

Return of Private Foundation

Form Department of the Treasury Internal Revenue Service

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990PF for instructions and the latest information.

For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019

Name of foundation: SON CARE FOUNDATION INC. C/O JACK H GOULD JR. A Employer identification number: 75-2547239. B Telephone number: (805) 596-0433. C If exemption application is pending, check here. D 1. Foreign organizations, check here. D 2. Foreign organizations meeting the 85% test, check here and attach computation. E If private foundation status was terminated under section 507(b)(1)(A), check here. F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here. H Check type of organization: Section 501(c)(3) exempt private foundation. I Fair market value of all assets at end of year: \$ 2,148,294. J Accounting method: Cash.

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)

Table with 5 columns: (a) Revenue and expenses per books, (b) Net investment income, (c) Adjusted net income, (d) Disbursements for charitable purposes (cash basis only). Rows include: 1 Contributions, gifts, grants, etc., received (493,251); 2 Check if foundation is not required to attach Sch. B; 3 Interest on savings and temporary cash investments (1); 4 Dividends and interest from securities; 5a Gross rents; b Net rental income or (loss); 6a Net gain or (loss) from sale of assets not on line 10; b Gross sales price for all assets on line 6a; 7 Capital gain net income (from Part IV, line 2) (0); 8 Net short-term capital gain (0); 9 Income modifications; 10a Gross sales less returns and allowances; b Less: Cost of goods sold; c Gross profit or (loss) (attach schedule); 11 Other income (attach schedule) (1,081,642); 12 Total. Add lines 1 through 11 (1,574,894); 13 Compensation of officers, directors, trustees, etc. (0); 14 Other employee salaries and wages (756,861); 15 Pension plans, employee benefits; 16a Legal fees (attach schedule) (487); b Accounting fees (attach schedule) (7,985); c Other professional fees (attach schedule) (7,854); 17 Interest; 18 Taxes (attach schedule) (see instructions) (68,150); 19 Depreciation (attach schedule) and depletion (42,644); 20 Occupancy (74,231); 21 Travel, conferences, and meetings (12,041); 22 Printing and publications; 23 Other expenses (attach schedule) (395,611); 24 Total operating and administrative expenses. Add lines 13 through 23 (1,365,864); 25 Contributions, gifts, grants paid (0); 26 Total expenses and disbursements. Add lines 24 and 25 (1,365,864); 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements (209,030); b Net investment income (if negative, enter -0-) (1); c Adjusted net income (if negative, enter -0-) (895,290).

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	42		
	2 Savings and temporary cash investments	176,139	366,841	366,841
	3 Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment: basis ▶ <u>1,664,407</u> Less: accumulated depreciation (attach schedule) ▶ <u>697,764</u>	979,049	966,643	1,780,000
15 Other assets (describe ▶ _____)	1,536	1,453	1,453	
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	1,156,766	1,334,937	2,148,294	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue.			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)	1,124,658	1,083,222	
	22 Other liabilities (describe ▶ _____)	18,008	28,585	
	23 Total liabilities (add lines 17 through 22)	1,142,666	1,111,807	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	0	0	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	28 Retained earnings, accumulated income, endowment, or other funds	14,100	223,130	
29 Total net assets or fund balances (see instructions)	14,100	223,130		
30 Total liabilities and net assets/fund balances (see instructions)	1,156,766	1,334,937		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	14,100
2 Enter amount from Part I, line 27a	2	209,030
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	223,130
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29.	6	223,130

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			
b			
c			
d			
e			

Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	{ If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8 }	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	414,183	90,338	4.584815
2017	419,375	85,674	4.895009
2016	367,895	145,164	2.534340
2015	335,695	92,859	3.615105
2014	378,335	123,323	3.067838

2 Total of line 1, column (d)	2	18.697107
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	3.739421
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	229,315
5 Multiply line 4 by line 3	5	857,505
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	0
7 Add lines 5 and 6	7	857,505
8 Enter qualifying distributions from Part XII, line 4	8	1,180,218

