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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

2010

For calendar year 2010, or tax year beginning , 2010, and ending , 20

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return
☐ Amended return ☐ Address change ☒ Name change

Name of foundation The Atkins Foundation, Inc.		A Employer identification number 20-4235058
Number and street (or P O box number if mail is not delivered to street address) 4030 W. Boy Scout Blvd., Suite 700	Room/suite	B Telephone number (see page 10 of the instructions) 813-282-7375
City or town, state, and ZIP code Tampa, FL 33607		C If exemption application is pending, check here ☐
H Check type of organization: ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		D 1. Foreign organizations, check here ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ☐
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 855,856	J Accounting method: ☒ Cash ☐ Accrual ☐ Other (specify) _____	E If private foundation status was terminated under section 507(b)(1)(A), check here ☐
(Part I, column (d) must be on cash basis.)		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

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 page 11 of the instructions))		(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)	291,881			
	2 Check ☐ if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	9,891	9,891	0	
	4 Dividends and interest from securities	0	0	0	
	5a Gross rents	0	0	0	
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	0			
	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			0	
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)	0		0		
11 Other income (attach schedule)	0	0	0		
12 Total. Add lines 1 through 11	301,772	9,891	0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0	0	0	0
	14 Other employee salaries and wages	0	0	0	0
	15 Pension plans, employee benefits	0	0	0	0
	16a Legal fees (attach schedule)	0	0	0	0
	b Accounting fees (attach schedule)	0	0	0	0
	c Other professional fees (attach schedule)	0	0	0	0
	17 Interest	0	0	0	0
	18 Taxes (attach schedule) (see page 14 of the instructions)	2,564	0	0	0
	19 Depreciation (attach schedule) and depletion	0	0	0	
	20 Occupancy	0	0	0	0
	21 Travel, conferences, and meetings	0		0	0
	22 Printing and publications	0	0	0	0
	23 Other expenses (attach schedule)	7,400	0		7,400
	24 Total operating and administrative expenses. Add lines 13 through 23	9,964	0	0	7,400
	25 Contributions, gifts, grants paid	342,402			342,402
26 Total expenses and disbursements. Add lines 24 and 25	352,366	0	0	349,802	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	(50,594)				
b Net investment income (if negative, enter -0-)		9,891			
c Adjusted net income (if negative, enter -0-)			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	204,825	149,466	149,466
	2	Savings and temporary cash investments	700,000	705,265	705,265
	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 page 15 of the 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) ▶			
Liabilities	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ▶ ORGANIZATION COSTS)	1,625	1,125	1,125
	16	Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	906,450	855,856	855,856
Net Assets or Fund Balances	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 ▶)			
Net Assets or Fund Balances	23	Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.			
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg., and equipment fund	3,000	3,000	
	29	Retained earnings, accumulated income, endowment, or other funds	903,450	852,856	
	30	Total net assets or fund balances (see page 17 of the instructions)	906,450	855,856	
	31	Total liabilities and net assets/fund balances (see page 17 of the instructions)	906,450	855,856	

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 30 (must agree with end-of-year figure reported on prior year's return)	1	906,450
2	Enter amount from Part I, line 27a	2	(50,594)
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	855,856
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	855,856

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			n/a	n/a
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			0	
b			0	
c			0	
d			0	
e			0	
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				(i) 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		0	0	
b		0	0	
c		0	0	
d		0	0	
e		0	0	
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	0
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 pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8			3	n/a

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.

(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))
2009	420,741	878,456	.4790
2008	324,839	0	0
2007			
2006			
2005			
2 Total of line 1, column (d)			2 .4790
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 .2395
4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5			4 866,581
5 Multiply line 4 by line 3			5 207,527
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 99
7 Add lines 5 and 6			7 207,626
8 Enter qualifying distributions from Part XII, line 4 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 on page 18.			8 349,802

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the 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 ☒ and enter 1% of Part I, line 27b	1	99.	00
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-)	2		0
3	Add lines 1 and 2	3	99.	00
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4		0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	99.	00
6	Credits/Payments:			
a	2010 estimated tax payments and 2009 overpayment credited to 2010	6a		0
b	Exempt foreign organizations—tax withheld at source	6b		0
c	Tax paid with application for extension of time to file (Form 8868)	6c		0
d	Backup withholding erroneously withheld	6d		0
7	Total credits and payments. Add lines 6a through 6d	7		0
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8		0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	99.	00
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		
11	Enter the amount of line 10 to be: Credited to 2011 estimated tax ☐ Refunded ☐ 11	11		

