERS AND DIRECTORS AFFIRMATIVELY STATE IN WRITING, COMPLIANCE WITH LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2018) 832211 10-10-18

Schedule O (Form 990 or 990-EZ) (2018) Name of the organization		Page
FLORIDA GUARDIAN AD LITEM F	OUNDATION INC	Employer identification number 45-0501348
THE CONFLICT OF INTEREST POLICY.		
FORM 990, PART VI, SECTION C, LINE 19:		
ORGANIZATION DOCUMENTS AVAILABLE UPON REQU	JEST.	
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