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here [] and enter "N/A" on line 1.
Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here [x] and enter 1% of Part I, line 27b
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)
3 Add lines 1 and 2.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-.
6 Credits/Payments:
a 2019 estimated tax payments and 2018 overpayment credited to 2019
b Exempt foreign organizations—tax withheld at source
c Tax paid with application for extension of time to file (Form 8868)
d Backup withholding erroneously withheld
7 Total credits and payments. Add lines 6a through 6d
8 Enter any penalty for underpayment of estimated tax. Check here [] if Form 2220 is attached.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.
11 Enter the amount of line 10 to be: Credited to 2020 estimated tax Refunded

Part VII-A Statements Regarding Activities

1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition).
c Did the foundation file Form 1120-POL for this year?
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:
(1) On the foundation. (2) On foundation managers.
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers.
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments?
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?
b If "Yes," has it filed a tax return on Form 990-T for this year?
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:
• By language in the governing instrument, or
• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?
7 Did the foundation have at least \$5,000 in assets at any time during the year?
8a Enter the states to which the foundation reports or with which it is registered (see instructions)
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G?
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the taxable year beginning in 2019?
10 Did any persons become substantial contributors during the tax year?

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.			No
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions			No
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>		Yes	
14 The books are in care of ▶ <u>JACK GOULD</u> Telephone no. ▶ <u>(805) 596-0433</u> Located at ▶ <u>173 BUCKLEY SAN LUIS OBISPO CA</u> ZIP+4 ▶ <u>93401</u>			
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ▶ and enter the amount of tax-exempt interest received or accrued during the year 15 <u> </u>			
16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign	16	Yes	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
1a During the year did the foundation (either directly or indirectly):			
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions <input type="checkbox"/>	1b		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019? <input type="checkbox"/>	1c		No
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
a At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)	2b		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20____, 20____, 20____, 20____			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019.)	3b		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

- 5a** During the year did the foundation pay or incur any amount to:
- (1)** Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No
 - (2)** Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? Yes No
 - (3)** Provide a grant to an individual for travel, study, or other similar purposes? Yes No
 - (4)** Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions. Yes No
 - (5)** Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No
- b** If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions. Yes No
 Organizations relying on a current notice regarding disaster assistance check here.
- c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No
 If "Yes," attach the statement required by Regulations section 53.4945–5(d).
- 6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
 If "Yes" to 6b, file Form 8870.
- 7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No
- b** If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction? Yes No
- 8** Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year? Yes No

	Yes	No
5b		
6b		No
7b		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JACK H GOULD PO BOX 4412 SAN LUIS OBISPO, CA 93403	PRESIDENT 40.00	0	0	0
KAREN H GOULD PO BOX 4412 SAN LUIS OBISPO, CA 93403	SECRETARY 1.00	0	0	0
ROBERT NEWBERG PO BOX 4412 SAN LUIS OBISPO, CA 93403	TREASURER 1.00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NICOLE HERN PO BOX 4412 SAN LUIS OBISPO, CA 93403	NEW LIFE K9S DIRECTO 40.00	55,328	0	0
RHYS JANSEN PO BOX 4412 SAN LUIS OBISPO, CA 93403	DIRECTOR OF ALPHA A C 40.00	50,006	0	0

Total number of other employees paid over \$50,000. **0**

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services. **0**

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 ALPHA ACADEMY IS A MENTORING PROGRAM TO TEACH LIFE AND LEADERSHIP SKILLS TO YOUNG MEN IN NEED OF DIRECTION. DESIGNED FOR UP TO SIXTEEN STUDENTS PER YEAR.	75,246
2 NEW LIFE K9S IS A PROGRAM TO TRAIN SERVICE DOGS, FREE OF CHARGE, FOR VETERANS AND FIRST RESPONDERS WITH PTSD. STATE INMATES HELP TRAIN THESE DOGS AS PART OF A REHABILITATION PROGRAM.	311,776
3 THOUSAND HILLS PET RESORT IS A PROGRAM TO PROVIDE WORK EXPERIENCE FOR THE MEN OF THE ALPHA ACADEMY PROGRAM BY OPERATING A DOG BOARDING AND TRAINING FACILITY.	605,327
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	0
2	
All other program-related investments. See instructions. 3	

