

FLORIDA DEPARTMENT OF JUVENILE JUSTICE

August 15, 2021

The Honorable Ron DeSantis, Governor State of Florida PL 05 The Capitol Tallahassee, Florida 32399-0001

The Honorable Wilton Simpson President, The Florida Senate 409 The Capitol Tallahassee, Florida 32399-1100

The Honorable Chris Sprowls Speaker, Florida House of Representatives 420 The Capitol Tallahassee, Florida 32399-1300

Dr. R. Philip Twogood Coordinator, OPPAGA 111 West Madison, Room 312 Tallahassee, Florida 32399

Dear Governor DeSantis, President Simpson, Speaker Sprowls, and Dr. Twogood:

In accordance with section 20.058, Florida Statutes, the Department of Juvenile Justice (DJJ) provides the following strong recommendation to continue the Florida Juvenile Justice Foundation (Foundation). The Department and the Foundation share a long history of working together to improve the lives of at-risk children and their families. The Foundation began as a public-private partnership program of DJJ in 1994. Today, it is a thriving 501(c)(3) authorized by section 985.672, Florida Statutes. The Foundation's guiding principles are to:

- support the Department of Juvenile Justice, as their direct-support organization, in carrying out its mission;
- individually and collectively act in accordance with the adopted Code of Ethics;
- communicate openly in accordance with Florida's Sunshine Law;
- protect confidential records and information;
- coordinate, whenever possible, fund-raising efforts with the Department;
- serve as ambassadors of goodwill for the Department and the youth it serves;
- protect donors through sound investment policies;
- enhance, not supplant, state funding of programs; and
- recognize achievements and distinctions of those who support the Foundation's mission.

2737 Centerview Drive • Tallahassee, Florida 32399-3100 • (850) 488-1850

Ron DeSantis, Governor

Josefina M. Tamayo, Acting Secretary

Page Two August 15, 2021

The Foundation works toward these principles with a mission to solicit and steward private gifts to promote education and vocational services, and public safety through effective prevention, diversion and intervention services. The Foundation's Board of Directors creates policies, provides direction, raises funds, and stewards all funds raised to enhance the activities of the Florida Department of Juvenile Justice. The Foundation achieves this specifically by promoting delinquency prevention, intervention and educational opportunities for youth.

One of the many programs the Foundation funds is the Youth Investment Award program, which provides financial assistance designed to further the education and employability of juvenile justice-involved youth. In addition, the Foundation funds back-to-school drives, Youth Success Week, and provides support and recognition for the DJJ Teacher of the Year award. The Foundation is an integral part of the Department of Juvenile Justice and shares a long and collaborative relationship that is rare amongst direct-support organizations.

In recognition of the support the Foundation provides to DJJ, I therefore fully recommend the continued collaboration and association between the Department and the Foundation.

Sincerely,

Josefina M. Tamayo, Acting Secretary



Florida Juvenile Justice Foundation, Inc.

FIJFoundation.org



2737 Centerview Drive Tallahassee, FL 32399-3100 850-717-2705

Josefina Tamayo, Acting Secretary

BOARD OF DIRECTORS

Monesia T. Brown Chairman August 1, 2021

Paul Mitchell Immediate Past Chair Acting Secretary Josefina Tamayo Florida Department of Juvenile Justice 2737 Centerview Drive Tallahassee, FL 32399

Tadar Muhammad Vice Chair

Dear Acting Secretary Tamayo:

Wansley Walters

Dorea Mays

The Florida Juvenile Justice Foundation, Inc. (FJJF) submits the following information and attachments to meet the reporting requirements in section 20.058. Florida Statutes

Dee Ann Smith

Smith 20.058, Florida Statutes.

Christy Daly-Brodeur

The FJJF is proud to support the Department of Juvenile Justice through the FJJF mission to positively change the lives of at-risk youth through the promotion of prevention, intervention and academic achievement efforts while placing strong emphasis on workforce readiness.

Isabel Gonzalez

Meagan Gallagher

Please feel free to contact me directly with any questions or requests for additional information you may have.

Sincerely,

EXECUTIVE DIRECTOR

Caroline Ray
Caroline.Ray@djj.state.fl.us
Phone: 850.294.2749

Cardin Ray

Caroline Ray, Executive Director



Florida Juvenile Justice Foundation Annual Reporting Requirements In accordance with section 20.058, Florida Statutes

Table of Contents

1. The name, mailing address, telephone number, and website Page 2 address of the organization. 2. The statutory authority or executive order pursuant to which Page 2 the organization was created. 3. A brief description of the mission of, and results obtained by, Page 2-3 the organization. 4. A brief description of the plans of the organization for the next Addendum 1 3 fiscal years. 5. A copy of the organization's code of ethics. Addendum 2 6. A copy of the organization's most recent Federal Internal Revenue Addendum 3 Service Return of Organization Exempt from Income Tax form (Form 990).

1. The name, mailing address, telephone number, and website address of the organization.

Name:

Florida Juvenile Justice Foundation

Address:

2737 Centerview Drive, Suite 3100, Tallahassee, Florida 32399

Telephone:

(850) 717-2705

Website:

http://www.djj.state.fl.us/fjjf/

2. The statutory authority or executive order pursuant to which the organization was created.

The Florida Juvenile Justice Foundation (FJJF) was established in 1999 by Chapter 99-284, Laws of Florida, which is incorporated in law as section 985.672, Florida Statutes. This section of law was last amended during the 2018 legislative session to strike the sunset repeal date.

3. A brief description of the mission of, and results obtained by, the organization.

Mission: The Florida Juvenile Justice Foundation is a not-for-profit 501(c)(3), which serves as the Direct-Support Organization to the Department of Juvenile Justice. It is the mission of the Foundation to solicit and steward private gifts to promote education and vocational services, and public safety through effective prevention, diversion, and intervention services.

Results: The Foundation serves to change lives – the lives of students, the lives of their parents, and the lives of the citizens in our communities – by promoting delinquency prevention, intervention and educational opportunities for youth. The FJJF has a vibrant board of directors made up of community leaders that are active and engaged in FJJF business. The board meets quarterly to ensure the organization is on point with the strategic plan. In addition, fundraising tasks are completed throughout the year by each member of the board. Frequent meetings with the board president and the executive director help ensure the vision of the Foundation is met and supported by member fundraising.

