

Form **990-PF**
 Department of the Treasury
 Internal Revenue Service

Return of Private Foundation
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.**

OMB No. 1545-0052
2020
Open to Public Inspection

For calendar year 2020, or tax year beginning 10-01-2020 , and ending 09-30-2021

Name of foundation CHRISTIAN OLSEN PRIVATE FOUNDATION C/O JOSHUA M FLEMING		A Employer identification number 65-6400515	
Number and street (or P.O. box number if mail is not delivered to street address) 11891 US HIGHWAY ONE NO 100	Room/suite	B Telephone number (see instructions) (561) 622-2700	
City or town, state or province, country, and ZIP or foreign postal code NORTH PALM BEACH, FL 33408		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here..... <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <u>8,976,411</u>		J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis.)</i>	
F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>			

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	106	106		
	4 Dividends and interest from securities	114,989	114,989		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	1,425,540			
	b Gross sales price for all assets on line 6a	5,234,139			
	7 Capital gain net income (from Part IV, line 2)		1,425,540		
	8 Net short-term capital gain				
	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)					
12 Total. Add lines 1 through 11	1,540,635	1,540,635			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	96,000	57,600		38,400
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)	104,404	62,642		41,762
	b Accounting fees (attach schedule)	8,675	5,205		3,470
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	19,671	0		0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	104,614	0		0
	24 Total operating and administrative expenses. Add lines 13 through 23	333,364	125,447		83,632
	25 Contributions, gifts, grants paid	304,257			304,257
26 Total expenses and disbursements. Add lines 24 and 25	637,621	125,447		387,889	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	903,014				
b Net investment income (if negative, enter -0-)		1,415,188			
c Adjusted net income (if negative, enter -0-)					

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	622,282	738,879	738,879
	2 Savings and temporary cash investments			
	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)	5,605,317	6,411,405	8,237,532
	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 ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)	4,234	0	0	
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	6,231,833	7,150,284	8,976,411	
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)			
	22 Other liabilities (describe ▶ _____)	0	15,437	
	23 Total liabilities (add lines 17 through 22)	0	15,437	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions	6,231,833	7,134,847	
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
29 Total net assets or fund balances (see instructions)	6,231,833	7,134,847		
30 Total liabilities and net assets/fund balances (see instructions) .	6,231,833	7,150,284		

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	6,231,833
2 Enter amount from Part I, line 27a		2	903,014
3 Other increases not included in line 2 (itemize) ▶ _____		3	0
4 Add lines 1, 2, and 3		4	7,134,847
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	7,134,847

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.)
1 a RAYMOND JAMES #9886	P		
b RAYMOND JAMES #9886	P		
c RAYMOND JAMES #9886	P		
d RAYMOND JAMES #9886	P		
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 92			92
b 27,100			27,100
c 1,276,502		1,131,065	145,437
d 3,930,445		2,677,534	1,252,911
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			92
b			27,100
c			145,437
d			1,252,911
e			

2 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	1,425,540
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				3	

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

SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE

1 Reserved	(a) Reserved	(b) Reserved	(c) Reserved	(d) Reserved
2 Reserved				2
3 Reserved				3
4 Reserved				4
5 Reserved				5
6 Reserved				6
7 Reserved				7
8 Reserved				8

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

Table with 11 rows for excise tax calculations. Includes fields for exempt foundations, tax under section 511, tax based on investment income, and credits/payments. Total tax due is 15,437.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns include question number, Yes, and No. Questions cover political activities, tax on political expenditures, and asset requirements.

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>NONE</u>	Yes	
14	The books are in care of ▶ <u>JOSEPH FLEMING</u> Telephone no. ▶ <u>(561) 622-2700</u>		
	Located at ▶ <u>11891 US HIGHWAY ONE NO 100 NORTH PALM BEACH FL</u> ZIP+4 ▶ <u>33408</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year ▶ <u>15</u>		
16	At any time during calendar year 2020, 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 country ▶	Yes	No
		16	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 checked="" type="checkbox"/> Yes <input 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 Organizations relying on a current notice regarding disaster assistance check here. ▶ <input type="checkbox"/>	1b	No
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 2020?	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 2020, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2020? If "Yes," list the years ▶ 20____, 20____, 20____, 20____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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 2020 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 2020.)	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 2020?	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:				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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			5b		
Organizations relying on a current notice regarding disaster assistance check here.	<input checked="" type="checkbox"/>				
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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d).</i>					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			6b		No
<i>If "Yes" to 6b, file Form 8870.</i>					
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
b If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?			7b		
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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			

