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## **Return of Private Foundation**

OMB No 1545-0052

2010

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2010, or tax year beginning 07/23/10, and ending 12/31/10G Check all that apply Initial return Initial return of a former public charity Final return Amended return Address change Name change Name of foundation A Employer identification number 27-3127675 DEVINE FAMILY FOUNDATION, INC. B Telephone number (see page 10 of the instructions) Number and street (or P O box number if mail is not delivered to street address) Room/suite

2	021	DOWN WOODS LANE			C If exe	emption application is pen	ding, check here
Cı	ty or tov	wn, state, and ZIP code	· · · · · ·			oreign organizations, chec	· -
		ERMERE FL 34786			2. Fo	oreign organizations meet	ing the
<u>H</u> (		type of organization X Section 501(c)(3) exempt private				5% test, check here and a	· ·
	Sectio	n 4947(a)(1) nonexempt charitable trust Other taxable	e private foundation		E If priv	rate foundation status was	terminated under
I F	aır ma	rket value of all assets at J Accounting method	Cash X Acc	rual	section	on 507(b)(1)(A), check he	re • _
е	nd of y	vear (from Part II, col. (c), Other (specify)			F If the	foundation is in a 60-mor	th termination
	ne 16)	◆ \$ 750,000 (Part I, column (d) must	be on cash basis)		unde	r section 507(b)(1)(B), che	eck here
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books	(b) Net inv		(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see page 11 of the instructions))					(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	758,287				
	2	Check ◆ ☐ If the foundation is <b>not</b> required to attach Sch. B					
	3	Interest on savings and temporary cash investments				·	
	4	Dividends and interest from securities	. ,				
	5a	Gross rents	V				
<u>a</u>	b	Net rental income or (loss)					
Ĕ	6a	Net gain or (loss) from sale of assets not on line 10					
Revenue	b	Gross sales price for all assets on line 6a					
8	7	Capital gain net income (from Part IV, line 2)			0		
	8	Net short-term capital gain				0	
	9	Income modifications				_	
	10a	Gross sales less returns & allowances					
	b	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	758,287		0	0	
S	13	Compensation of officers, directors, trustees, etc	0		R	ECEIVED	
ıse	14	Other employee salaries and wages				(	
Expenses	15	Pension plans, employee benefits			<u> </u>	10 3 1 2011	61
X	16a	Legal fees (attach schedule) SEE STMT 1	6,238		A V	UG 11 2011	6,238
ē	b	Accounting fees (attach schedule) STMT 2	1,129		<del>                                     </del>		1,129
<u>-</u> ≥	С	Other professional fees (attach schedule)				GDEN, UT	<u> </u>
35	17	Interest			<u></u>		
』( 仏⊍川 dministrative	18	Taxes (attach schedule) (see page 14 of the instructions) STMT 3	920				920
Ē	19	Depreciation (attach schedule) and depletion					
Ą	20	Occupancy					<u> </u>
⊋ ਦੂ	21	Travel, conferences, and meetings					
ar ar	22	Printing and publications	-				
급	23	Other expenses (att sch)	-	<u> </u>	_		
素	24	Total operating and administrative expenses.			=		• · · · · · · · · · · · · · · · · · · ·
35		Add lines 13 through 23	8,287		0	0	8,287
Operating and	25	Contributions, gifts, grants paid	0				0
	26	Total expenses and disbursements. Add lines 24 and 25	8,287		0	0	8,287
-	27	Subtract line 26 from line 12	<b></b>				
	a	Excess of revenue over expenses and disbursements	750,000				
	ı h	Net investment income (if negative, enter -0-)			0:	İ	

For Paperwork Reduction Act Notice, see page 30 of the instructions.