The Foundation partnered with the Florida Prepaid Foundation to provide 2-year prepaid college/technical school scholarships to the Department of Juvenile Justice involved youth. A scholarship committee was established to assist with the scholarship process. A fundraising committee was established to create events to provide sources of revenue to fund additional scholarships. The marketing committee updated a brochure to promote the mission of Foundation to attract donors to support the work of the Foundation through giving opportunities.

Although the pandemic prevented in person events, the Foundation was able to coordinate a successful online Angel Book Drive Fundraiser to provide funds for the Department of Juvenile Justice to provide \$5,000 for the Foundation to purchase books for the Office of Prevention for distribution to youth programs throughout Florida.

Specific Activities: Funding is financed through grants and donations.

- General Foundation Fund: General Fund responsive to statewide needs specific to juvenile justice initiatives, including:
 - Back to school drives;
 - Provide activities equipment to Detention Centers;
 - Provide Youth Success Packages of clothing, toiletries and basic personal items;

- o Detention Centers Gardening Program Expansion
- Youth Ambassador Awards;
- National Faith Based Symposium organization and sponsorship;
- National grants through the Annie E. Casey Foundation to support Juvenile Detention Alternatives Initiatives;
- o DJJ Teacher of the Year support and recognition;

A few of the normal activities supported did not occur in 2020 due to pandemic restrictions throughout Florida.

- Youth Investment Awards Fund: Financial assistance designed to further the education and employability of juvenile justice-involved youth.
 - Vocational school tuition and fees;
 - Specialty therapies;
 - GED fees;
 - o Emergency living expenses.

4. A brief description of the plans of the organization for the next 3 fiscal years.

Please see Addendum 1, the Florida Juvenile Justice Foundation Strategic Plan document, for a thorough description of organizational goals and strategic goals, which comprise the organization's plans for the next three fiscal years.

5. A copy of the organization's code of ethics.

Please see Addendum 2, the Florida Juvenile Justice Foundation Code of Ethics document, which serves as the organization's code of ethics.

6. A copy of the organization's most recent federal Internal Revenue Service Return of Organization Exempt from Income Tax form (Form 990).

Please see Addendum 3, the Florida Juvenile Justice Foundation IRS Form 990, to complete this requirement.



Florida Juvenile Justice Foundation Annual Reporting Requirements In accordance with section 20.058, Florida Statutes

ADDENDUM 1: Florida Juvenile Justice Foundation Strategic Plan



Florida Juvenile Justice Foundation Strategic Plan

Mission Statement

The Florida Juvenile Justice Foundation is a not-for-profit 501(c)(3), which serves as the Direct-Support Organization to the Department of Juvenile Justice. It is the mission of the Foundation to solicit and steward private gifts to promote education and vocational services, and public safety through effective prevention, diversion and intervention services. Our mission is to positively change the lives of at-risk youth through the promotion of prevention, intervention and academic achievement efforts while placing strong emphasis on workforce readiness.

Vision

With an ever-decreasing number of youth entering the juvenile justice system, we envision an enhanced continuum of services to promote positive outcomes for youth. The Foundation will be nationally recognized in this effort.

Guiding Principles

- Support the Department of Juvenile Justice, as their direct-support organization, in carrying out its mission;
- Individually and collectively act in accordance with the adopted Code of Ethics;
- Communicate openly in accordance with Florida's Sunshine Law;
- Protect confidential records and information;
- Coordinate, whenever possible, fund-raising efforts with the Department;
- Serve as ambassadors of goodwill for the Department and the youth it serves;
- · Protect donors through sound investment policies;
- Enhance, not supplant, state funding of programs; and
- Recognize achievements and distinctions of those who support the Foundation's mission.

Goal Overview

- 1. Seek and Acquire Funding
- 2. Support the DJJ Mission
- 3. Sustain Foundation Development

Strategic Goals

Goal 1: Seek supplemental funds to encourage and support youth with the tools necessary to further their success, as certain funds for specific requests are not otherwise available.

- Strategic Objective 1. Fund and administer Youth Investment Award scholarship program.
- Strategic Objective 2. Fund and administer Florida Prepaid scholarship program.
- Strategic Objective 3. Partner with granting organizations and corporations focused on meeting life transition needs of youth, including those who are pursuing career or postsecondary education.

• Strategic Objective 4: List the state and local agencies with whom to coordinate to fill training gaps for youth choosing to join the workforce.

Goal 2: Work on development and promotion of initiatives designed to meet the mission of the Department.

- Strategic Objective 1: Develop a marketing plan to communicate with and market to Juvenile Justice Circuit Advisory Boards, faith-based organizations, and other local and state organizations to promote delinquency prevention, diversion and intervention programs.
- Strategic Objective 2: Create business and other partnerships to support the leadership and community-based programs of the Department.
- Strategic Objective 3: Increase awareness of the Department and the Foundation in their efforts to increase public safety by reducing juvenile delinquency.

Goal 3: Sustain the development and growth of the Foundation.

- Strategic Objective 1: Increase Board membership to no more than 20 members. Current Board members to recommend individual to Executive Director, Caroline Ray.
- Strategic Objective 2: Develop and implement a plan with targeted milestones to increase board members in specific geographic locations throughout Florida.
- Strategic Objective 3: Develop and launch a public awareness campaign regarding the foundation and its initiatives.
- Strategic Objective 5: Develop a prospective donor and business partner list to support the mission and vision to be updated annually.



Florida Juvenile Justice Foundation Annual Reporting Requirements In accordance with section 20.058, Florida Statutes

ADDENDUM 2: Florida Juvenile Justice Foundation Code of Ethics



Florida Juvenile Justice Foundation Code of Ethics

Statement of Commitment

In establishing policy for and on behalf of the Florida Juvenile Justice Foundation, Inc., each board member is a custodian in trust of the assets of the organization. The organization needs competent and committed board members to serve the organization in a sincere and ethical way.

Therefore, as a board member of the Florida Juvenile Justice Foundation, Inc., please acknowledge and complete the Code of Ethics Statement of Commitment.

In addition, each employee of the Foundation shall abide by the same Codes of Ethics as members of the board. Further, each Foundation employee shall acknowledge and complete the Code of Ethics Statement of Commitment. Each employee of the Foundation shall comply with the Department's Policy #FDJJ – 1900 "Employee Code of Ethics and Personal Responsibility" as found on the agency's Web site www.djj.state.fl.us, a copy of which shall be maintained in the Foundation's office.