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
JOSEPH M FLEMING 11891 US HIGHWAY ONE STE 100 NORTH PALM BEACH, FL 33408	TRUSTEE 9.00	96,000	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
NONE				
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
FLEMING & FLEMING PLLC 11891 US HWY ONE STE 100 NORTH PALM BEACH, FL 33408	LEGAL	104,404
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	
2	
3	
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	
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	8,029,321
b	Average of monthly cash balances.	1b	1,019,925
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	9,049,246
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	9,049,246
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	135,739
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	8,913,507
6	Minimum investment return. Enter 5% of line 5.	6	445,675

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	445,675
2a	Tax on investment income for 2020 from Part VI, line 5.	2a	19,671
b	Income tax for 2020. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	19,671
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	426,004
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	426,004
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	426,004

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	387,889
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	387,889
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	387,889

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 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI, line 7				426,004
2 Undistributed income, if any, as of the end of 2020:				
a Enter amount for 2019 only.			304,257	
b Total for prior years: 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2020:				
a From 2015.				
b From 2016.				
c From 2017.				
d From 2018.				
e From 2019.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$ <u>387,889</u>				
a Applied to 2019, but not more than line 2a			304,257	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2020 distributable amount.				83,632
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2020. (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b Prior years' undistributed income. Subtract line 4b from line 2b		0		
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.			0	
d Subtract line 6c from line 6b. Taxable amount—see instructions		0		
e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				342,372
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).	0			
8 Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9:				
a Excess from 2016.				
b Excess from 2017.				
c Excess from 2018.				
d Excess from 2019.				
e Excess from 2020.				

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 2020, enter the date of the ruling. ▶					
b Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2020	(b) 2019	(c) 2018	(d) 2017	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test—enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
c "Support" alternative test—enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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).)

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 e-mail address of the person to whom applications should be addressed:
 CHRISTIAN OLSEN PRIVATE FOUNDATION
 11891 US ONE STE 100
 NORTH PALM BEACH, FL 33408
 (561) 622-2700

b The form in which applications should be submitted and information and materials they should include:
 1. THE CERTIFICATION, APPLICATION, PROJECT DESCRIPTION & BUDGET PAGES. 2. A COPY OF THE ORGANIZATION'S MOST RECENT SECTION 501(C)(3) IRS RULING. 3. A COPY OF THE ORGANIZATION'S MOST RECENT FINANCIAL STATEMENTS OR TAX RETURN. 4. A LIST OF THE ORGANIZATION'S OFFICERS AND DIRECTORS.

c Any submission deadlines:
 FEBRUARY 15, MAY 15, AUGUST 15, NOVEMBER 15

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:
 THE FOUNDATION AWARDS CHARITABLE DISTRIBUTIONS ONLY TO ORGANIZATIONS WHICH SATISFY THE REQUIREMENTS OF SECTION 170(B)(1)(A), 170 (C), 2055(A), AND 2522(A) OF THE INTERNAL REVENUE CODE.

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> See Additional Data Table				
Total ▶ 3a				304,257
b <i>Approved for future payment</i>				
Total ▶ 3b				0

Form 990PF Part XV Line 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>				
ADOPT A FAMILY OF PALM BEACH 1712 2ND AVE N LAKE WORTH, FL 33460		501(C)(3)	FAMILY SERVICES	4,000
ALZHEIMER'S ASSOCIATION SE FLORIDA CHAPTER 3333 FOREST HILL BLVD STE 101 WEST PALM BEACH, FL 33406		501(C)(3)	MEDICAL SERVICES	4,000
AMERICAN HEART ASSOCIATION 2300 CENTERPARK W DR WEST PALM BEACH, FL 33409		501(C)(3)	MEDICAL RESEARCH AND EDUCATION	4,000
Total ▶ 3a				304,257

Form 990PF Part XV Line 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>				
AMERICAN RED CROSS 1250 NORTHPOINT PKY WEST PALM BEACH, FL 33407		501(C)(3)	PROVIDE EMERGENCY ASSISTANCE	4,000
AMERICA'S SECOND HARVEST OF THE BIG BEND 110 FOUR POINTS WAY TALLAHASSEE, FL 32305		501(C)(3)	TRYING TO ELIMINATE CANCER AS A MAJOR HEALTH PROBLEM	4,000
ARC OF PALM BEACH COUNTY 1201 AUSTRALIAN AVENUE RIVIERA BEACH, FL 33404		501(C)(3)	SUPPORT TO THE MENTALLY HANDICAPPED	4,000
Total ▶ 3a				304,257