Part VII-A Statements Regarding Activities

	Yes	No
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 page 19 of the instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>		✓
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. ► \$ <u>0</u> (2) On foundation managers. ► \$ <u>0</u>		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ <u>0</u>		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>		✓
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? <i>If "Yes," attach a conformed copy of the changes</i>		✓
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?	N	Y
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>		✓
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? <i>If "Yes," complete Part II, col. (c), and Part XV</i>	✓	
8a Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ► FLORIDA		
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 <i>General Instruction G</i> ? <i>If "No," attach explanation</i>	N	Y
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 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page 27)? <i>If "Yes," complete Part XIV</i>		✓
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	✓	

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 page 20 of the instructions)	11		✓
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		✓
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>http://northamerica.atkinsglobal.com</u>	13	✓	
14	The books are in care of ► <u>TANYA SHIM, TREASURY MANAGER</u> Telephone no. ► <u>813-282-7275</u> Located at ► <u>4030 W. BOYSCOUT BLVD., SUITE 700 TAMPA, FL</u> ZIP+4 ► <u>33607</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			► ☐
16	At any time during calendar year 2010, 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 page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ►	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? ☐ Yes ☒ No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ 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)? ☐ Yes ☒ 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.) ☐ Yes ☒ 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 page 22 of the instructions)?	1b	N A
	Organizations relying on a current notice regarding disaster assistance check here ► ☐		
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 2010?	1c	✓
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 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? ☐ Yes ☒ 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 page 22 of the 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? ☐ Yes ☒ No		
b	If "Yes," did it have excess business holdings in 2010 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? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010.</i>)	3b	N A
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	✓
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 2010?	4b	✓

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 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the 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 page 22 of the instructions)?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**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 page 22 of the 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
See Attached				

2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the 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 ☐

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 page 23 of the 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		

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	NONE	
2		
3		
4		

Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1	NONE	
2		
All other program-related investments See page 24 of the instructions		
3	NONE	
Total. Add lines 1 through 3 ▶		

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the 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	702,633
b	Average of monthly cash balances	1b	177,146
c	Fair market value of all other assets (see page 25 of the instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	879,778
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	879,778
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25 of the instructions)	4	13,197
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	866,581
6	Minimum investment return. Enter 5% of line 5	6	43,329

Part XI Distributable Amount (see page 25 of the 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	43,329
2a	Tax on investment income for 2010 from Part VI, line 5	2a	99
b	Income tax for 2010. (This does not include the tax from Part VI.)	2b	0
c	Add lines 2a and 2b	2c	99
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	43,230
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	43,230
6	Deduction from distributable amount (see page 25 of the instructions)	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	43,230

Part XII Qualifying Distributions (see page 25 of the 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	349,802
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	0
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	349,802
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 page 26 of the instructions)	5	99
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	349,703

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 page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7				43,230
2 Undistributed income, if any, as of the end of 2010:				
a Enter amount for 2009 only			0	
b Total for prior years: 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2010:				
a From 2005				
b From 2006				
c From 2007				
d From 2008				
e From 2009				
f Total of lines 3a through e	0			
4 Qualifying distributions for 2010 from Part XII, line 4: ► \$ 349,802				
a Applied to 2009, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see page 26 of the instructions)		0		
c Treated as distributions out of corpus (Election required—see page 26 of the instructions)	0			
d Applied to 2010 distributable amount				0
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2010 (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 page 27 of the instructions		0		
e Undistributed income for 2009. Subtract line 4a from line 2a. Taxable amount—see page 27 of the instructions			0	
f Undistributed income for 2010. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011				43,230
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)	0			
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the instructions)	0			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9:				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010				

Part XIV Private Operating Foundations (see page 27 of the 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 2010, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2010	(b) 2009	(c) 2008	(d) 2007	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
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 $\frac{2}{3}$ 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 page 28 of the 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).)

None

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.