Conflict of Interest Policy

Conflict of interest exists whenever the personal or professional interests of a board member are potentially at odds with the best interests of the organization.

Specifically, a conflict of interest arises when a person having official responsibilities for the Florida Juvenile Justice Foundation, Inc. has been empowered to make decisions or take actions on behalf of the Foundation and who, as a result of that power, can potentially benefit personally, directly or indirectly, from an entity or person conducting business with the Foundation or the Florida Department of Juvenile Justice. Such persons, hereinafter referred to as representatives, include: members of the Foundation, Board of Directors, volunteers, and Foundation staff.

To prevent any conflict of interest, the following shall apply:

- Each representative shall sign a conflict of interest statement at the time they are appointed by
 the Secretary, disclosing his or her financial interest in businesses or organizations which deal
 with the Florida Juvenile Justice Foundation or the Florida Department of Juvenile Justice.
 Direct or indirect conflicts of interest and potential conflicts of interest should be reported
 annually.
- 2. Conflicts listed in these statements shall be disclosed to the Board of Directors.
- 3. No board or staff member may participate in discussion or debate or vote on any matter involving a conflict for that representative. As with any member of the public, all board and staff members may remain in the room during discussion or debate and in no way should a board or staff member be encouraged to leave the room during that discussion or debate.
- 4. Competitive bidding or comparison shopping shall be used by the Foundation in all circumstances involving potential conflicts to ensure the Foundation receives the most advantageous arrangement in such transactions. The Foundation Executive Director shall keep written records of all conflict of interest transactions and report them to the Board of Directors.

Therefore, board members of the Florida Juvenile Justice Foundation, Inc., shall acknowledge and commit to the Conflict of Interest Statement.

Confidentiality and Nondisclosure Policy

The protection of confidential information is vital to the interests and the success of the Florida Juvenile Justice Foundation, Inc. and to the Florida Department of Juvenile Justice. For the most part, Florida's public information, public records and Sunshine laws govern the Foundation.

However, from time to time, members of the Foundation Board of Directors shall be privy to confidential information that includes, but is not limited to, the following examples:

- 1. Donor compensation or personal data
- 2. Juvenile information and lists
- 3. Scholarship applicants' and recipients' personal data
- 4. For-profit corporation financial information

- 5. Pending projects and proposals
- 6. Technological data
- 7. Prospect mailing lists
- 8. Donor giving information
- 9. Grant and funding information

It is the policy of the Foundation to abide by all laws, governmental rules, and policies of the Florida Department of Juvenile Justice that govern confidentiality of juvenile records. Because of the services the Foundation provides, confidentiality of juvenile and family information is an extremely important issue. Board members, employees, contractors and agents of the Foundation must always be aware of their responsibility to protect this information when engaged in the collection, handling or dissemination of any information, including, but not limited to: health/medical information and juvenile/family identifiable information. Unless a duly executed release of information form has been processed with the Florida Department of Juvenile Justice, all members of the Board of Directors and all Foundation employees are required to keep juvenile/family information confidential and shall sign a confidentiality statement as provided in Appendix I at the back of this manual.

Policy of Open Government

Members of the Florida Juvenile Justice Foundation, Inc. Board of Directors and staff are required to adhere to Florida's Public Records and Sunshine (open meetings) Laws.

According to the Florida Attorney General's *Government-In-The-Sunshine Manual*, "The Florida Constitution safeguards every Floridian's right of access to government meetings and records. The comprehensive breadth and scope of our sunshine laws have served for many years as a model for the rest of the nation. In Florida, disclosure is the standard, unless the Legislature has created an express statutory exemption from our strong open government laws. The best way to ensure that government truly represents the people it serves is to keep the government open and accessible to those people. For several decades now, Florida has shown that openness is the key to building and maintaining public trust in the institutions of government."

To that end, a copy of the *Government-In-The-Sunshine Manual, A Reference For Compliance with Florida's Public Records and Open Meetings Laws,* shall be available electronically to all board members via the Internet at http://myfloridalegal.com/sun.nsf/manual. It is the responsibility of every board member and the Foundation's Executive Director to ensure that Foundation business is conducted in compliance with these laws. Therefore, original documents that pertain to the Florida Juvenile Justice Foundation, Inc. shall be provided to and maintained by the Foundation's Executive Director as public records.

All board members shall acknowledge and commit to the Government-In-The-Sunshine Statement.



Florida Juvenile Justice Foundation Annual Reporting Requirements In accordance with section 20.058, Florida Statutes

ADDENDUM 3:

Florida Juvenile Justice Foundation Federal Internal Revenue Service Return of Organization Exempt from Income Tax (Form 990).

FLORIDA JUVENILE JUSTICE FOUNDATION, INC. <u>Tax Return</u> 2019 Federal Tax Return

2019 Federal Tax Return Form 990-EZ

Filing Instructions

Florida Juvenile Justice Foundation, Inc.

Short Form Exempt Organization Tax Return

Taxable Year Ended June 30, 2020

Date Due:

May 17, 2021

Remittance:

None is required. Your Form 990-EZ for the tax year ended 6/30/20 shows no

balance due.

Signature:

You are using a Personal Identification Number (PIN) for signing your return

electronically. Sign the IRS e-file Authorization and mail it as soon as possible

to:

Thomson Brock Luger & Company

3375G Capital Cir NE

Tallahassee, FL 32308-3736

Other:

Initial and date the copies of the IRS e-file Signature Authorization and the Form

990-EZ. Retain them for your records. If previously signed and returned no

further action is required for Form 8879-EO.

Your return is being filed electronically with the IRS and is not required to be mailed. Mailing a paper copy of your return to the IRS will delay the processing

of your return.

Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury

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

Go to www.irs.gov/Form990EZ for instructions and the latest information.