Total. Add lines 1 through 3 **0**

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities.	1a	0
b	Average of monthly cash balances.	1b	232,807
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	232,807
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d.	3	232,807
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	3,492
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	229,315
6	Minimum investment return. Enter 5% of line 5.	6	11,466

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	1,180,218
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,180,218
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,180,218

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.				
b Total for prior years: 20___, 20___, 20___				
3 Excess distributions carryover, if any, to 2019:				
a From 2014.				
b From 2015.				
c From 2016.				
d From 2017.				
e From 2018.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ _____				
a Applied to 2018, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2019 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b Prior years' undistributed income. Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount—see instructions				
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions				
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)				
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017.				
d Excess from 2018				
e Excess from 2019				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling 1994-08-26
b. Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

Table with 6 columns: Tax year, (a) 2019, (b) 2018, (c) 2017, (d) 2016, (e) Total. Rows include 2a-2e (Qualifying distributions) and 3 (Alternative tests: Assets, Endowment, Support).

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:
a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)
JACK H GOULD
KAREN H GOULD

Navigation bar with arrows and a scroll indicator.

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Navigation bar with arrows and a scroll indicator.

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
Total			▶ 3a	0
b <i>Approved for future payment</i>				
Total			▶ 3b	0

Additional Data

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Form 990PF - Special Condition Description:

Special Condition Description

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Name of the organization SON CARE FOUNDATION INC C/O JACK H GOULD JR	Employer identification number 75-2547239
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Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

- 501(c)() (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

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% 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, 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 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
SON CARE FOUNDATION INC
C/O JACK H GOULD JR

Employer identification number
75-2547239

Part I
Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NICHOLS FOUNDATION INC 537 SOUTH 8TH STREET GROVER BEACH, CA 93433	\$ 10,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>
2	FHC FOUNDATION 2512 THOMAS PLACE FORT WORTH, TX 76107	\$ 35,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>
3	CA DEPT OF CORRECTIONS AND REHABILITATION PO BOX 187017 SACRAMENTO, CA 95818	\$ 244,373	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>
4	DARLA POSTIL 3835R E THOUSAND OAKS BLVD 351 WESTLAKE VILLAGE, CA 91362	\$ 19,475	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>
5	PATRICIA AND LELAND POSTIL 11560 CHIQUITA STREET STUDIO CITY, CA 91604	\$ 10,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>
6	TIM BOLTON 28319 BERYLWOOD PLACE VALENCIA, CA 91354	\$ 10,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>

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

Name of organization
SON CARE FOUNDATION INC
C/O JACK H GOULD JR

Employer identification number
75-2547239

Part I
Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	CALIFORNIA VETERANS BENEFIT FUND 10311 WOODSIDE DRIVE FORESTVILLE, CA 95436	\$ 10,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>
8	GREGG L FOSTER 2955 S RABBIT BRUSH LANE		<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll

	JACKSON, WY 83001	\$ 5,000	<input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	ALEX QUAGLINO FAMILY FUND 815 FIERO LANE SAN LUIS OBISPO, C A 93401	\$ 5,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	LATHAM FOUNDATION 1320 HARBOR BAY PARKWAY 200 ALAMEDA, C A 94502	\$ 5,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	PATRICIA AND CHUCK FRANDSON 13830 CHANDLER BOULEVARD SHERMAN OAKS, C A 91401	\$ 5,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization
 SON CARE FOUNDATION INC
 C/O JACK H GOULD JR

Employer identification number
 75-2547239

Part II **Noncash Property** (see instructions). Use duplicate copies of Part 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
4	2005 MERCEDES BENZ S430	\$ 8,000	2019-01-12
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____