None

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. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

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

Christie M. Hattersley 4030 W. Boy Scout Blvd., Suite 700 Tampa, FL 33607 (813) 282-7275

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

See Attached

c Any submission deadlines:

Quarterly

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

None

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

Recipient Name and address (home or business)	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
a <i>Paid during the year</i> SEE ATTACHMENT				
Total			▶ 3a	342,402
b <i>Approved for future payment</i> SEE ATTACHMENT				
Total			▶ 3b	77,000

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See page 28 of the instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue:					
a						
b						
c						
d						
e						
f						
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities					
5	Net rental income or (loss) from real estate:					
a	Debt-financed property					
b	Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue: a _____					
b	_____					
c	_____					
d	_____					
e	_____					
12	Subtotal. Add columns (b), (d), and (e)					
13	Total. Add line 12, columns (b), (d), and (e)					

(See worksheet in line 13 instructions on page 29 to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

THE ATKINS FOUNDATION, INC.
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PAGE 6 - PART VIII QUESTION 1(A)

<u>NAME & ADDRESS</u>	<u>TITLE</u>	<u>COMPENSATION</u>	<u>BENEFITS</u>	<u>EXPENSES</u>
JOHN BUCKLEY 4030 WEST BOYSCOUT BLVD TAMPA, FL 33607	DIRECTOR 2 HOURS PER WEEK	\$0.00	\$0.00	\$0.00
CECILIA GREEN 4030 WEST BOYSCOUT BLVD TAMPA, FL 33607	DIRECTOR 2 HOURS PER WEEK	\$0.00	\$0.00	\$0.00
C ERNEST EDGAR 4030 WEST BOYSCOUT BLVD TAMPA, FL 33607	SECRETARY 2 HOURS PER WEEK	\$0.00	\$0.00	\$0.00
CATHERINE M. CAHILL 2001 NORTHWEST 107TH AVE MIAMI, FL 33172	TREASURER 2 HOURS PER WEEK	\$0.00	\$0.00	\$0.00
CHRISTIE HATTERSLEY 4030 WEST BOYSCOUT BLVD TAMPA, FL 33607	ADMINISTRATOR 2 HOURS PER WEEK	\$0.00	\$0.00	\$0.00

THE ATKINS FOUNDATION, INC
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PAGE 1 - PART 1 - LINE 23 OTHER DEDUCTION

BANK FEES	\$	5,562
AMORTIZATION OF START UP COSTS		500
SUPPLIES		1,338
PPE		-
TOTAL OTHER DEDUCTIONS	\$	<u>7,400</u>

PAGE 4 - PART VII-A LINE 10 SUBSTANTIAL CONTRIBUTORS

Atkins North America, Inc	FEIN. 59-0898138
4030 WEST BOYSCOUT BLVD, SUITE 700	
TAMPA, FL 33607	

THE ATKINS FOUNDATION, INC.
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LINE 3a Paid During the Year

IF RECIPIENT IS AN
INDIVIDUAL, SHOW ANY
RELATIONSHIP TO ANY

NAME & ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
A PLACE CALLED HOME 2830 CENTRAL AVENUE LOS ANGELES, CA 90011	NONE CHECK RECEIVED & CASHED	Educational Services Program	10,000 00
ACE MENTOR PROGRAM 400 MAIN ST STAMFORD, CT 06910	NONE CHECK RECEIVED & CASHED	ACE MENTOR PROGRAM	10,000 00
AMERICAN RED CROSS 2025 E ST NW WASHINGTON, DC 20009	NONE CHECK RECEIVED & CASHED	Haiti Relief Fund/NASHVILLE FLOOD	46,701 00
ARIZONA STATE UNIVERSITY P O BOX 879309 TEMPE, AZ 85287	NONE CHECK RECEIVED & CASHED	SCHOLARSHIP FOUNDATION	5,000 00
AROUND-N-OVER P O BOX 19662 SEATTLE, WA 98109	NONE CHECK RECEIVED & CASHED	SCHOLARSHIP FOUNDATION	8,250 00
AUBURN UNIVERSITY FOUNDATION 317 South College Street Auburn, AL 36849	NONE CHECK RECEIVED & CASHED	AU Minority Engineering Program	2,500 00
BAY EDUCATION FOUNDATION, INC 1311 BALBOA AVENUE PANAMA CITY, FL 32401	NONE CHECK RECEIVED & CASHED	SCHOLARSHIP PROGRAM	5,000 00
BOYS & GIRLS CLUB OF CARLSBAD P O BOX 913 CARLSBAD, CA 92018	NONE CHECK RECEIVED & CASHED	PROJECT LEARN	5,000 00
COLORADO STATE UNIVERSITY - FT COLLINS FT COLLINS, CO 80523	NONE CHECK RECEIVED & CASHED	SCHOLARSHIP FOUNDATION	5,000 00