Adjusted net income (If negative, enter -0-)

Form 990-PF (2010)

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 page 15 of the instructions) 7 Other notes and loans receivable (att schedule) ◆ Less. allowance for doubtful accounts ◆ 0 8 Inventories for sale or use 9 Prepaid expenses and deferred charges	et Value
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Instructions)  7 Other notes and loans receivable (att schedule) ◆  Less. allowance for doubtful accounts ◆  8 Inventories for sale or use  9 Prepaid expenses and deferred charges	
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Less. allowance for doubtful accounts ◆  8 Inventories for sale or use  9 Prepaid expenses and deferred charges	
8 Inventories for sale or use 9 Prepaid expenses and deferred charges	
8 Inventories for sale or use 9 Prepaid expenses and deferred charges	
9 Prepaid expenses and deferred charges	
40 - Investments 11C and state assument ablumtions (attack as best in)	
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 sch.) ◆	
12 Investments—mortgage loans	
13 Investments—other (attach schedule)	
14 Land, buildings, and equipment basis ◆	
Less accumulated depreciation (attach sch.) ◆	
15 Other assets (describe ◆ )	
16 Total assets (to be completed by all filers—see the	
instructions Also, see page 1, item I) 0 750,000 75	0,000
17 Accounts payable and accrued expenses	
ທ 18 Grants payable	
19 Deferred revenue	
19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule)	
21 Mortgages and other notes payable (attach schedule)	
22 Other liabilities (describe ♥	
23 Total liabilities (add lines 17 through 22) 0 0	
Foundations that follow SFAS 117, check here	
and complete lines 24 through 26 and lines 30 and 31.	
24 Unrestricted 750,000	
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	
29 Retained earnings, accumulated income, endowment, or other funds	
30 Total net assets or fund balances (see page 17 of the	
instructions) 0 750,000	
Z 31 Total liabilities and net assets/fund balances (see page 17	
of the instructions) 0 750,000	
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)	0
	0,000
3 Other increases not included in line 2 (itemize) ◆	
4 Add lines 1, 2, and 3 7 !	0,000
5 Decreases not included in line 2 (itemize) ◆	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 75	

-					_		_			
2	7		2	1	2	7	_	7	_	
1	•	_	_	- 1	1.	•	n	•	_	

Page 3

Part IV Capital Gains and Losses for Tax on Investment Income							
(a) List and describ 2-story brick ware	ee the kind(s) of property sold (e.g., real esta house, or common stock, 200 shs MLC Co	ite,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )		
1a N/A		· · · · · · · · · · · · · · · · · · ·					
b							
С							
d							
е							
(e) Gross sales price	(f) Depreciation allowed (or allowable)	,	Cost or other basis is expense of sale	1	n or (loss) f) minus (g)		
_a							
<b>b</b>				<u> </u>	<del></del>		
С			·		<del></del>		
d			· · · =				
е			10/04/00				
Complete only for assets showin	g gain in column (h) and owned by the		· · -		(h) gain minus		
(i) F M V as of 12/31/69	(i) F M V as of 12/31/69 (j) Adjusted basis (k) Excess of col (i) as of 12/31/69 over col (j), if any				less than -0-) <b>or</b> rom col (h))		
_a	·				·		
С							
<u>e</u>		<u> </u>	<u> </u>				
2 Capital gain net income or (net c	apıtal loss)   If gaın, also enter   If (loss), enter -0-			2			
· -	ss) as defined in sections 1222(5) and		_				
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		<del></del>	<u></u>	3			
	nder Section 4940(e) for Red			ome			
(For optional use by domestic private	e foundations subject to the section 49	140(a) tax on net	investment income)				
If section 4940(d)(2) applies, leave the	nis part blank.				N/A		
Was the foundation liable for the sec	tion 4942 tax on the distributable amo	unt of any year i	n the base period?		Yes No		
	lify under section 4940(e) Do not com		ii alo bado penea				
	each column for each year, see page	<u> </u>	tions hefore making any e	ntriae			
(a)		TO OT THE INSTITUTE		Title 5	(d)		
Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying distribu	tions Ne	(c) t value of noncharitable-use as		ribution ratio divided by col. (c))		
2009	11,			(601 (6)	divided by cor (c))		
2008							
2007							
2006							
2005							
2 Total of line 1, column (d)		'		2			
	5-year base period—divide the total o	n line 2 hv 5 or	hy the	2	<del>_</del> .		
¥	has been in existence if less than 5 ye	•	by the	3			
4 Enter the net value of noncharita	ble-use assets for 2010 from Part X, I	ine 5		4			
5 Multiply line 4 by line 3				5			
6 Enter 1% of net investment inco	me (1% of Part I line 27b)			6			
	, , , ,						
7 Add lines 5 and 6				7			
8 Enter qualifying distributions from				8			
If line 8 is equal to or greater that Part VI instructions on page 18.	n line 7, check the box in Part VI, line	1b, and complet	e that part using a 1% tax	rate See the			