Name of organization
SON CARE FOUNDATION INC
C/O JACK H GOULD JR

Employer identification number
75-2547239

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	

Additional Data

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Software ID:

Software Version:

TY 2019 IRS 990 e-File Render

Name: SON CARE FOUNDATION INC
C/O JACK H GOULD JR

EIN: 75-2547239

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	7,985	0	0	7,985

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

TY 2019 IRS 990 e-File Render

Name: SON CARE FOUNDATION INC

C/O JACK H GOULD JR

EIN: 75-2547239

Description of Amortized Expenses	Date Acquired, Completed, or Expended	Amount Amortized	Deduction for Prior Years	Amortization Method	Current Year Amortization	Net Investment Income	Adjusted Net Income	Total Amount of Amortization
LOAN FEES SESLOC	2006-11-30	9,174	2,767	480.000000000000	229	0	229	2,996
APLOS SOFTWARE - NON-PROFIT	2017-12-05	1,815	1,815	3.000000000000		0	0	1,815
LOAN FEES SESLOC	2017-05-31	9,341	986	180.000000000000	623	0	623	1,609

Name: SON CARE FOUNDATION INC
C/O JACK H GOULD JR

EIN: 75-2547239

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
FURNITURE & FIXTURES	1,664	1,664	0	
FURNITURE & FIXTURES	4,077	4,074	3	
END TABLES AND DRESSERS	578	578	0	
BUILDING - RANCH HOUSE	243,182	125,146	118,036	
LAND	610,000	0	610,000	
PRINGLE TRACTOR	16,785	16,785	0	
TIRES	2,155	2,155	0	
ROTOTILLER	3,650	3,647	3	
BED	115	115	0	
STOVE	325	325	0	
TABLE AND CHAIRS	1,393	1,393	0	
AUTOMATIC NAILER	342	342	0	
COMPRESSOR	318	318	0	
SPRINKLERS	1,469	1,426	43	
LANDSCAPING	1,011	981	30	
LAND IMPROVEMENTS	8,830	8,569	261	
SIGN (FRONT OF PROPERTY)	650	650	0	
KENNELS	75,979	75,979	0	
PRESSURE WASHER	481	481	0	
CONCRETE	24,000	23,291	709	
ARBOR	2,878	2,878	0	
FENCING	1,766	1,766	0	
FENCING	13,942	13,942	0	
RADIOS	1,564	1,564	0	
LAND IMPROVEMENTS	4,871	4,440	431	
LOAN FEES SESLOC	9,174	2,996	6,178	
HARD DRIVE	158	158	0	
MEDIA CENTER	1,164	1,164	0	
I-MAC 24"	1,677	1,677	0	
WATER HEATER FOR DOG BATHS	376	376	0	
SURROUND SOUND	323	323	0	
PROJECTOR	1,295	1,295	0	
APPLIANCES FOR MOBILE	2,157	2,157	0	
FURNITURE FOR MOBILE	860	860	0	
BEDS FOR MOBILE	2,470	2,470	0	
BEDS FOR HOUSE LEADERS	537	537	0	
DAY CARE LIGHTING	2,662	2,662	0	
LIGHTING	622	622	0	
SAILCLOTH SHADE	1,179	1,176	3	
FENCING	8,468	8,468	0	
FENCING - INDIVIDUAL RUNS	22,917	22,917	0	
NEW SUITES	13,398	13,398	0	
STORAGE SHED	893	893	0	
LAND IMPROVEMENTS	4,207	3,360	847	
SEPTIC SYSTEM	42,262	36,023	6,239	