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IF RECIPIENT IS AN
INDIVIDUAL, SHOW ANY
RELATIONSHIP TO ANY
FOUNDATION MANAGER

FOUNDATION STATUS
OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

NAME & ADDRESS	IF RECIPIENT IS AN INDIVIDUAL, SHOW ANY RELATIONSHIP TO ANY FOUNDATION MANAGER	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
BROWARD BLACK ELECTED OFFICIALS P O BOX 590277 FT LAUDERDALE, FL 33359	NONE	CHECK RECEIVED & CASHED	NSBE SCHOLARSHIP PROGRAM	5,000.00
COMITO (Conference of Minority Transportation) 818 18TH ST, NW WASHINGTON, DC 20006	NONE	CHECK RECEIVED & CASHED	NAT'L MINORITY SCHOLARSHIPS	5,000.00
DELL P O Box 676021 Dallas, TX 75267-6021	NONE	CHECK RECEIVED & CASHED	Dell Apple Core Dell Excited	10,550.71
EXPLORER ELEMENTARY CTR SCHOOL 2230 TRUXTUN ROAD SAN DIEGO, CA 92016	NONE	CHECK RECEIVED & CASHED	SCIENCE INITIATIVE	2,500.00
FLORIDA A & M 2525 POTTS DAMER ST TALLAHASSEE, FL 32310	NONE	CHECK RECEIVED & CASHED	Minority Scholarship Program SCHOLARSHIP FOUNDATION	4,000.00
FLORIDA COMMUNITY COLLEGE 501 W. STATE ST JACKSONVILLE, FL 32202	NONE	CHECK RECEIVED & CASHED	ENGINEERING SCHOLARSHIP	5,000.00
FLORIDA INT'L UNIVERSITY 10555 W FLAGLER ST MIAMI, FL 33174	NONE	CHECK RECEIVED & CASHED	SCHOLARSHIP FOUNDATION	10,000.00
FOUNDATION FOR OSCEOLA FOUNDATION 2310 New Beginnings Rd, Suite 118 Kissimmee, FL 34744 United States	NONE	CHECK RECEIVED & CASHED	Take Stock in Children	5,000.00
FLORIDA STATE UNIVERSITY FOUNDATION 120 BECKRICH ROAD	NONE	CHECK RECEIVED		

THE ATKINS FOUNDATION, INC.
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NAME & ADDRESS		IF RECIPIENT IS AN INDIVIDUAL, SHOW ANY RELATIONSHIP TO ANY FOUNDATION MANAGER	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
PANAMA CITY BEACH, FL 32407			& CASHED	SCHOLARSHIP FOUNDATION	5,000 00
GEORGIA INSTITUTE OF TECHNOLOGY OFFICE OF SCHOLARSHIPS & FINANCIAL AID 225 NORTH AVENUE ATLANTA, GA 30332-0460	NONE		CHECK RECEIVED & CASHED	Minority Scholarship Program SCHOLARSHIP FOUNDATION	4,000 00
GEORGIA TECH FOUNDATION 760 SPRING STREET ATLANTA, GA 30308	NONE		CHECK RECEIVED & CASHED	TRANSPORTATION ENGINEERS OF THE FUTURE	5,000 00
GROUNDWORK SAN DIEGO - CHOLLAS CREEK PO Box 741534 San Diego, CA 92174 United States	NONE		CHECK RECEIVED & CASHED	EDUCATION PROGRAMS	1,500 00
INDIAN RIVER LAGOON ENVIRONMENTAL, INC 780 SE INDIAN ST STUART, FL 34997	NONE		CHECK RECEIVED & CASHED	SCHOLARSHIP FOUNDATION	3,600 00
ITS FLORIDA 215 NW MONROE CIRCLE ST PETERSBURG, FL 33702	NONE		CHECK RECEIVED & CASHED	ITSFL SCHOLARSHIP FUND	5,000 00
JP HALL, Sr CHILDRENS CHARITIES PO BOX 395 GREEN COVE SPRINGS, FL 32043	NONE		CHECK RECEIVED & CASHED	Scholarship Programs SCHOLARSHIP FOUNDATION	5,000 00
KAYLENE PALANIUK MEMORIAL FUND 13306 W Greenfield Rd NINE MILE FALLS WA 99026	NONE		CHECK RECEIVED & CASHED	Scholarship Programs SCHOLARSHIP FOUNDATION	5,000 00
LEANDER EDUCATIONAL EXCELLENCE FOUNDATION P O Box 358 Cedar Park, TX 78630-0358	NONE		CHECK RECEIVED & CASHED	Leander Educational Excellence Foundation	500 00