Internal Revenue Service For the 2019 calendar year, or tax year beginning 07/01/19, and ending 06/30/20D Employer identification number Check if applicable: C Name of organization Address change FLORIDA JUVENILE JUSTICE 59-3623272 Name change FOUNDATION, INC. Initial return Number and street (or P.O. box, if mail is not delivered to street address) E Telephone number 2737 CENTERVIEW DR, ROOM 3216 Final return/terminated 850-487-1886 Amended return City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Application pending TALLAHASSEE Number > Accounting Method: Cash X Accrual Other (specify) ▶ H Check ▶ if the organization is not WWW.DJJ.STATE.FL.US/FJJF required to attach Schedule B Website: Tax-exempt status (check only one) — X 501(c)(3) 501(c) (4947(a)(1) or) **(**insert no.) 527 (Form 990, 990-EZ, or 990-PF). X Corporation Trust Association Other Form of organization: Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ 113,639 Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) X Check if the organization used Schedule O to respond to any question in this Part I Contributions, gifts, grants, and similar amounts received 69,959 1 Program service revenue including government fees and contracts 17,900 2 2 Membership dues and assessments 3 3 Investment income 4 ventory C 5a 5b contine 5a 5b contine 5a Gross amount from sale of assets there Less: cost or other basis and sale expenses Gain or (loss) from sale of assets other than inventury h 5c 6. Gaming and fundraising events: Gross income from gaming (attach Schedule G if greater than 6a Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the 25,780 sum of such gross income and contributions exceeds \$15,000) Less: direct expenses from gaming and fundraising events Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract 25,780 6d line 6c) Gross sales of inventory, less returns and allowances 7a 7a Less: cost of goods sold 7b Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a) 7c Other revenue (describe in Schedule O) 8 113,639 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 9 Grants and similar amounts paid (list in Schedule O) 10 10 Benefits paid to or for members 11 11 Salaries, other compensation, and employee benefits 12 12 4,438 Professional fees and other payments to independent contractors 13 13 Occupancy, rent, utilities, and maintenance 14 14 Printing, publications, postage, and shipping 15 15 77,359 16 Other expenses (describe in Schedule O) 16 81,830 17 17 Total expenses. Add lines 10 through 16. Excess or (deficit) for the year (subtract line 17 from line 9) 31,809 18 18 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 128,159 end-of-year figure reported on prior year's return) 19 20 Other changes in net assets or fund balances (explain in Schedule O) 20 159,968 21 Net assets or fund balances at end of year. Combine lines 18 through 20

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2019)

Form 990-EZ (2019) FLORIDA JUVENILE JUST	FICE	59-36	23272		Page 2
Part II Balance Sheets (see the instructions for P	art II)				
Check if the organization used Schedule O to		question in this Part	II		X
	<u>-</u>		ginning of year		(B) End of year
22 Cash, savings, and investments			128,371	22	160,105
23 Land and buildings			0	23	
24 Other assets (describe in Schedule O)			0	24	
25 Total assets			128,371	25	160,105
26 Total liabilities (describe in Schedule O)			212	26	137
27 Net assets or fund balances (line 27 of column (B) must agree	ee with line 21)		128,159	27	159,968
Part III Statement of Program Service Accomp					
Check if the organization used Schedule O to	•		′ == 1		Expenses
What is the organization's primary exempt purpose?				(Re	guired for section
SEE SCHEDULE O					(c)(3) and 501(c)(4)
Describe the organization's program service accomplishments for ε	each of its three la	rgest program services,			anizations; optional for
as measured by expenses. In a clear and concise manner, describe				othe	
persons benefited, and other relevant information for each program	title.				,
28 SEE SCHEDULE O					
(Grants \$) If this amount includes f	oreian arants, che	eck here	▶ 🗇	28a	57,672
29					
(Grants \$) If this amount includes f	oreign grants, che	ck here	▶ □	29a	
30					
(Grants \$) If this amount includes f	oreign grants, che	ck here	▶ □	30a	
31 Other program services (describe in Schedule O)					
(Grants \$) If this amount includes f				31a	
32 Total program service expenses (add lines 28a through 31a)				32	57,672
Part N/ List of Officers, Directors, Trustees, and Key En	nplovees (list eac	h one even if not compe	nsated — see the	instruc	tions for Part IV)
Check if the organization used Schedule O to response		n in this Part IV	(d) Health ben		
(a) Name and title	(b) Average hours per week	compensation (Forms W-2/1099-MISC)	contributions to er	mployee	
	devoted to position	(if not paid, enter -0-)	benefit plans, deferred comper		other compensation
TADAR MUHAMMAD					
BOARD MEMBER	3.00	0		0	0
DOREA MAYS					
BOARD MEMBER	3.00	0		0	0
WANSLEY WALTERS					
BOARD MEMBER	3.00	0		0	0
CINDY LANE					
BOARD MEMBER	3.00	o		0	0
CAROLINE RAY					
EXECUTIVE DIRECTOR	3.00	45,655	8	8,884	0
PAUL MITCHELL					
PRESIDENT	3.00	o		0	0
MONESIA BROWN					
CHAIR	3.00	o		0	0
WILLIAM ADAMS					
BOARD MEMBER	3.00	0		0	0
DEE ANN SMITH					
BOARD MEMBER	3.00	0		0	0
CHRISTY DALY-BRODEUR					
BOARD MEMBER	3.00	o		0	0
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	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this			
			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a			
	detailed description of each activity in Schedule O	33		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed			
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
	change on Schedule O. See instructions	34		X
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		X
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,			
	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			
	during the year? If "Yes," complete applicable parts of Schedule N	36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions			
b	Did the organization file Form 1120-POL for this year?	37b		X
38a				
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved 38b			
39	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on line 9			
	Gross receipts, included on line 9, for public use of club facilities 39b			
40a				
	section 4911 ▶; section 4912 ▶; section 4955 ▶			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958			
-	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year	0000000000	2010000000000	
	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		x
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed			
	on organization managers or disqualified persons during the year under sections 4912,			
	4955 and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line			
<u> </u>	40c reimbursed by the organization			
_	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			
•	transaction? If "Yes," complete Form 8886-T	40e	0000000000	X
41	List the states with which a copy of this return is filed ▶ NONE			
42a	The organization's books are in care of CAROLINE RAY Telephone no.	850-48	7-1	88
+4a	2737 CENTERVIEW DRIVE, RM 3216			
	Located at N. MATTAWASCHIR	32399-	310	0
h	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
D	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		163	X
	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and			
	Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the United States?	42c		X
	If "Yes," enter the name of the foreign country ▶			-
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here			▶ [
	and enter the amount of tax-exempt interest received or accrued during the tax year			
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be			
	completed instead of Form 000 F7	44a	000000000	X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be	•••••		
.,	completed instead of Form 990-EZ	44b	100000000000000000000000000000000000000	X
С	Did the organization receive any payments for indoor tanning services during the year?			X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			
u	explanation in Schedule O	44d		
1E~	Did the erganization have a controlled entity within the manning of section 512/h)/13/2	450		X
45a		458		
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	45h		x