LAND IMPROVEMENTS	645	549	96	
GRAVEL FOR DRIVEWAY	2,502	2,133	369	
ELECTRICAL REWIRING ON HOUSE	1,543	1,540	3	
BARN	30,400	25,675	4,725	
MANUFACTURED HOMES	190,909	117,876	73,033	
CHAINSAW	154	154	0	
2 DISHWASERS	235	235	0	
SOFA	161	161	0	
A/C UNIT FOR THPR OFFICE	485	485	0	
STOVE FOR RANCH HOUSE	334	334	0	
RAILROAD TIES FOR LANDSCAPING	408	324	84	
NEW SUITES #2	3,419	3,416	3	
LANDSCAPING	161	129	32	
LANDSCAPING	553	422	131	
ELEVATION CERTIFICATES - FLOOD SURVEY	450	358	92	
FENCING	853	853	0	
PLANTS & TREES	750	594	156	
REFURBISHED IMAC COMPUTER	1,106	1,106	0	
1992 SUZUKI QUAD	1,000	1,000	0	
FENCING	258	258	0	
GROOMING STATION	2,729	2,729	0	
DOG ENCLOSURES	5,064	5,061	3	
ELECTRICAL WORK	6,454	6,454	0	
FARM EQUIPMENT	368	368	0	
WEBCAM - RANCH HOUSE	950	950	0	
IPAD - THPR	647	647	0	
DOG ENCLOSURE	870	870	0	
FLOORING	865	865	0	
RAIN GUTTERS	1,575	1,575	0	
1983 TENT TRAILER	500	500	0	
RADIOS - OLD KG BLACK	1,476	1,476	0	
PLAYYARD STRUCTURES	463	463	0	
OFFICE UPGRADE	858	858	0	
MACBOOK	750	750	0	
GENERATORS	769	769	0	
COMPUTER CPU - GROOMING	1,466	1,466	0	
PET DRYER	309	309	0	
GENERATOR - DURACELL DS55B2I	3,000	3,000	0	
IPAD MINI	576	576	0	
ALARM SYSTEM THPR	5,545	5,545	0	
MACBOOK PRO - NICOLE	1,098	1,098	0	
2 IPAD MINIS	606	606	0	
ALPHA SERVER	615	615	0	
I-MAC 27"	2,153	2,153	0	
SMALL TOOLS	539	507	32	
KENNELS - IMPROVEMENTS	4,957	3,100	1,857	
KENNELS - WIRING	1,304	1,116	188	
BRIDGE - BUCKLEY ROAD	51,345	21,964	29,381	
GATE	3,058	2,622	436	
1 DURACELL GENERATOR	1,399	1,399	0	
13.3 MACBOOK PRO	1,618	1,618	0	
EPSOON 2030 PROJECTOR	999	999	0	
6 MOTORAL RADIOS	1,462	1,462	0	
VENDING MACHINE	3,975	3,975	0	
21.5 IMAC - REFURBISHED	1,003	1,003	0	
KENNELS	1,165	955	210	
INSULATE BOARDING HOUSES - KENNEL	4,234	3,176	1,058	
BOARDING YARD FENCE	1,465	1,080	385	
2 SHEDS 10X12	5,353	4,526	827	
FOUNDATION - RANCH HOUSE	5,649	822	4,827	
FENCING - DAY CARE PROJECT	6,489	4,712	1,777	
BLDG - 40X24 SECTIONAL MODULAR	21,926	6,028	15,898	
2004 CHEVY SUBURBAN	8,000	8,000	0	
1 COMPUTER	1,280	1,280	0	
FENCING - DAY CARE PROJECT	20,139	11,622	8,517	
DAY CARE PROJECT - IMPROVEMENTS	38,877	4,653	34,224	
FORD F-250	9,200	7,667	1,533	
WASHER & DRYER	1,200	940	260	
VINYL FLOORING - MAIN OFFICE	3,758	2,148	1,610	
MACBOOK PRO	1,280	768	512	
APLOS SOFTWARE - NON-PROFIT	1,815	1,815	0	
COUCHES AND CHAIRS	1,182	394	788	
LOAN FEES SESLOC	9,341	1,609	7,732	
WASHER & DRYER	4,449	1,557	2,892	
ALARM SYSTEM	6,305	75	6,230	
TRAINING YARD LANDSCAPING	24,785	826	23,959	