Form 990PF Part XV Line 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>				
ARMORY ART CENTER 1700 PARKER AVE WEST PALM BEACH, FL 33401		501(C)(3)	INSPIRE THE CREATION AND EXPERIENCE OF ART	5,000
BARNABAS CENTER 1202 JASMINE STREET STE 101 FERNANDINA BEACH, FL 32034		501(C)(3)	EMERGENCY ASSISTANCE FOR NASSAU COUNTY RESIDENTS WITH	4,257
BASE CAMP CHILDREN'S CANCER 650 N WYMORE RD STE 103 WINTER PARK, FL 327892859		501(C)(3)	PROGRAMS FOR CHILDREN AND FAMILIES FACING LIVING WITH CANCER	4,000
Total ▶ 3a				304,257

Form 990PF Part XV Line 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>				
BIG BROTHERS BIG SISTERS OF PALM BEACH COUNTY INC 1700 KIRK RD WEST PALM BEACH, FL 33406		501(C)(3)	ENHANCE DEVELOPMENT OF CHILDREN	4,000
BOCA HELPING HANDS 1500 NW 1ST COURT BOCA RATON, FL 33432		501(C)(3)	FOOD BANK AND JOB TRAINING	4,000
BOGGY CREEK GANG 30500 BRANTLEY BRANCH ROAD EUSTIS, FL 32736		501(C)(3)	CAMP FOR SERIOUSLY ILL CHILDREN	4,000
Total ▶ 3a				304,257

Form 990PF Part XV Line 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>				
CHILDREN OF FALLEN PATRIOTS FOUNDATION 44900 PRENTICE DRIVE DULLES, VA 20166		501(C)(3)	EDUCATIONAL COUNSELING AND SCHOLARSHIPS	4,000
CHILDRENS CANCER CENTER 4901 W CYPRESS ST TAMPA, FL 33607		501(C)(3)	PROVIDING SUPPORT FOR FAMILIES OF CHILDREN WITH CANCER OR LIFE-THREATENING ILLNESSES	4,000
CHILDREN'S DREAM FUND PO BOX 1881 ST PETERSBURG, FL 33731		501(C)(3)	GRANTING WISHES TO SERIOUSLY ILL CHILDREN	4,000
Total				304,257

▶ **3a**

Form 990PF Part XV Line 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>				
CHILDREN'S HOME SOCIETY OF FLORIDA SOUTH COAST DIVISION 3333 FOREST HILL BLVD WEST PALM BEACH, FL 33406		501(C)(3)	PREVENTING CHILD ABUSE	4,000
CLOTHES TO KIDS 1059 N HERCULES AVE CLEARWATER, FL 33765		501(C)(3)	CLOTHING DISTRIBUTIONS	4,000
COLEL CHABAD806 EASTERN PARKWAY BROOKLYN, NY 11213		501(C)(3)	ASSISTANCE TO PEOPLE IN NEED	4,000
Total ▶ 3a				304,257

Form 990PF Part XV Line 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>				
CONNOR MORAN CHILDREN'S CANCER FOUNDATION 401 OLD DIXIE HWY SUITE 4221 JUPITER, FL 33469		501(C)(3)	TO PROVIDE ASSISTANCE FOR CHILDREN WITH CANCER	4,000
COVENANT HOUSE FLORIDA 773 BREAKERS AVENUE FORT LAUDERDALE, FL 33304		501(C)(3)	PROVIDES HOUSING AND SERVICES FOR RUNAWAY, HOMELESS AND AT-RISK YOUTH UNDER 21.	4,000
DREAMS COME TRUE 6803 SOUTHPOINT PKWY JACKSONVILLE, FL 32216		501(C)(3)	ENHANCE THE LIVES OF CHILDREN WITH LIFE-THREATENING ILLNESSES	4,000
Total				304,257

▶ 3a

Form 990PF Part XV Line 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>				
EDGEWOOD CHILDREN'S RANCH 1451 EDGEWOOD RANCH RD ORLANDO, FL 32835		501(C)(3)	HOME FOR CHILDREN WITH SPECIAL NEEDS	4,000
FEEDING AMERICA OF TAMPA BAY 4702 TRANSPORT DR BLDG 6 TAMPA, FL 33605		501(C)(3)	FOOD BANK	4,000
FEEDING SOUTH FLORIDA 2501 SW 32ND TERRACE PEMBROKE PINES, FL 33023		501(C)(3)	FOOD BANK	4,000
Total ▶ 3a				304,257