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LINE 3a Paid During the Year

IF RECIPIENT IS AN

INDIVIDUAL, SHOW ANY

RELATIONSHIP TO ANY FOUNDATION STATUS

FOUNDATION MANAGER OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

NAME & ADDRESS					
MARSTON MIDDLE SCHOOL 3799 Claremont Drive San Diego, CA 92117 United States	NONE	CHECK RECEIVED & CASHED	EDUCATION PROGRAMS		4,100.00
NAT'L SOCIETY OF BLACK ENGINEERS 205 DAINGERFIELD ROAD ALEXANDRIA, VA 22314	NONE	CHECK RECEIVED & CASHED	NSBE SCHOLARSHIP PROGRAM		5,000.00
NORTH FL COMMUNITY COLLEGE FOUNDATION 325 NW TURNER DAVIS DR MADISON, FL 32340	NONE	CHECK RECEIVED & CASHED	EDUCATION PROGRAMS		10,000.00
ORLANDO COMMUNITY & YOUTH TRUST, INC 595 N PRIMROSE DR ORLANDO, FL 32803	NONE	CHECK RECEIVED & CASHED	EDUCATION PROGRAMS		10,000.00
SAN DIEGO STATE UNIVERSITY 5500 Campanile Drive San Diego, CA 92182	NONE	CHECK RECEIVED & CASHED	Minority Scholarship Program SCHOLARSHIP FOUNDATION		2,000.00
SCHOOL BOARD OF BROWARD COUNTY 3602 College Avenue Davie, FL 33314 United States	NONE	CHECK RECEIVED & CASHED	EDUCATION PROGRAMS		5,000.00
SDSU MESA ENGINEERING 5500 CAMPANILLE DR SAN DIEGO, CA 92182	NONE	CHECK RECEIVED & CASHED	SDSU LEADERSHIP SUMMIT GRANT		7,000.00
SIXTH GRADE SCIENCE ALLIANCE 5251 VALLEY HI DRIVE SACRAMENTO, CA 95823	NONE	CHECK RECEIVED & CASHED	20 SCHOLARSHIPS		5,200.00
SOCIETY OF AMERICAN MILITARY ENGINEERS 607 PRINCE ST	NONE	CHECK RECEIVED			

11/14/2011

THE ATKINS FOUNDATION, INC.
TAX RETURN OF PRIVATE FOUNDATION
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LINE 3a Paid During the Year

NAME & ADDRESS		IF RECIPIENT IS AN INDIVIDUAL, SHOW ANY RELATIONSHIP TO ANY FOUNDATION MANAGER	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ALEXANDRIA, VA 22314			& CASHED	SCHOLARSHIP FOUNDATION	4,000 00
SOCIETY OF WOMEN ENGINEERS P O Box 881205 San Diego, CA 92168-1205 United States		NONE	CHECK RECEIVED & CASHED	SCHOLARSHIP FOUNDATION	5,000 00
ST. PETERSBURG COLLEGE FOUNDATION, INC PO BOX 13489 ST PETERSBURG, FL 33733		NONE	CHECK RECEIVED & CASHED	SCHOLARSHIP GRANT	4,000 00
TALLAHASSEE MUSEUM OF HISTORY 3945 MUSEUM DRIVE TALLAHASSEE, FL 32310-6325		NONE	CHECK RECEIVED & CASHED	In-Kind Grants to Organization	5,000 00
TERRY PARKER HIGH SCHOOL 7301 Parker School Road Jacksonville, FL 32211 United States		NONE	CHECK RECEIVED & CASHED	Academy of Coastal and Environmental Studies	2,000 00
TEXAS A&M UNIVERSITY 401 George Bush Drive College Station, TX 77840-2811 United States		NONE	CHECK RECEIVED & CASHED	Minority Scholarship Program SCHOLARSHIP FOUNDATION	4,000 00
THE COLORADO RIVER FOUNDATION P O BOX 50029 AUSTIN, TX 78763		NONE	CHECK RECEIVED & CASHED	REBUD CENTER PROGRAMS LAUNCH	5,000 00
THE COMMUNITY FOUNDATION OF CENTRAL FLORIDA 1411 Edgewater Drive, Suite 203 Orlando, FL 32804		NONE	CHECK RECEIVED & CASHED	City of Orlando's Parramore Kidz Zone	10,000 00
THE EDUCATION FUND, INC 900 NE 125TH T NORTH MIAMI, FL 33161		NONE	CHECK RECEIVED & CASHED	READY TO LEARN SCHOLARSHIP	10,000 00
THE UNIVERSITY OF W FLORIDA FOUNDATION		NONE			