TY 2019 IRS 990 e-File Render

Name: SON CARE FOUNDATION INC
C/O JACK H GOULD JR

EIN: 75-2547239

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL	487	0	0	487

TY 2019 IRS 990 e-File Render

Name: SON CARE FOUNDATION INC
C/O JACK H GOULD JR

EIN: 75-2547239

Total Mortgage Amount: 1,083,222

Item No.	1
Lender's Name	KJUC
Lender's Title	
Relationship to Insider	
Original Amount of Loan	
Balance Due	66,568
Date of Note	
Maturity Date	
Repayment Terms	
Interest Rate	
Security Provided by Borrower	
Purpose of Loan	
Description of Lender Consideration	
Consideration FMV	

Item No.	2
Lender's Name	SESLOC LOAN - RELN
Lender's Title	
Relationship to Insider	
Original Amount of Loan	
Balance Due	1,016,654
Date of Note	
Maturity Date	
Repayment Terms	
Interest Rate	
Security Provided by Borrower	
Purpose of Loan	REFINANCE RANCH PURCHASE
Description of Lender Consideration	BUILDING
Consideration FMV	1700000

TY 2019 IRS 990 e-File Render

Name: SON CARE FOUNDATION INC
C/O JACK H GOULD JR

EIN: 75-2547239

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
TRAINING PRODUCTS	1,536	1,453	1,453

TY 2019 IRS 990 e-File Render**Name:** SON CARE FOUNDATION INC

C/O JACK H GOULD JR

EIN: 75-2547239

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
AUTO EXPENSE	31,669	0	0	31,669
BANK CHARGES	26,330	0	0	26,330
INSURANCE-WORKER'S COMP	18,727	0	0	18,727
INSURANCE-GENERAL LIABILITY	18,216	0	0	18,216
OFFICE SUPPLIES & EXPENSE	30,147	0	0	30,147
MEALS	16,729	0	0	16,729
MISCELLANOUS EXPENSE	12,577	0	0	12,624
PROGRAM EXPENSES	2,680	0	0	2,680
MATERIALS & SUPPLIES	44,443	0	0	44,443
ADVERTISING	44,321	0	0	44,321
ANIMAL CARE	101,688	0	0	101,688
UNIFORMS	4,035	0	0	4,035
STAFF DEVELOPMENT	3,008	0	0	3,008
CONTRIBUTIONS	1,494	0	0	1,494
MAINTENANCE TOOLS	1,575	0	0	1,575
MAINTENANCE LABOR	32,266	0	0	32,266
EMPLOYEE RECRUITING	4,708	0	0	4,708
LICENSES AND PERMITS	146	0	0	146
AMORTIZATION	852	0	852	0

TY 2019 IRS 990 e-File Render

Name: SON CARE FOUNDATION INC
C/O JACK H GOULD JR

EIN: 75-2547239

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
STUDENT ROOM & BOARD	17,758		17,758
KENNEL OPERATIONS	1,063,884		1,063,884

TY 2019 IRS 990 e-File Render

Name: SON CARE FOUNDATION INC

C/O JACK H GOULD JR

EIN: 75-2547239

Description	Beginning of Year - Book Value	End of Year - Book Value
CREDIT CARDS PAYABLE	17,456	27,261
SALES TAX PAYABLE	2	74
SECURITY DEPOSITS	550	1,250

TY 2019 IRS 990 e-File Render

Name: SON CARE FOUNDATION INC
C/O JACK H GOULD JR

EIN: 75-2547239

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL PROCESSING FEES	5,424	0	0	5,424
CONSULTING	2,430	0	0	2,430

TY 2019 IRS 990 e-File Render

Name: SON CARE FOUNDATION INC
C/O JACK H GOULD JR

EIN: 75-2547239

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAX	68,098	0	11,738	56,360
PROPERTY TAXES	52	0	0	52