Form 990PF Part XV Line 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>				
FIGHT FOR SIGHT 381 PARK AVE STE 809 NEW YORK, NY 10016		501(C)(3)	MEDICAL RESEARCH TO STOP SIGHT LOSS	4,000
FLORIDA OUTREACH CENTER FOR THE BLIND INC 1386 VICTORIA DR WEST PALM BEACH, FL 33406		501(C)(3)	PROVIDE SERVICES FOR THE BLIND	4,000
GIFT OF LIFE BONE MARROW REGISTRY 800 YAMATO RD BOCA RATON, FL 33431		501(C)(3)	PROVIDING CANCER TREATMENT	4,000
Total ▶ 3a				304,257

Form 990PF Part XV Line 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>				
GIVE THE KIDS THE WORLD 210 SOUTH BASS ROAD KISSIMMEE, FL 34746		501(C)(3)	WISH FULFILLMENT FOR ILL CHILDREN	4,000
HELEN KELLER SERVICES FOR THE BLIND 57 WILLOUGHBY ST BROOKLYN, NY 11201		501(C)(3)	HELP BLIND INDIVIDUALS BE INDEPENDENT	4,000
HIDDEN TREASURE CHRISTIAN SCHOOL 500 W LEE ROAD TAYLORS, SC 29687		501(C)(3)	EDUCATION FOR SPECIAL NEEDS CHILDREN	8,000
Total ▶ 3a				304,257

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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Name and address (home or business)				
a <i>Paid during the year</i>				
HOLY GROUND SHELTER FOR HOMELESS INC 200 W 20TH STREET RIVIERA BEACH, FL 33404		501(C)(3)	PROVIDE LIVING ASSISTANCE AND SHELTER FOR HOMELESS,PREGNANT AND/OR PARENTING TEENS AND YOUNG ADULT FEMALES.	4,000
HOME SAFE2840 6TH AVENUE S LAKE WORTH, FL 33461		501(C)(3)	PREVENTION OF CHILD ABUSE	4,000
HOMELESS EMERGENCY PROGRAM 1120 N BETTY LANE CLEARWATER, FL 33755		501(C)(3)	HELP INDIVIDUALS AND FAMILIES WHO ARE HOMELESS	4,000
Total				304,257

▶ **3a**

Form 990PF Part XV Line 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>				
HOMES FOR OUR TROOPS INC 6 MAIN STREET TAUNTON, MA 02780		501(C)(3)	TO PROVIDE HOUSING FOR SEVERELY INJURED VETERANS.	4,000
HUMANE SOCIETY OF GREATER MIAMI 16101 W DIXIE HIGHWAY N MIAMI BEACH, FL 33160		501(C)(3)	END CRUELTY TO ANIMALS	4,000
ISRAEL CANCER ASSOCIATION USA 2751 S DIXIE HWY BLDG EAST 1002 WEST PALM BEACH, FL 33405		501(C)(3)	CANCER RESEARCH	4,000
Total ▶ 3a				304,257

Form 990PF Part XV Line 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>				
JUPITER MEDICAL CENTER FOUNDATION 1210 SOUTH OLD DIXIE HIGHWAY BLDG EAST 1002 JUPITER, FL 33458		501(C)(3)	FUNDRAISING TO ASSURE CLINICAL EXCELLENCE AND QUALITY CARE AT THE JUPITER MEDICAL CENTER	10,000
KIDS BEATING CANCER 228 E WINTER PARK ST ORLANDO, FL 32804		501(C)(3)	HELP CHILDREN WITH CANCER	4,000
KIDS IN DISTRESS INC 1301 N CONGRESS AVE STE 310 BOYNTON BEACH, FL 33426		501(C)(3)	PREVENT CHILD ABUSE	4,000
Total ▶ 3a				304,257