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RELATIONSHIP TO ANY
FOUNDATION MANAGER

FOUNDATION STATUS
OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

NAME & ADDRESS

11000 University Pkwy , Building 12 Pensacola, FL 32514	CHECK RECEIVED & CASHED	SCHOLARSHIP FOUNDATION	10,000.00
TYLER INDEP SCHOOL DISTRICT 315 NORTH BROADWAY TYLER, TX 75702	NONE CHECK RECEIVED & CASHED	SCHOLARSHIP FOUNDATION	5,000.00
UCF COLLEGE OF ARTS AND HUMANITIES PO Box 161990 Orlando, FL 32803-1990 USA	NONE CHECK RECEIVED & CASHED	Minority Scholarship Program SCHOLARSHIP FOUNDATION	6,000.00
UNITED WAY OF NE FLORIDA, INC 1301 Riverplace Blvd, Suite 400 Jacksonville, FL 32207 United States	NONE CHECK RECEIVED & CASHED	Achievers for Life Grant	5,000.00
UNIVERSITY OF SOUTH FLORIDA 4202 EAST FOWLER AVE TAMPA, FL 33620	NONE CHECK RECEIVED & CASHED	Minority Scholarship Program SCHOLARSHIP FOUNDATION	4,000.00
UNIVERSITY OF FLORIDA 312 WEIL HALL GAINESVILLE, FL 32611	NONE CHECK RECEIVED & CASHED	Minority Scholarship Program SCHOLARSHIP FOUNDATION	4,000.00
UNIVERSITY OF MARYLAND 3214 JEONG H KIM COLLEGE PARK, MD 20742	NONE CHECK RECEIVED & CASHED	Minority Scholarship Program MINORITY SCHOLARSHIP PROGRAM	4,000.00
UNIVERSITY OF MIAMI 5600 Merrick Drive, Building 2 Coral Gables, FL 33124-5595 United States	NONE CHECK RECEIVED & CASHED	Minority Scholarship Program SCHOLARSHIP FOUNDATION	4,000.00
UNIVERSITY OF NEVADA, LAS VEGAS 4505 MARYLAND PARKWAY LAS VEGAS, NV 89154	NONE CHECK RECEIVED & CASHED	Minority Scholarship Program SCHOLARSHIP FOUNDATION	4,000.00

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INDIVIDUAL, SHOW ANY
RELATIONSHIP TO ANY
FOUNDATION MANAGER

FOUNDATION STATUS
OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

VISTA GRANDE ELEM SCHOOL FOUNDATION 5606 ANTIGUA BLVD SAN DIEGO, CA 92124	NONE	CHECK RECEIVED & CASHED	SCHOLARSHIP FOUNDATION	2,500.00
WATER CONSERVATION GARDEN AUTHORITY 12122 CUYAMACA COLLEGE DRIVE, W EL CAJON, CA 92019	NONE	CHECK RECEIVED & CASHED	SCHOLARSHIP FOUNDATION	2,500.00
WJCT, INC 100 Festival Park Jacksonville, FL 32202 United States	NONE	CHECK RECEIVED & CASHED	Educational Services Program	5,000.00
WOMEN'S TRANSPORTATION SEMINAR SCHOLAR 1701 K Street NW, Suite 800 Washington, DC 20006	NONE	CHECK RECEIVED & CASHED	SCHOLARSHIP FOUNDATION	10,000.00

342,401.71

THE PBSJ FOUNDATION, INC.
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LINE 3b Approved for Future Payment