-orm	990-PF (2010) DEVINE FAMILY FOUNDATION, INC. 27-312767	<u> </u>				P	age 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page	18 of t	ne inst	ructions)			
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 instruction)	ons)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		<u>  1</u>				
	here ◆						
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of	_	ן י				
	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	<b>_</b>			0
3	Add lines 1 and 2		3			_	
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				0
6	Credits/Payments						
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a		4				
b	Exempt foreign organizations—tax withheld at source 6b		4				
С	Tax paid with application for extension of time to file (Form 8868)  6c		4				
d	Backup withholding erroneously withheld 6d 6		4				
7	Total credits and payments Add lines 6a through 6d		7		_		
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10	<u> </u>			
11	Enter the amount of line 10 to be Credited to 2011 estimated tax ◆ Refun	ded ◆	11				
Pa	rt VII-A Statements Regarding Activities			_		1	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it					Yes	No
	participate or intervene in any political campaign?				1a		X
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)?				1b		X
	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						
С	Did the foundation file Form 1120-POL for this year?				1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					- 1	
	(1) On the foundation ◆ \$ (2) On foundation managers ◆ \$						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed						
	on foundation managers • \$						7.7
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		X
_	If "Yes," attach a detailed description of the activities.						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	ОТ					v
4-	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?  If "Yes," has it filed a tax return on Form 990-T for this year?			N/A	4a		
b E	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			H/A	4b 5		X
5	If "Yes," attach the statement required by General Instruction T				3		Λ
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
U	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?				6	х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (	c) and l	Part X\	,	7	x	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	<i>)</i> , and i	uit // (	•			
Ju	instructions) ◆ NONE						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General						
	(or designate) of each state as required by General Instruction G? If "No," attach explanation				8b	Х	
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)? If "Yes," complete Part XIV				9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	a===					
	names and addresses	<u>STM1</u>	<u> 4</u>		10	X	

P	art 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		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before						
	August 17, 2008?				12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applica	tion?			13	X	
	Website address ◆ N/A						
14	· ·	hone no	. ♦				
	2021 DOWN WOODS LANE						
	Located at ◆ WINDERMERE FL	ZIP+	4 ♦ :	34786			_
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here		1	ı		,	♦
	and enter the amount of tax-exempt interest received or accrued during the year	•	_15	1		- 1	
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority			1		Yes	No
	over a bank, securities, or other financial account in a foreign country?				16		X
	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					1	
r	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.					Yes	Na
1a	During the year did the foundation (either directly or indirectly):					res	No
ıa	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Ye	s 3	K No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			110			
	disqualified person?	Ye	s 2	K No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Ye	=	Š No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Ye	-				
	(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)?	Ye	s 3	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)	Ye	s Ž	No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulation	ons		_			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?			N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			◆ 📙			
С	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?			N/A	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))						
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and		_ [3	K No			
	6e, Part XIII) for tax year(s) beginning before 2010?  If "Yes," list the years ◆ 20 , 20 , 20 , 20	Ye	·S 2	NO NO			
b	If "Yes," list the years ◆ 20 , 20 , 20 , 20 Are there any years listed in 2a for which the foundation is <b>not</b> 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 )			N/A	2b	İ	
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> 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?	Ye	s 2	K 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? (Use Schedule C, Form 4720, to determine if the						
	foundation had excess business holdings in 2010 )			N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpose				4a		X
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 2	2010?			4h		Х

