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Form **990-PF**

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

2	0	1	1

FO	T C	aien	dar year 2011 or tax year beginning		, and ending		
N	am	e of	foundation	•		A Employer identification	number
	тI	ΙE	IOA FOUNDATION, INC.			20-8964646	
	_		nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
			5 W. STATE ROAD 434	,		(407)998-4	167
_			own, state, and ZIP code			C If exemption application is pe	
	.,		GWOOD, FL 32750			- II exemption application is pe	chang, check here
			all that apply Initial return	Initial return of a for	mer public charity	D 1. Foreign organizations	. check here
_	-		Final return	Amended return	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	J	,
			Address change	Name change		Foreign organizations med 2. check here and attach col	eting the 85% test,
Н	CI	neck	type of organization X Section 501(c)(3) ex			E If private foundation stat	
				Other taxable private foundati	ion	under section 507(b)(1)	
ī	Fai		rket value of all assets at end of year J Account	ng method X Cash	Accrual	F If the foundation is in a 6	
	(fro	om F	Part II, col. (c), line 16)	ther (specify)		under section 507(b)(1)	
	•			mn (d) must be on cash ba	asis.)		
F	a	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
			necessaniy equal the amounts in column (a))	expenses per books	income	income	for chantable purposes (cash basis only)
		1	Contributions, gifts, grants, etc., received	9,000.			
		2	Check ▶ if the foundation is not required to attach Sch. B				
		3	Interest on savings and temporary cash investments				
		4	Dividends and interest from securities				
		5a	Gross rents				
		b	Net rental income or (loss)				
		6a	Net gain or (loss) from sale of assets not on line 10				
		b	Gross sales price for all assets on line 6a			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
3	Hevenue	7	Capital gain net income (from Part IV, line 2)		0.		
2		8	Net short-term capital gain			0.	
	1	9	Income modifications Gross sales less returns		·····		
		10a	and allowances	1-1'-'			······································
			Less Cost of goods sold				
			Gross profit or (loss)				
			Other income	9,000.	0	0.	
	╢	12	Total: Add lines, y through 11	9,000.	0.		0.
	I	13 14	Compensation of officers, directors, trustees, etc		<u> </u>		
		5	Other employee salaries and wabes Pension plans, employee benefits				
	s∥		Legal fees		•		
1	Se		1	788.	0 .	0.	788.
j	and Administrative Expen		Accounting fees UT Stmt 1 -Other professional fees	, , , ,			, , , ,
	ē [17	Interest				
1	3		Taxes				
	121	19	Depreciation and depletion				
•			Occupancy				
•	8	21	Travel, conferences, and meetings				
-	ב ב	22	Printing and publications				
	وَ	23	Other expenses				
•	<u>≣</u>	24	Total operating and administrative				
	Operating		expenses. Add lines 13 through 23	788.	0	0.	788.
(ا.د	25	Contributions, gifts, grants paid	0.	,		0.
		26	Total expenses and disbursements.		_		
_	\downarrow		Add lines 24 and 25	788.	0	0.	788.
		27	Subtract line 26 from line 12	0 212			
			Excess of revenue over expenses and disbursements	8,212.	0	- 	<u> </u>
			Net investment income (if negative, enter -0-)		U .	0.	
_		C	Adjusted net income (if negative, enter -0-)	<u> </u>		1 0.	<u>t</u>

123501 12-02-11 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2011)