NAME & ADDRESS	IF RECIPIENT IS AN INDIVIDUAL, SHOW ANY RELATIONSHIP TO ANY FOUNDATION MANAGER	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
NATIONAL SOCIETY OF BLACK ENGINEERS 205 DAINGERFIELD ROAD ALEXANDRIA, VA 22314	NONE	OPEN	NSBE CORPORATE SCHOLARSHIP PROGRAM	\$ 5,000
THE COMMUNITY FOUNDATION OF CENTRAL FLORIDA 1411 EDGEWATER DRIVE ORLANDO, FL 32804	NONE	OPEN	CITY OF ORLANDO PARRAMORE KIDZ ZONE	\$ 10,000
THE COLORADO RIVER FOUNDATION P O BOX 50029 AUSTIN, TX 78763	NONE	OPEN	REBUD CENTER PROGRAMS LAUNCH	\$ 5,000
COLORADO STATE UNIVERSITY FT COLLINS FT COLLINS, CO 80523	NONE	OPEN	CSU Atkins SCHOLARSHIP	\$ 5,000
UNITED WAY OF NE FLORIDA 1301 RIVERPLACE BLVD JACKSONVILLE, FL 32207	NONE	OPEN	ACHIEVERS FOR LIFE GRANT	\$ 5,000
BROWARD BLACK ELECTED OFFICIALS P O BOX 590277 FT LAUDERDALE, FL 33359	NONE	OPEN	MERIT SCHOLARSHIP	\$ 5,000
FLORIDA INT'L UNIVERSITY 10555 W FLAGLER ST TALLAHASSEE, FL 32302	NONE	OPEN	SCHOLARSHIP PROGRAM	\$ 10,000
FLORIDA COMM COLLEGE JAX 501 W STATE ST JACKSONVILLE, FL 32202	NONE	OPEN	SCHOLARSHIP PROGRAM	\$ 5,000

THE PBSJ FOUNDATION, INC.
TAX RETURN OF PRIVATE FOUNDATION
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LINE 3b Approved for Future Payment

NAME & ADDRESS	IF RECIPIENT IS AN INDIVIDUAL, SHOW ANY RELATIONSHIP TO ANY FOUNDATION MANAGER	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
WOMEN TRANSP SEMINAR (WTS) 1701 K Street NW, Suite 800 Washington, DC 20006	NONE	OPEN	WTS FOUNDATION	\$ 20,000
Henderson Community Foundation 240 Water Street Henderson, NV 89009	NONE	OPEN	APPLE CORE All People Promoting Literacy Efforts	\$ 7,000
				<u>\$ 77,000</u>

Organization	Program	Amount
The Community Foundation of Central FL	City of Orlando's Parramore Kidz Zone	\$10,000
The Colorado River Foundation	Rebud Center Programs Launch	\$5,000
Colorado State University	CSU PBS&J Scholarship	\$5,000
United Way of NE Florida	Achievers for Life Grant	\$5,000
Broward Black Elected Officials	Atkins Merit Scholarship	\$5,000
Florida International University	Atkins Scholarship Program	\$10,000
Florida Community College at Jacksonville Foundation	Atkins Scholarships	\$5,000
Women Transportation Semunar (WTS)	WTS Foundation	\$20,000 2010 & 2011
Henderson Community Foundation	APPLE CORE	7000
National Society of Black Engineers		5000

COMMUNITY FUNDING REQUEST

Please complete the following form in detail and attach the Federal Tax Exempt designation and any additional back-up information you would like the Foundation to consider. E-mail or mail **Christie Hattersley**, Christie.Hattersley@atkinsglobal.com, Atkins Foundation 4030 West Boy Scout Boulevard, Suite 700, Tampa, Florida 33607.

Please Note: Community Funding Requests may only be submitted by employees of Atkins or any of its affiliated companies. Outside solicitations cannot be accepted.

Date of Application: _____

Legal Name of Organization being proposed for funding: _____

Is the Organization Designated 501 (c) (3)? Yes No

Year Designated: _____

Federal Tax ID Number: _____

Organization Contact Information:

Organization Contact Person/Title: _____

Contact E-mail Address: _____

Website: _____

Contact Phone Number: _____ Fax Number: _____

Mailing Address: _____

Project/Program/Scholarship Information:

Project/Program/Scholarship Name: _____

Brief Purpose of Proposed Project/Program/Scholarship: _____

Amount Being requested from the Atkins Foundation: _____

Funds Needed By: _____

Geographic Area Served: _____

Socio-Economic/Demographic Population Served: _____

Program Description:

Please describe the program, scholarship or project (attach separate sheet if necessary) being proposed for funding by the Atkins Foundation:

How does the program/scholarship/project improve the community in which it serves?

Does the proposed program/scholarship/project work toward improving the quality of life of children or the community? If so, how?

How long has the program been in operation and what is its track record for sustainable impact?