Form 990-PF (2010) DI	EVINE FAMILY	FOUNDATION, INC.	. 27-3	127675			Page 6
Part VII-B Stat	ements Regarding	<b>Activities for Which Fo</b>	rm 4720 May Be R	Required (conf	inued)		
5a During the year did	the foundation pay or inc	ur any amount to					
(1) Carry on propag	ganda, or otherwise atter	npt to influence legislation (sec	tion 4945(e))?		res X No		
(2) Influence the ou	itcome of any specific pu	blic election (see section 4955	); or to carry on,				
directly or indire	ctly, any voter registration	n drive?			res X No		
(3) Provide a grant	to an individual for trave	i, study, or other similar purpos	es?	_ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	res 🛚 X No		
(4) Provide a grant	to an organization other	than a charitable, etc , organiza	ation described in				
section 509(a)(	1), (2), or (3), or section 4	1940(d)(2)? (see page 22 of the	instructions)	\ \	′es 🛚 X No		
(5) Provide for any	purpose other than religi	ous, charitable, scientific, litera	ry, or educational				
purposes, or for	the prevention of cruelty	to children or animals?		\ <u></u>	∕es X No		
<b>b</b> If any answer is "Ye	s" to 5a(1)–(5), did any o	of the transactions fail to qualify	under the exceptions d	lescribed in			
Regulations section	53 4945 or in a current i	notice regarding disaster assist	ance (see page 22 of th	e instructions)?	_N/A	5b	
Organizations relying	g on a current notice reg	arding disaster assistance che	ck here		<b>◆</b> □		
		s the foundation claim exemption	on from the tax	. —			
because it maintain	ed expenditure responsit	oility for the grant?		N/A 📗 Y	′es 📗 No		
If "Yes," attach the	statement required by Re	egulations section 53 4945-5(d)					
		any funds, directly or indirectly,	to pay premiums				
on a personal bene	fit contract?			\ \ \	′es X No		
<b>b</b> Did the foundation,	during the year, pay prer	niums, directly or indirectly, on	a personal benefit contr	ract?		6b	<u> X</u>
If "Yes" to 6b, file F	orm 8870						
•		idation a party to a prohibited to			es X No		
		eds or have any net income attr			N/A	7b	
		ers, Directors, Trustees	, Foundation Mana	agers, Highly	Paid Employe	es,	
	ontractors						
1 List all officers, direc	ctors, trustees, foundati	on managers and their comp	ensation (see page 22	of the instruction	·	I	
	4.3.51		(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Expe	nse account,
	(a) Name and addre	ess	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		llowances
		MANDANA	DD 7 ( TD 7 ) TO		compensation	-	
DANIEL J. DEVINE		WINDERMERE	PRESIDENT				_
2021 DOWN WOODS L		FL 34786	5.00	0	0		0
JACQUELINE D. DEV		WINDERMERE	VICE PRESIDE	_	•	İ	
KATHLEEN K. DEVIN		FL 34786 WINDERMERE	5.00 TREASURER &	0	. 0		0
2021 DOWN WOODS L		FL 34786	5.00	,	0	i	0
ZUZI DOWN WOODS II		- FD 34700	3.00	0			
2 Compensation of f	ive highest-paid employ	rees (other than those include	ed on line 1 — see page	e 23 of the instru	ctions)	L	
If none, enter "NO	•	ooo (omo: man mooo moiace	a commo a coo paga		ocio113).		
	<del></del>		(h) Title, and average		(d) Contributions to		
(a) Name an	d address of each employee	paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit		nse account,
			devoted to position		plans and deferred compensation	otner a	illowances
NONE		· · · · · · · · · · · · · · · · · · ·			·		
Total number of other em	ployees paid over \$50,00	00				•	0

Form 990-PF (20	10) DEVINE FAMILY FOUNDATION, INC.	27-3127675	Page <b>7</b>
Part VIII	Information About Officers, Directors, Trustees, Foun and Contractors (continued)	dation Managers, Highly Paid En	iployees,
3 Five highe	st-paid independent contractors for professional services (see page	23 of the instructions). If none, enter "NO	NE."
	(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		<b>→</b>
Part IX-A	Summary of Direct Charitable Activities		
	n's four largest direct charitable activities during the tax year. Include relevant statistid other beneficiaries served, conferences convened, research papers produced, etc.	ical information such as the number of	Expenses
1 N/A			
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see pag	1	
	largest program-related investments made by the foundation during the tax year on	lines 1 and 2	Amount
1 N/A			
2			
All other program	r-related investments See page 24 of the instructions		
3			