Sign	
Here	

Signature of officer CAROLINE RAY

Type or print name and title

Date

EXECUTIVE DIRECTOR

Paid **Preparer Use Only**

Print/Type preparer's name MATTHEW R. HANSARD

Firm's name

Firm's address

THOMSON BROCK LUGER

May the IRS discuss this return with the preparer shown above? See instructions

3375G CAPITAL CIR NE

TALLAHASSEE, FL

& COMPANY

32308-3736

Preparer's signature

Check

self-employed

P00273516

20-2259573 Firm's EIN ▶

PTIN

850-385-7444 X Yes

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

4- 5---- 000 -- 5---- 000 F7

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 **2019**

Open to Public Inspection

Name of the organization

FLORIDA JUVENILE JUSTICE

FOUNDATION, INC.

Employer identification number 59–3623272

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

Schedule A (Form 990 or 990-EZ) 2019

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.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 25,837 23,616 6,569 79,559 69,959 205,540 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 25,837 23,616 6,569 79,559 69,959 205,540 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 45,889 Public support. Subtract line 5 from line 4 159,651 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2015 (b) 2016 (d) 2018 (e) 2019 (c) 2017 (f) Total Amounts from line 4 25,837 23,616 6,569 79,559 69,959 205,540 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business. activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 **Total support.** Add lines 7 through 10 205,540 Gross receipts from related activities, etc. (see instructions) 12 12 57,663 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) 77.67% 14 14 Public support percentage from 2018 Schedule A, Part II, line 14 15 15 50.82% 33 1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test-2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

Schedule A (Form 990 or 990-EZ) 2019

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.)

202	tion A. Public Support	quality under t	ile lesis listeu i	below, please c	omplete i art i	1.)	
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 1	Gifts, grants, contributions, and membership fees	(a) 2013	(b) 2010	(6) 2017	(u) 2010	(e) 2019	(I) 10tai
•	received. (Do not include any "unusual grants.")			:			
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
ec.	tion B. Total Support						
alen	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
1	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
2	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
3	Total support. (Add lines 9, 10c, 11, and 12.)						
4	First five years. If the Form 990 is for the organization, check this box and stop he	e organization's firs		-			▶ [
Sec	tion C. Computation of Public S				• • • • • • • • • • • • • • • • • • • •		
5	Public support percentage for 2019 (line			nn (f))		15	%
6	Public support percentage from 2018 Sch	nedule A, Part III, li	ne 15	· · · · · · · · · · · · · · · · · · ·		16	%
	tion D. Computation of Investme						
7	Investment income percentage for 2019 (3, column (f))		17	%
8	Investment income percentage from 2018	3 Schedule A, Part	III, line 17			18	%
9a	33 1/3% support tests—2019. If the orga	anization did not ch	eck the box on line	e 14, and line 15 is	more than 33 1/3	%, and line	
	17 is not more than 33 1/3%, check this b						▶ [
b	33 1/3% support tests—2018. If the orga		=				-
	line 18 is not more than 33 1/3%, check t						▶
20	Private foundation. If the organization d	=	-	•		-	

Schedule A (Form 990 or 990-EZ) 2019 FLOR Part IV Supporting Organizations

(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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported 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?
- 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 **Part VI**.
- 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).
- B 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.)

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	Yes	No
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111111111111	ule A (Form 990 or 990-EZ) 2019 FLORIDA GOVENILE GOSTICE	39-3623212		Page 5
Pa	T IV Supporting Organizations (continued)		Τ	T
11	Has the erganization accepted a gift or contribution from any of the following persons?		Yes	No
'' a	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
u	below, the governing body of a supported organization?	11:		· ·
h	A family member of a person described in (a) above?	111		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part			+
	ion B. Type I Supporting Organizations	110	<u>' 1</u>	
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	1		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	_ 1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		<u></u>
Sect	ion C. Type II Supporting Organizations			T
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
Sect	the supported organization(s). ion D. All Type III Supporting Organizations	1		1
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the pric	or tax		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of t	0000000		
	organization's governing documents in effect on the date of notification, to the extent not previously provided			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	00000000		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI h	ow		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		<u></u>
Sect	ion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year	(see instructions).		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government	entity (see instructions)	•	
2 /	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	1		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	э		
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	За		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of e	ach		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		1

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting	Organizat	ions	rugo v
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust	t on Nov. 20, 1	970 (explain in Part VI). S	ee
instructions. All other Type III non-functionally integrated supporting organization	ns must comp	lete Sections A through E.	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount	(A) Prior Year	(B) Current Year (optional)	
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionally integ	grated Type III	supporting organization (s	ee
instructions).			

Schedule A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990-EZ) 2019 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 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 2019 from Section C, line 6 Line 8 amount divided by line 9 amount 10 (i) (ii) (iii) Underdistributions Section E - Distribution Allocations (see instructions) **Excess Distributions** Distributable Pre-2019 Amount for 2019 Distributable amount for 2019 from Section C, line 6 Underdistributions, if any, for years prior to 2019 (reasonable cause required-explain in Part VI). See instructions. Excess distributions carryover, if any, to 2019 a From 2014 **b** From 2015 d From 2017 e From 2018 . . . f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2019 distributable amount i Carryover from 2014 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from 3f. Distributions for 2019 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2019 distributable amount c Remainder. Subtract lines 4a and 4b from 4. Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2020. Add lines 3j and 4c. Breakdown of line 7: a Excess from 2015 b Excess from 2016 c Excess from 2017 d Excess from 2018

Schedule A (Form 990 or 990-EZ) 2019

e Excess from 2019

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

FLORIDA JUVENILE JUSTICE

FOUNDATION, INC.

Employer identification number

59-3623272

Organization type (check one):									
Filers of:	Section:								
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization								
	4947(a)(1) nonexempt charitable trust not treated as a private foundation								
	527 political organization								
Form 990-PF	501(c)(3) exempt private foundation								
	4947(a)(1) nonexempt charitable trust treated as a private foundation								
	501(c)(3) taxable private foundation								
	overed by the General Rule or a Special Rule. (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See								
General Rule									
-	ng Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 roperty) from any one contributor. Complete Parts I and II. See instructions for determining a libutions.								
Special Rules									
regulations under section 13, 16a, or 16b, and the	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; 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 Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.									
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year									
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).									