Form 990PF Part XV Line 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>				
LEUKEMIA & LYMPHOMA SOCIETY 4360 NORTHLAKE BLVD PALM BEACH GARDENS, FL 33410		501(C)(3)	MEDICAL SERVICES	7,500
LIFE NET 4 FAMILIES ONE NW 33RD TERRACE FT LAUDERDALE, FL 33311		501(C)(3)	PROVIDE FOOD, COUNSELING AND CLOTHING TO PEOPLE IN NEED	4,000
LIGHTHOUSE FOR THE BLIND OF THE PALM BEACHES 1710 TIFFANY DRIVE EAST WEST PALM BEACH, FL 33407		501(C)(3)	ENHANCE INDEPENDENCE FOR THE BLIND	4,000
Total				304,257

▶ 3a

Form 990PF Part XV Line 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>				
LITTLE SMILES3569 91ST ST N SUITE 4 PALM BEACH GARDENS, FL 334031144		501(C)(3)	PROVIDE TOYS AND OTHER ENRICHMENT TO CHILDREN IN HOSPITALS	4,000
MAKE-A-WISH FOUNDATION OF SOUTH FLORIDA 4491 S STATE RD 7 SUITE 201 FORT LAUDERDALE, FL 33312		501(C)(3)	MAKE LIFE BETTER FOR KIDS WITH LIFE-THREATENING MEDICAL CONDITIONS	4,000
MILAGRO CENTER695 AUBURN AVE DELRAY BEACH, FL 33444		501(C)(3)	ENRICH CHILDREN WITH ART AND ACADEMIC EDUCATION	4,000
Total ▶ 3a				304,257

Form 990PF Part XV Line 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>				
NATIONAL CENTER FOR MISSING AND EXPLOITED CHILDREN 9176 ALTERNATE A1A STE 200 LAKE PARK, FL 33404		501(C)(3)	HELP FIND, RESCUE AND CARE FOR MISSING AND SEXUALLY EXPLOITED CHILDEN	4,000
NATIONAL PEDIATRIC CANCER FOUNDATION 5550 W EXECUTIVE DR STE 300 TAMPA, FL 33609		501(C)(3)	PROVIDING RESOURCE AND SUPPORT FOR CHILDREN WITH CANCER	4,000
PALM BEACH COUNTY FOOD BANK 701 BOUTWELL RD STE 2-A LAKE WORTH, FL 33461		501(C)(3)	FOOD BANK	4,000
Total ▶ 3a				304,257

Form 990PF Part XV Line 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>				
PELICAN HARBOR SEABIRD STATION 1279 NE 79TH STREET CAUSEWAY MIAMI, FL 33138		501(C)(3)	WILDLIFE RESCUE	4,000
PLACE OF HOPE9078 ISAIAH LANE PALM BEACH GARDENS, FL 33418		501(C)(3)	ENHANCE LIVES OF CHILDREN	4,000
REHABILITATION CENTER FOR CHILDREN AND ADULTS 300 ROYAL PALM WAY WEST PALM BEACH, FL 33480		501(C)(3)	REHABILITATION CENTER FOR ADULTS AND CHILDREN WITH DISABILITIES.	4,000
Total ▶ 3a				304,257

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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Name and address (home or business)				
a <i>Paid during the year</i>				
SCHOOL OF THE ARTS FOUNDATION PO BOX 552 WEST PALM BEACH, FL 33402		501(C)(3)	EDUCATION FOR CHILDREN	7,500
SECOND HARVEST FOOD BANK OF CENTRAL FLORIDA 411 MERCY DRIVE ORLANDO, FL 32805		501(C)(3)	PROVIDE FOOD FOR PEOPLE IN NEED	4,000
SHELTER FOR ABUSED WOMEN PO BOX 10102 NAPLES, FL 34101		501(C)(3)	HELP WOMEN IN NEED	4,000
Total ▶ 3a				304,257

Form 990PF Part XV Line 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>				
SMART RIDE TRS ADVENTURES INC 1314 E LAS OLAS BLVD STE 302 FT LAUDERDALE, FL 33301		501(C)(3)	OUTREACH FOR THOSE INFECTED, AFFECTED AND AT RISK FOR HIV/AIDS	5,000
SOS CHILDRENS VILLAGE 3681 NW 59TH PLACE COCOANUT CREEK, FL 33073		501(C)(3)	ENHANCE LIVES OF CHILDREN	4,000
SPECIAL OPERATIONS WARRIOR FUND PO BOX 89367 TAMPA, FL 33689		501(C)(3)	COLLEGE SCHOLARSHIP GRANTS	5,000
Total ▶ 3a				304,257