•

Total. Add lines 1 through 3

Forn	1 990-PF (2010) DEVINE FAMILY FOUNDATION, INC. 27-3127675		Page 8
P	Minimum Investment Return (All domestic foundations must complete this part. For	eign found	dations,
	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:		_
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	62,500
С	Fair market value of all other assets (see page 25 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	62,500
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	4	_
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	62,500
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	938
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	61,562
6	Minimum investment return. Enter 5% of line 5	6	1,366
P	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private of	perating	
	foundations and certain foreign organizations check here   and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	1,366
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010 (This does not include the tax from Part VI )		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,366
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,366
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	1,366
P	art XII Qualifying Distributions (see page 25 of the instructions)		
		I I	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		0 207
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	8,287
b	Program-related investments—total from Part IX-B	1b	
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	0 007
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	8,287
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	0 207
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	8,287
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found	ation	
	qualifies for the section 4940(e) reduction of tax in those years		

Forth 990-PF (2010) DEVINE FAMILY FOUNDATION, INC. 27-3127675 Page 9 Undistributed Income (see page 26 of the instructions) (b) (c) (d) (a) Corpus Years prior to 2009 2009 2010 Distributable amount for 2010 from Part XI, 1,366 line 7 Undistributed income, if any, as of the end of 2010: a Enter amount for 2009 only **b** Total for prior years 20 \_\_\_\_ \_\_ , 20\_\_\_\_ Excess distributions carryover, if any, to 2010. a From 2005 From 2006 c From 2007 d From 2008 From 2009 f Total of lines 3a through e Qualifying distributions for 2010 from Part XII, line 4. ◆ \$ 8,287 a Applied to 2009, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see page 26 of the instructions) c Treated as distributions out of corpus (Election required-see page 26 of the instructions) 1,366 d Applied to 2010 distributable amount 6,921 e Remaining amount distributed out of corpus Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: 6,921 a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b. Taxable amount-see page 27 of the instructions e Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions f Undistributed income for 2010 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011 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) Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the instructions) Excess distributions carryover to 2011. 6,921 Subtract lines 7 and 8 from line 6a Analysis of line 9 10 Excess from 2006 Excess from 2007 Excess from 2008

6,921

Excess from 2009

Excess from 2010

Pa	rt XIV Private Operating Fou	ndations (see pa	age 27 of the inst	ructions and Part	VII-A, question 9	9)		
1a	If the foundation has received a ruling or	determination letter th	at it is a private operat	ting				
	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)							
2a	Enter the lesser of the adjusted net	Tax year	Tax year Prior 3 years					
	income from Part I or the minimum	(a) 2010	<b>(b)</b> 2009	(c) 2008	(d) 2007	(e) Total		
	investment return from Part X for							
	each year listed			_				
b	85% of line 2a							
С	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							
е	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:							
а	"Assets" alternative test—enter							
a	(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							
С	"Support" alternative test—enter					<del> </del>		
•	(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							
Pa	art XV Supplementary Inform	nation (Complete	this part only if	the foundation h	ad \$5,000 or mo	re in assets at		
	any time during the ye	•	•					
1	Information Regarding Foundation Ma	nagers:	····					
а	List any managers of the foundation who	have contributed mor	e than 2% of the total	contributions received	by the foundation			
	before the close of any tax year (but only	if they have contribute	ed more than \$5,000)	(See section 507(d)(2	))			
	DANIEL DEVINE					<u> \$750,000</u>		
b	List any managers of the foundation who	own 10% or more of	the stock of a corporat	tion (or an equally large	e portion of the			
	ownership of a partnership or other entity	) of which the foundat	tion has a 10% or grea	iter interest				
	N/A							
2	Information Regarding Contribution, G							
	-			ble organizations and o				
	unsolicited requests for funds If the four			8 of the instructions) to	individuals or			
	organizations under other conditions, cor	mplete items 2a, b, c,	and d	<del> </del>				
а	The name, address, and telephone numl	per of the person to wi	hom applications shou	ld be addressed				
	N/A							
b	The form in which applications should be	submitted and inform	ation and materials th	ey should include				
	N/A			<del></del>				
C	Any submission deadlines:							
	N/A	<del> </del>				<del></del>		
ď	Any restrictions or limitations on awards,	such as by geograph	icai areas, charitable f	ielas, kinds of institutio	ns, or other			
	factors							
	N/A	<del></del>						