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Name of organization

FLORIDA JUVENILE JUSTICE

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

PAGE 1 OF 1 Pag
Employer identification number 59-3623272

Part I	Contributors (see instructions). Use duplicate copies of Pa	art I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ANNE E CASEY FOUNDATION 701 ST. PAUL ST BALTIMORE MD 21202	\$ 50,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	WALMART 3535 APALACHEE PKWY TALLAHASSEE FL 32311	\$ 12,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

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SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the
organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ 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

Department of the Treasury Internal Revenue Service Name of the organization

FLORIDA JUVENILE JUSTICE

{

Employer identification number

	FOUNDATION, INC.					59-36232	
Pa	rt I Fundraising Activities. Complete Form 990-EZ filers are not required				red "Yes" on Form	990, Part IV, line	17.
1	Indicate whether the organization raised funds throug				Check all that apply.		
а	Mail solicitations	e Solicitatio	n of no	n-gov	ernment grants		
b	Internet and email solicitations	f Solicitatio	n of go	vernm	nent grants		
С	Phone solicitations	g Special fu	ndraisi	ng ev	ents		
d	In-person solicitations	-		_			
2a	Did the organization have a written or oral agreement	with any individual	(includ	ing of	ficers, directors, truste	es,	
b	or key employees listed in Form 990, Part VII) or enti If "Yes," list the 10 highest paid individuals or entities	•	•		=		Yes No
	compensated at least \$5,000 by the organization.			id fund-		(v) Amount paid to	(vi) Amount paid to
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custo	r have ody or rol of outions?	(iv) Gross receipts from activity	(or retained by) fundraiser listed in col. (i)	(or retained by) organization
				No		,	
1							
2							
			ļ				
3							
4							
5						,	
6							
7							
8							
9							
0							
otal							
	List all states in which the organization is registered or registration or licensing.		contrib	utions	or has been notified i	t is exempt from	
	regionation of nocitoring.						

Schedule G (Form 990 or 990-EZ) 2019

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events NONE (add col. (a) through col. (c)) (event type) (total number) 1 Gross receipts 2 Less: Contributions 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes 6 Rent/facility costs Direct Expenses 7 Food and beverages 8 Entertainment 9 Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming col. (a) through col. (c)) bingo/progressive bingo 1 Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes % 6 Volunteer labor 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? b If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? **b** If "Yes," explain:

Sche	edule G (Form 990 or 990-EZ) 2019 FLORIDA JUVENILE JUSTICE 59-	-362327	2 Pag	e 3
1	Does the organization conduct gaming activities with nonmembers?		Yes	No
2	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity			
	formed to administer charitable gaming?		Yes	No
3	Indicate the percentage of gaming activity conducted in:			
а	The organization's facility	13a		%
b	An outside facility	13b		%
4	Enter the name and address of the person who prepares the organization's gaming/special events books and			/ 0
	records:			
	Name ▶			
	Address ►			
15a	Does the organization have a contract with a third party from whom the organization receives gaming			
	revenue?		Yes	No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the			
	amount of gaming revenue retained by the third party ▶ \$			
С	If "Yes," enter name and address of the third party:			
	Name ▶			
	Address ▶			
6	Gaming manager information:			
	Name ▶			
	Gaming manager compensation ▶ \$			
	Description of services provided ▶			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or			
	spent in the organization's own exempt activities during the tax year ▶ \$			
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns	(iii) and (v)); and	
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional	information	١.	
	See instructions.			
				• • •

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

OMB No. 1545-0047
2019

Open to Public Inspection

Employer identification number Name of the organization FLORIDA JUVENILE JUSTICE 59-3623272 FOUNDATION, INC. FORM 990-EZ, PART I, LINE 16 - OTHER EXPENSES DESCRIPTION AMOUNT **EXPENSES** 5 **G&A: OFFICE EXPENSES** 24,598 TRAVEL & MEALS PROGRAM: CONFERENCES/MEETINGS \$ 39,973 \$ **G&A: INSURANCE** 1,633 PROGRAM: YOUTH EXPENSES 7,953 SUPPLIES 1,821 \$ 250 AWARDS & RECOGNITION \$ **G&A: MISCELLANEOUS** 1,056 G&A: LICENSES 70 TOTAL \$ 77,359 FORM 990-EZ, PART II, LINE 24 - OTHER ASSETS BEG. OF YEAR END OF YEAR DESCRIPTION \$ 10,640 \$ DEPRECIABLE ASSETS 10,640 \$ 10,640 \$ LESS ACCUMULATED DEPRECIATION 10,640 TOTAL \$ 0 \$ FORM 990-EZ, PART II, LINE 26 - OTHER LIABILITIES BEG. OF YEAR END OF YEAR DESCRIPTION ACCOUNTS PAYABLE AND ACCRUED EXPENSES 175 \$ 100 \$ 37 \$ DUE TO DJJ - FAITH SYMPOSIUM 37 Schedule O (Form 990 or 990-EZ) (2019)

Name of the organization FLORIDA JUVENILE JUSTICE	Employer identification number 59–3623272						
FORM 990-EZ, PART III - PRIMARY EXEMPT PURPOSE							
TO ENCOURAGE THE COLLABORATION AMONG BUSINESS	PEOPLE, COMMUNITY MEMBERS,						
PARENTS, YOUTHS OF FLORIDA, AND THE FLORIDA JU	VENILE JUSTICE SYSTEM TO						
PROMOTE EDUCATION AND PUBLIC SAFETY THROUGH EF	FECTIVE PREVENTION,						
INTERVENTION, AND TREATMENT SERVICES THAT STRENGTHEN FAMILIES AND							
POSITIVELY CHANGE THE LIVES OF TROUBLED YOUTH.							
FORM 990-EZ, PART III, LINE 28 - FIRST ACCOMPL	ISHMENT						
PROVIDE ASSISTANCE TO YOUTHS, AGES 16 TO 22, W	HO ARE OR HAVE BEEN SERVED BY						
THE FLORIDA DEPARTMENT OF JUVENILE JUSTICE TO	ASSIST IN THEIR SUCCESSFUL						
TRANSITION INTO ADULTHOOD AND BECOMING PRODUCT	IVE CITIZENS BY PROVIDING						
TUITION ASSISTANCE, JOB TRAINING, AND LIVING F	INANCIAL SUPPORT.						
	PAGE 1 OF 1						