What are the major sources of funding for the 501 (c) (3) organization?

How will the funds received from the Atkins Foundation be used?

Community Funding Request submitted by: (Name of Atkins employee submitting the request): _____

Requestor Title: _____ Office: _____

Requestor Signature: _____

Date: _____

Are you or anyone else in your location active in, or volunteer for, this organization? If so, how?

Have you previously submitted a request on behalf of this organization, if so, was it approved and for how much? _____

Approval: _____

Office Leader

Date

Approval: _____

Sales & Strategy Director

Date

Thank you for your interest in The Atkins Foundation. For questions or concerns regarding your request, please contact Christie Hattersley at 813.281.8334 x4108334 or

Christie.Hattersley@atkinglobal.com

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☐
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on **e-file for Charities & Nonprofits**.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only ☐

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

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization	Employer identification number
	Number, street, and room or suite no. If a P.O. box, see instructions.	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	

Enter the Return code for the return that this application is for (file a separate application for each return) ☐ ☐

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► _____

Telephone No. ► _____ FAX No. ► _____

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until _____, 20____, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 - ☐ calendar year 20____ or
 - ☐ tax year beginning _____, 20____, and ending _____, 20____.

- If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box ☒ **2**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the extended due date for filing your return. See instructions.	Name of exempt organization	Employer identification number
	THE ATKINS FOUNDATION (f/k/a The PBSJ FOUNDATION)	20-4235058
	Number, street, and room or suite no. If a P.O. box, see instructions.	
	4030 W. Boy Scout Blvd., Suite 700	
City, town or post office, state, and ZIP code. For a foreign address, see instructions.		
Tampa, FL 33607		

Enter the Return code for the return that this application is for (file a separate application for each return)

0 4

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

• The books are in the care of **THE ATKINS NORTH AMERICA HOLDINGS, INC.**

Telephone No. **813-282-7275** FAX No. **813-281-2691**

• If the organization does not have an office or place of business in the United States, check this box ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **NOVEMBER 15TH**, 20 **11**.

5 For calendar year **10**, or other tax year beginning, 20, and ending, 20

6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return

☐ Change in accounting period

7 State in detail why you need the extension

MORE TIME IS NEEDED TO FILE A COMPLETE AND ACCURATE RETURN. Our company has had significant change in accounting personnel over the past few months. In addition, we are also having difficulty compiling financial data for this entity through our accounting software.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	0
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature *Kimberly J. Newborn* Title **VP/CONTROLLER**

Date **08/12/11**

Application for Extension of Time To File an
Exempt Organization Return

OMB No. 1545-1709

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **►**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)
- Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only ☐ **►**

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

Type or print	Name of exempt organization THE PBSJ FOUNDATION	Employer identification number 20-4235058
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions 4030 WEST BOYSCOUT BLVD., SUITE 700	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions TAMPA, FL 33607	

Enter the Return code for the return that this application is for (file a separate application for each return)

04

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► THE PBSJ CORPORATION

Telephone No ► 813-281-7386

FAX No ► 813-281-2691

- If the organization does not have an office or place of business in the United States, check this box ☐ **►**

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is

for part of the group, check this box ☐ **►** and attach _____
is for _____

ation required to file Form 990-T) extension of time
t organization return for the organization named above. The extension is

_____, 20_____, and ending _____, 20_____

onths, check reason ☐ Initial return ☐ Final return

T, 4720, or 6069, enter the tentative tax, less any	3a	\$	0
'20, or 6069, enter any refundable credits and ar overpayment allowed as a credit.	3b	\$	0
ir payment with this form, if required, by using EFTPS ions	3c	\$	0

thdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☐

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)

Type or print File by the extended due date for filing your return. See instructions	Name of exempt organization	Employer identification number
	Number, street, and room or suite no. If a P O box, see instructions	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	

Enter the Return code for the return that this application is for (file a separate application for each return) ☐

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

• The books are in the care of ☐

Telephone No ☐

FAX No ☐

• If the organization does not have an office or place of business in the United States, check this box ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 4 I request an additional 3-month extension of time until _____, 20____
- 5 For calendar year _____, or other tax year beginning _____, 20____, and ending _____, 20____
- 6 If the tax year entered in line 5 is for less than 12 months, check reason. ☐ Initial return ☐ Final return
- ☐ Change in accounting period
- 7 State in detail why you need the extension _____

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature Ronald A. Robinson Title CPA Date 3/14/11