DAA

Part XV Supplementary Information (co	ontinued)			<del></del>
3 Grants and Contributions Paid During the	Year or Approved for F	uture Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
N/A				
			1	
	<u> </u>	<u> </u>		
Total			<b>♦</b> 3a	
<ul><li>b Approved for future payment</li><li>N/A</li></ul>				
N/A				
Total	·	*	<b>♦</b> 3b	

Page **12** 

F	art XVI-A	Analysis of Income-Producing Acti	vities				<u>-</u>
	·	ounts unless otherwise indicated	1	d business income	Exclude	d by section 512, 513, or 514	(e)
	Ū		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of
1	•	vice revenue			code	_	the instructions )
							<del></del>
			<del></del>				
					ļ. ——	·	<del></del>
	f				ļ		
	=	d contracts from government agencies			1		<del></del>
		dues and assessments	ļ		<u> </u>		
3	Interest on s	avings and temporary cash investments			ļ		<del></del>
4		nd interest from securities					
5	Net rental in	come or (loss) from real estate					
	a Debt-fina	anced property					
		t-financed property			1		
6	Net rental in	come or (loss) from personal property			<u> </u>		
7	Other invest	ment income					
8	Gain or (loss	s) from sales of assets other than inventory					
9	Net income	or (loss) from special events					
10		or (loss) from sales of inventory					
11	Other revenu	ue a					
					1		
					ĺ		
	е						
12		d columns (b), (d), and (e)		0		0	0
		ne 12, columns (b), (d), and (e)				13	0
		in line 13 instructions on page 29 to verify calculation	ns )			_	
	art XVI-B	Relationship of Activities to the Ac		ent of Exempt P	urpose	 PS	
	Line No.	Explain below how each activity for which income accomplishment of the foundation's exempt purpo	is reported in c	column (e) of Part XVI-	A contrib	outed importantly to the	
_		instructions)					
_	N/A						
_							
_							
_							
	-						
	_						
		· - · · · · ·				<del></del>	
						·	
					. — ,		
							•
_						··	
_	A	<u> </u>					Form <b>990-PF</b> (2010)