59-3623272

FYE: 6/30/2020

Federal Asset Report Form 990, Page 1

03/02/2021 12:27 PM

Page 1

Asset	Description	Date In Service	Cost	Bus <u>%</u>	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
Other	Depreciation:	9/21/08	1.076			1.076	5 MO S/L	1.076	0
2	Dell Latitude D830 Laptop Dell Optiplex GX755 Minitower	9/21/08	1,076 1,524			1,076 1,524	5 MO S/L	1,076 1,524	0
3 4	Computers Furniture	11/01/05 5/14/07	2,107 1,980			2,107 1,980	5 MO S/L 7 MO S/L	2,107 1,980	$\begin{array}{c} 0 \\ 0 \end{array}$
5	Downing Displays	7/01/07	3,953		-	3,953	5 MO S/L	3,953	0
	Total Other Depreciation	_	10,640		-	10,640		10,640	0
	Total ACRS and Other Depr	eciation _	10,640		=	10,640		10,640	0
	Grand Totals Less: Dispositions and Trans: Less: Start-up/Org Expense	fers 	10,640 0 0		_	10,640 0 0		10,640 0 0	0 0 0
	Net Grand Totals		10,640		_	10,640		10,640	0

59-3623272

FYE: 6/30/2020

AMT Asset Report Form 990, Page 1

03/02/2021 12:27 PM

Page 1

Asset	Description	Date In Service	Cost	Bus Sec <u>%</u> 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
1 2 3 4	Depreciation: Dell Latitude D830 Laptop Dell Optiplex GX755 Minitower Computers Furniture Downing Displays	9/21/08 9/21/08 11/01/05 5/14/07 7/01/07	1,076 1,524 2,107 1,980 3,953		1,076 1,524 2,107 1,980 3,953	5 MO S/L 5 MO S/L 5 MO S/L 7 MO S/L 5 MO S/L	1,076 1,524 2,107 1,980 3,953	0 0 0 0
	Total Other Depreciation		10,640		10,640		10,640	0
	Total ACRS and Other Depre	ciation =	10,640		10,640		10,640	0
	Grand Totals Less: Dispositions and Transfe Net Grand Totals	ers	10,640 0 10,640		10,640 0 10,640		10,640 0 10,640	0 0 0

59-3623272 FYE: 6/30/2020

Depreciation Adjustment Report

All Business Activities

03/02/2021 12:27 PM

Page 1

Form	Unit	Asset	
0		000	

Description

Tax

AMT

AMT Adjustments/ Preferences

There are no assets that meet the criteria of this report

Form **990**

Two Year Comparison Report

2018 & 2019

Taxpayer Identification Number

Name

FLORIDA JUVENILE JUSTICE FOUNDATION, INC.

For calendar year 2019, or tax year beginning 07/01/19 , ending 06/30/20

59-3623272

	ONDATION, INC.			0,5	0020272
			2018	2019	Differences
1	. Contributions, gifts, grants	1.			
2	2. Membership dues and assessments	2.			
3	Government contributions and grants	3.			
9 4	l. Program service revenue	4.			
□ 5	5. Investment income	1 - 1			
	Proceeds from tax exempt bonds				
° 7	'. Net gain or (loss) from sale of assets other than inventory	7.			
	Net income or (loss) from fundraising events	8.			
	Net income or (loss) from gaming				
	Net gain or (loss) on sales of inventory				
	. Other revenue	11.			
12	2. Total revenue. Add lines 1 through 11	12.			
13	3. Grants and similar amounts paid	13.			
14	Benefits paid to or for members	14.			
<u>ي</u> 15	5. Compensation of officers, directors, trustees, etc.	15.			
<u>ه</u> 16	6. Salaries, other compensation, and employee benefits	16.			
ย 17	7. Professional fundraising fees	17.			
	3. Other professional fees	18.			
ш 19	Occupancy, rent, utilities, and maintenance	19.			
20). Depreciation and Depletion	20.			
21	l. Other expenses	21.			
22	2. Total expenses. Add lines 13 through 21	22.			
23	3. Excess or (Deficit). Subtract line 22 from line 12	23.			
24	I. Total exempt revenue	24.			
_ 25	5. Total unrelated revenue	25.			
	5. Total excludable revenue	26.			
E 27	7. Total assets	27.			
호 28	B. Total liabilities	28.			
든 29	9. Retained earnings	29.			
를 30	Number of voting members of governing body	30.			
Õ 31	Number of independent voting members of governing body	31.			
32	2. Number of employees	32.	0		
33	3. Number of volunteers	33.			

59-3623272

Federal Statements

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FYE: 6/30/2020

Schedule A, Part II, Line 1(e)

Description	Amount
UNRESTRICTED CONTRIBUTIONS RESTRICTED CONTRIBUTIONS ANNE E CASEY FOUNDATION	\$ 6,05 1,90
CASH CONTRIBUTION	50,00
WALMART CASH CONTRIBUTION	12,00
TOTAL	\$69,95

59-3623272 FYE: 6/30/2020

Federal Statements

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Page 2

Schedule A, Part II, Line 5 - Excess Gifts

Donor Name	<u></u>	Total	Excess		
ANNIE E CASEY FOUNDATION	\$	50,000	\$	45,889	
TOTAL	\$	50,000	\$	45,889	

FYE: 6/30/2020

Federal Statements

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Schedule A, Part II, Line 12 - Current year

Description		Amount
RESTORING HOPE REGISTRATION	\$	17,900
FUNDRAISING INCOME	<u>_</u>	25 , 780
TOTAL	\$	43,680

Form 8868

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

Applica

n for Automatic Extension of Time To File a Exempt Organization Return

File a separate application for each return.