Form 990PF Part XV Line 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>				
ST JUDE CHILDREN'S RESEARCH HOSPITAL 262 DANNY THOMAS PL MEMPHIS, TN 38105		501(C)(3)	RESEARCH AND MEDICAL TREATMENT FOR CHILDREN WITH CANCER	4,000
STUDENT ACES 7750 ARBOR CREST WAY PALM BEACH GARDENS, FL 33412		501(C)(3)	DEVELOP CHARACTER, HONOR AND INTEGRITY IN HIGH SCHOOL STUDENTS	4,000
SUSAN G KOMEN BREAST CANCER FOUNDATION 1309 N FLAGLER DR WEST PALM BEACH, FL 33401		501(C)(3)	TREATMENT AND PREVENTION OF BREAST CANCER	4,000
Total	▶ 3a			304,257

Form 990PF Part XV Line 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>				
THE FIRST TEE OF THE PALM BEACHES 7301 N HAVERHILL RD WEST PALM BEACH, FL 33407		501(C)(3)	BUILD CHARACTER, VALUE, AND HEALTHY CHOICES THROUGH	4,000
THE LORD'S PLACE 2808 N AUSTRALIAN AVE WEST PALM BEACH, FL 33407		501(C)(3)	PROVIDES SERVICES AND OUTREACH TO HOMELESS PEOPLE	4,000
TRI-COUNTY HUMANE SOCIETY 21287 BOCA RIO RD BOCA RATON, FL 33433		501(C)(3)	END CRUELTY TO ANIMALS	4,000
Total ▶ 3a				304,257

Form 990PF Part XV Line 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>				
TRUSTBRIDGE HOSPICE OF PALM BEACH COUNTY 5300 EAST AVE WEST PALM BEACH, FL 33407				
UMSYLVESTER COMPREHENSIVE CENTER 1475 NW 12TH AVE MIAMI, FL 33136				
WORLD CENTRAL KITCHEN INC 1342 FLORIDA AVENUE NW WASHINGTON, DC 20009				
Total	▶ 3a			304,257

Form 990PF Part XV Line 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>				
WOUNDED WARRIORS FAMILY SUPPORT 11218 JOHN GALT BLVD STE 103 OMAHA, NE 68137		501(C)(3)	VETERANS SUPPORT	5,000
YMCA OF PALM BEACH COUNTY 1016 N DIXIE HIGHWAY WEST PALM BEACH, FL 33401		501(C)(3)	PROVIDE CHILDREN WITH A SAFE PLACE FOR ACTIVITIES	4,000
YMCA OF TREASURE COAST FL INC 1700 SE MONTERAY RD STUART, FL 34996		501(C)(3)	PROVIDE CHILDREN WITH A SAFE PLACE FOR ACTIVITIES	5,000
Total				304,257

▶ 3a

TY 2020 Accounting Fees Schedule**Name:** CHRISTIAN OLSEN PRIVATE FOUNDATION

C/O JOSHUA M FLEMING

EIN: 65-6400515

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	8,675	5,205		3,470

TY 2020 Investments Corporate Stock Schedule

Name: CHRISTIAN OLSEN PRIVATE FOUNDATION
C/O JOSHUA M FLEMING

EIN: 65-6400515

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
RAYMOND JAMES #9886	6,411,405	8,237,532

TY 2020 Legal Fees Schedule

Name: CHRISTIAN OLSEN PRIVATE FOUNDATION
C/O JOSHUA M FLEMING

EIN: 65-6400515

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	104,404	62,642		41,762

TY 2020 Other Assets Schedule

Name: CHRISTIAN OLSEN PRIVATE FOUNDATION
C/O JOSHUA M FLEMING
EIN: 65-6400515

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
PREPAID TAXES	4,234	0	0

TY 2020 Other Expenses Schedule

Name: CHRISTIAN OLSEN PRIVATE FOUNDATION
C/O JOSHUA M FLEMING

EIN: 65-6400515

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	104,614	0		0

TY 2020 Other Liabilities Schedule**Name:** CHRISTIAN OLSEN PRIVATE FOUNDATION

C/O JOSHUA M FLEMING

EIN: 65-6400515

Description	Beginning of Year - Book Value	End of Year - Book Value
TAX LIABILITY	0	15,437

TY 2020 Taxes Schedule

Name: CHRISTIAN OLSEN PRIVATE FOUNDATION
C/O JOSHUA M FLEMING

EIN: 65-6400515

Taxes Schedule

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAXES	19,671	0		0