Part :		Information Regardate		ansfers To and	d Transactio	ns and Relationships Wi	th Noncharitable	_	
1 Di				e in any of the follo	owing with any o	other organization described		Yes	No
ın	_	01(c) of the Code (other		-		ection 527, relating to political			
	-		-4 4		.t o	4			
		om the reporting found	ation to a no	oncharitable exemp	ot organization o	т.			
٠.	Cash						1a(1)	<b>├</b> ─	X
	Other a						1a(2)	<b>├</b> ──	X
	her transa							]	
		f assets to a noncharita					1b(1)		X
		ses of assets from a no		· -	on		1b(2)		X
(3)	Rental o	of facilities, equipment,	or other ass	sets			1b(3)	igspace	X
(4)	Reimbu	rsement arrangements	•				1b(4)	igsquare	X
	•	r loan guarantees					1b(5)		X
(6)	) Perform	ance of services or me	embership o	r fundraising solicit	ations		1b(6)		X
c Sh	naring of f	acılıtıes, equipment, m	ailing lists, o	ther assets, or paid	d employees		1c		X
d If t	the answe	er to any of the above is	s "Yes," com	plete the following	schedule Colu	mn (b) should always show the f	aır market		
va	lue of the	goods, other assets, o	r services g	iven by the reporting	ng foundation. If	the foundation received less tha	n fair market		
va	lue in any	transaction or sharing	arrangeme	nt, show in column	(d) the value of	the goods, other assets, or serv	ces received.		
(a) L	ine no _	(b) Amount involved	(c) Name	of noncharitable exem	npt organization	(d) Description of transfers, tra	ansactions, and sharing arrang	ements	
A/N									
						L <u></u>			
				-		-			
		· · · · · · · · · · · · · · · · · · ·							
2- 1-	4b - 6		المعادية والمعادية	th ar ralated to		· overent exercises	<del> <u>-</u></del>		
		-	-			c-exempt organizations		<del>v</del>	1
		section 501(c) of the		than section 50 I(c	(3)) or in section	on 5277		es X	] NO
D IT		nplete the following so Name of organization	neaule	(b) Type of o		(a) Danson	ation of relationship		
NT /	· · · · · ·	Name of organization		(b) Type of o	rganization	(C) Descrip	tion of relationship		
N/	Α								
							<u> </u>		
		<del>////</del>	//						
		/// <b></b> ///					<del> </del>		
	Under pe	enalties of penytry //declare	e that I have e: ete. Declaratio	xamined this return, in on of preparer (other th	ncluding accompan	iying schedules and statements, and t uciary) is based on all information of w	o the best of my knowledge an	d Ige	
Sign	bollol, it		oto Bediaratio	m or proporer (earer a	112	1 -1		gc	
lere	lacksquare	JU JU			ΨΟ	<del>, ,                                    </del>	SIDENT		
	<del></del> _	nature of officer or trustee			Date		<del></del>		
	Print/T	ype preparer's name			Preparer's signa	ature 1	Date	Check	[ ] if
Paid					h. 1/	1 ZK. 111			ployed
repare	MICH	AÉL S. BORCHE			juicas	/11 ouch	07/27/11		
Jse Onl	ly Firm's		IECK &				PTIN		
	Firm's			ANTON AVE		110	Firm's EIN ◆		
		WINTE	ER PARI	K, FL 327	789		Phone no 407-62	2-6	600

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

Department of the Treasury Internal Revenue Service

## Schedule of Contributors

◆ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2010

**Employer identification number** 

DEVINE FAMILY FOUNDATION, INC. 27-3127675 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (1) Form 990, Part VIII, line 1h or (11) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year \$

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Schedule B (Form 990, 990-EZ, or 990-PF) (2010) Page 1 of 1of Part I **Employer identification number** Name of organization DEVINE FAMILY FOUNDATION, INC. 27-3127675 Part I Contributors (see instructions) (a) (c) (d) Aggregate contributions Type of contribution No. Name, address, and ZIP + 4 1 DANIEL DEVINE Person 2021 DOWN WOODS LANE Payroll 758,287 Noncash FL 34786 WINDERMERE (Complete Part II if there is a noncash contribution ) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person Payroll \$ Noncash (Complete Part II if there is a noncash contribution ) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Aggregate contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II if there is a noncash contribution) (c) (d) (a) (b) Name, address, and ZIP + 4 **Aggregate contributions** No. Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution ) (a) (b) (c) (d) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No. Person **Payroll** \$ Noncash (Complete Part II if there is a noncash contribution ) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person **Payroll** \$ Noncash (Complete Part II if there is a noncash contribution)

6326 DEVINE FAMILY FOUNDATION,INC. 27-3127675 FYE: 12/31/2010		Federal Statements		7/27/2011 9:39 AM
State	tement 1 - Form 990-P	Statement 1 - Form 990-PF, Part I, Line 16a - Legal Fees	<u>I Fees</u>	. •
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
BROAD AND CASSEL TOTAL	\$ 6,238	w w	v v	\$ 6,238
Statem	Statement 2 - Form 990-PF, I	990-PF, Part I, Line 16b - Accounting Fees	ting Fees	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
BORCHECK & GASE TOTAL	\$ 1,129	w w	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\$ 1,129
S	Statement 3 - Form 990-PF,	0-PF, Part I, Line 18 - Taxes	Xes	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
FLORIDA REGISTRATION FEDERAL REGISTRATION	\$ 70	₩.	w	\$ 70
	\$	φ	\$	\$ 920

7/27/2011 9:39 AM City, State, Zip Statement 4 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors WINDERMERE FL 34786 Federal Statements Address 2021 DOWN WOODS LANE 6326 DEVINE FAMILY FOUNDATION, INC. Name 27-3127675 FYE: 12/31/2010 DANIEL DEVINE