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

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

OMB No. 1545-0047

Form **8868** (Rev. 1-2020)

filing of this fo	orm, visit www.irs.gov/e-file-providers/e-file-for-charitie	es-and-non-	profits.			
Automatic	6-Month Extension of Time. Only submit	t original (no copies needed).			
	ns required to file an income tax return other than For			hips, REMICs, an	d trusts	
-	m 7004 to request an extension of time to file income		- ' '	•		
Type or	Name of exempt organization or other filer, see ins	Taxpayer identific	dentification number (TIN)			
print	FLORIDA JUVENILE JUSTICE	. •	` ,			
	FOUNDATION, INC.			59-362327	72	
	Number, street, and room or suite no. If a P.O. box	x, see instru	ctions.			
File by the	2737 CENTERVIEW DR, ROOM	3216				
due date for	City, town or post office, state, and ZIP code. For a	a foreign ad	dress, see instructions.			
filing your return. See						
instructions.	TALLAHASSEE FL	32399	9-3100			
Enter the Retu	urn Code for the return that this application is for (file	a separate	application for each return)			01
Application		Return	Application			Return
ls For		Code	Is For			Code
Form 990 or	Form 990-EZ	01	Form 990-T (corporation)			07
Form 990-B	L	02	Form 1041-A			08
Form 4720 ((individual)	03	Form 4720 (other than indivi	dual)		09
Form 990-P	F	04	Form 5227		···	10
Form 990-T	(sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T	(trust other than above)	06	Form 8870		********	12
<i>)</i>)	CAROLINE RAY			Ÿ.		
	2737 CENTERVIEW DRIVE	E, RM 3	216	là		
 The books a 	are in the care of ► TALLAHASSEE				FL 3:	2399-3100
				រី <u>.</u>		-
	No. ► 850-487-1886	Fax No				_
	nization does not have an office or place of business					▶ ∐
	r a Group Return, enter the organization's four digit G			If this is		-
	group, check this box ▶ 🔲 . If it is for part of	the group, o	check this box	and attach		
	names and TINs of all members the extension is for.	1 = 1 = -				
	t an automatic 6-month extension of time until 05/			return for		
the orga	nization named above. The extension is for the organ	nization's ret	turn for:			
▶ 🔲 🤄	calendar year or					
▶ 🗵 t	tax year beginning $07/01/19$, and ending 0	06/30/	20 .			
2 If the tax	year entered in line 1 is for less than 12 months, che	eck reason:	Initial return Final	return		
Ch	ange in accounting period		**************************************		,	
3a If this ap	plication is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069, ent	er the tentative tax, less			
any nonr	efundable credits. See instructions.			3a	\$	0
b If this ap	plication is for Forms 990-PF, 990-T, 4720, or 6069,	enter any re	fundable credits and			_
estimate	d tax payments made. Include any prior year overpay	yment allow	ed as a credit.	3b	\$	0
	due. Subtract line 3b from line 3a. Include your payr					_
using EF	TPS (Electronic Federal Tax Payment System). See	instructions).	3c	\$	0
Caution: If you	u are going to make an electronic funds withdrawal (d	lirect debit)	with this Form 8868, see Form	8453-EO and For	m 8879-EO for	payment

used below-0 11/4/20

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8879-EO**

IRS *e-file* Signature Authorization for an Exempt Organization

OMB No. 1545-1878

	For calendar year 2019, or fisca	sl year beginning $7/01$ 20	19, and ending 6,	/30 20 20	2040
Department of the Treasury Internal Revenue Service		Do not send to the IRS. Keep for www.irs.gov/Form8879EO for the		,	2019
	LORIDA JUVENILE		ie latest illioitilabol	Employer identificatio	n number
	OUNDATION, INC.			59-362327	2
Name and title of officer	AROLINE RAY				
MANAGEMENT AND	XECUTIVE DIRECT				
		mation (Whole Dollars Only			
	•	rm 8879-EO and enter the applica		•	
		amount on that line for the return b	•		
	o not complete more than one li	nk (do not enter -0-). But, if you e ne in Part I	intered -0- on the reti	ann, their enter -0- on	
1a Form 990 check here		ny (Form 990, Part VIII, column (A	A), line 12)	1b	
2a Form 990-EZ check here	b Total revenue,	if any (Form 990-EZ, line 9)	7,	2b	
3a Form 1120-POL check h	ere 📐 🗌 b Total tax (Fo	rm 1120-POL, line 22)		3b	
4a Form 990-PF check here	b Tax based on in	vestment income (Form 990-PF,	Part VI, line 5)		
5a Form 8868 check here	b Balance Due (Form	8868, line 3c)		5b	#***
				· · · · · · · · · · · · · · · · · · ·	
	on and Signature Author				
		ne above organization and that I have above and statements and to the			
•		ount in Part I above is the amount	•		
•	-	nediate service provider, transmitte	•	• , ,	
		om the IRS (a) an acknowledgeme		•	
		the return or refund, and (c) the d	•	• •	
	_	ent to initiate an electronic funds vo ftware for payment of the organia	•	•	
		ccount. To revoke a payment, I m			
-	• ,	to the payment (settlement) date			
		to receive confidential information	•	,	
	•	sonal identification number (PIN) a at to electronic funds withdrawal.	as my signature for t	ne organization's	
Officer's PIN: check one bo		is to close of the factor with the factor.			
		o c colmann	•	00070	
X authorize THO	MSON BROCK LUGER		_ to enter my PIN	•	signature
	ERO firm na	me		Enter five numbers, but do not enter all zeros	
on the organization's	tax year 2019 electronically filed	d return. If I have indicated within	this return that a con	ov of the return is	
-	•	es as part of the IRS Fed/State pr		•	
ERO to enter my PIN	on the return's disclosure cons	ent screen.			
As an officer of the o	manization I will enter my DIN	as my signature on the organization	an's tay year 2010 e	leatranically filed return	
If I have indicated with	hin this return that a copy of the	return is being filed with a state	agency(ies) regulatin		
the IRS Fed/State pro	ogram, I will enter my PIN on th	e return's disclosure consent scre	en.		
Officer's signature	Will Ke		Date	02/28/21	
Particulation (** Loring Liverson March 197	on and Authentication				
-	six-digit electronic filing identific	ation			
number (EFIN) followed by yo	our tive-digit self-selected PIN.			L	*****
•				Do no	ot enter all zeros
I certify that the above numeri	ic entry is my PIN, which is my	signature on the 2019 electronica	lly filed return for the	organization	
•	• • •	accordance with the requirements	•	•	
Information for Authorized IRS	6 e-file Providers for Business	keturns.		•	
ERO's signature	INULAX K		Date	02/28/21	
	ERO Must	Retain This Form — See	Instructions		

Do Not Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form 8879-EO (2019)