6326 DEVINE.FAMILY FOUNDATION,INC.

Federal Statements

7/27/2011 '9:39 AM

FYE: 12/31/2010

27-3127675

Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

Name of Manager		Amount
DANIEL DEVINE	\$_	750,000
TOTAL	\$	750,000

(Rev January 2011)

## Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury

Internal Revenue	e Service	File a	separate a	pplication for each return.				
If you are	filing for an At	tomatic 3-Month Extension, complet	only Part	I and check this box			▶ X	
• If you are	filing for an Ac	lditional (Not Automatic) 3-Month Ext	ctension, complete only Part II (on page 2 of this form).					
Do not compl	ete Part II uni	ess you have already been granted an	automatic 3	-month extension on a previously filed	Form 886	8		
Electronic fili	ng (e-file). Yo	u can electronically file Form 8868 if yo	u need a 3-i	month automatic extension of time to f	ile (6 mont	hs for		
a corporation	required to file	Form 990-T), or an additional (not auto	omatic) 3-mo	onth extension of time. You can electro	onically file	Form		
8868 to reque	st an extensio	n of time to file any of the forms listed i	n Part I or P	art II with the exception of Form 8870,	Informatio	n		
Return for Tra	nsfers Associ	ated With Certain Personal Benefit Con	tracts, which	h must be sent to the IRS in paper form	nat (see			
+		is on the electronic filing of this form, v				ofits		
Part I	Automat	c 3-Month Extension of Time	Only sub	omit original (no copies neede	d).			
A corporation	required to file	Form 990-T and requesting an automa	atic 6-month	extension-check this box and complet	te			
Part I only							▶ [_]	
All other corpo	orations (includ	ling 1120-C filers), partnerships, REMI	Cs, and trust	ts must use Form 7004 to request an e	extension of	of time		
to file income								
Type or	Name of ex	empt organization			Employ	er identific	cation number	
print File by the	DEVIN	FAMILY FOUNDATION	INC		27-3127675			
due date for filing your return See	Number, street, and room or suite no If a P O box, see instructions 2021 DOWN WOODS LANE							
instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions  WINDERMERE FL 34786							
Enter the Retu	urn code for th	e return that this application is for (file a	separate a	pplication for each return)			04	
Application			Return	Application			Return	
Is For			Code	Is For			Code	
Form 990			01	Form 990-T (corporation)			07	
Form 990-BL			02	Form 1041-A				
Form 990-EZ			03	Form 4720				
Form 990-EZ Form 990-PF			04	Form 5227	10			
Form 990-PF Form 990-T (sec 401(a) or 408(a) trust)			05	Form 6069			11	
Form 990-T	(trust other th	aп above)	06	Form 8870			12	
		DANIEL DEVINE						
		2021 DOWN WOODS LANE						
		are WINDERMERE				FL	34786	
Telephone			FAX No					
•		not have an office or place of business		•			▶ [_]	
		urn, enter the organization's four digit (			this is			
for the whole	• • •		tne group, o	check this box	ach			
		Ns of all members the extension is for		la Farra 200 T) automaion affica	·		<del></del> -	
-		<ul> <li>3-month (6 months for a corporation r</li> <li>, to file the exempt organization retuined</li> </ul>	-	•				
	organization's	· -	n ioi the oit	ganization named above. The extension	n is			
	calendar year							
<del></del>	tax year begin							
	, ,							
	ix year entered hange in acco	in line 1 is for less than 12 months, ch unting period	eck reason	Initial return Final return				
	•	r Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, ente	er the tentative tax, less any				
		See instructions r Form 990-PF, 990-T, 4720, or 6069, or	anter any ro	fundable credits and	3a	\$		
-	· -	r Form 990-PP, 990-1, 4720, or 6069, o	=		25	•	O	
					3ь	\$		
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 \$						O		
		make an electronic fund withdrawal wi	th this Form	8868, see Form 8453-FO and Form 8	3c 879-FO fo	<u> </u>		
payment instr		The second series and series and series are a series and series are a	•	,	0 -0 10	•		