Fo	rm 99	0-PF(2011) THE IOA FOUNDATION, INC	•	20-	8964646 Page 2
n	e e t	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	<u> </u>
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	5 404	10.606	10.505
	4	Savings and temporary cash investments	5,484.	13,696.	13,696.
	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			
	' '	Other notes and loans receivable			
		Less allowance for doubtful accounts			
Assets	1 -	Inventories for sale or use			
Ass	9	Prepaid expenses and deferred charges			
-	ı	Investments - U.S. and state government obligations			
		Investments - corporate stock			
	1	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis		1	
	12	Less accumulated depreciation			
	12 13	Investments - mortgage loans Investments - other			
	14	Land, buildings, and equipment basis			
	'"	Less accumulated depreciation		1	
	15	Other assets (describe			
	'"	Other assets (describe >)			
	16	Total assets (to be completed by all filers)	5,484.	13,696.	13,696.
	_	Accounts payable and accrued expenses			
	18	Grants payable			
ç	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
⊐	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.			
çes	24	Unrestricted			
lan	25	Temporarily restricted			
8	26	Permanently restricted			
Ę		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
tso	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets or Fund Balances	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
ţ	29	Retained earnings, accumulated income, endowment, or other funds	5,484.	13,696.	
ž	30	Total net assets or fund balances	5,484.	13,696.	
			5 404	12 626	
_	31	Total liabilities and net assets/fund balances	5,484.	13,696.	
P	art	Analysis of Changes in Net Assets or Fund B	alances		
\equiv			20		
1		I net assets or fund balances at beginning of year - Part II, column (a), line	30		5,484.
2		st agree with end-of-year figure reported on prior year's return) r amount from Part I, line 27a		$\frac{1}{2}$	8,212.
		r increases not included in line 2 (itemize)		2	0,212.
		lines 1, 2, and 3	 	3 4	13,696.
		eases not included in line 2 (itemize)		5	0.
		I net assets or fund halances at end of year (line 4 minus line 5) - Part II or	nlumn /h) line 30		13,696.

123511 12-02-11

2	Total of line 1, column (d)	2	.000000
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	.000000
4	Enter the net value of noncharitable-use assets for 2011 from Part X, line 5	4	
5	Multiply line 4 by line 3	5	0.
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	0.
7	Add lines 5 and 6	7	0.
8	Enter qualifying distributions from Part XII, line 4	8	788.
	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		

123521 12-02-11

Form 990-PF (2011)

See the Part VI instructions

Form	990-PF(2011) THE IOA FOUNDATION, INC.	•	20-	-8964	646	ı	Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940	(a), 4940(b), 4940(e), o	or 4948	- see i	nstru		
1 a	Exempt operating foundations described in section 4940(d)(2), check here and ent	ter "N/A" on line 1					
	Date of ruling or determination letter (attach copy of letter if nece	ssary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%	1	<u> </u>			0.
	of Part I, line 27b						
C	All other domestic foundations enter 2% of line 27b $$ Exempt foreign organizations enter 4% $$	of Part I, line 12, col (b)					_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Other	ers enter -0-)	2	-			0.
3	Add lines 1 and 2		3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Other	hers enter -0-)	4	_			0.
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	ļ			0.
	Credits/Payments						
	2011 estimated tax payments and 2010 overpayment credited to 2011	6a					
	Exempt foreign organizations - tax withheld at source	6b					
	Tax paid with application for extension of time to file (Form 8868)	6c					
	Backup withholding erroneously withheld	6d	_	1			^
	Total credits and payments Add lines 6a through 6d		7	 			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attack	hed	8	 			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	 			0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	la	10	 			
	Enter the amount of line 10 to be Credited to 2012 estimated tax	Refunded	11	<u> </u>			
	rt VII-A Statements Regarding Activities					Vaa	NI.
12	During the tax year, did the foundation attempt to influence any national, state, or local legisla	ition or did it participate or inter	vene in			Yes	
	any political campaign?	/	- \ 0		1a		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purpose	•	•		1b		
	If the answer is "Yes" to 1aor 1b, attach a detailed description of the activities and	copies of any materials pub	iisnea or				
	distributed by the foundation in connection with the activities.						Х
	Did the foundation file Form 1120-POL for this year? Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.	100F			10		
u	(1) On the foundation \blacktriangleright \$ 0. (2) On foundation managers		0.				
	Enter the reimbursement (if any) paid by the foundation during the year for political expendition	· — · · · · · · · · · · · · · · · · · ·	•				
-	managers > \$ 0.	ure tax imposed on roundation					
2	Has the foundation engaged in any activities that have not previously been reported to the IR	\$2			2	:	Х
-	If "Yes," attach a detailed description of the activities.	U			-		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in	strument, articles of incorporati	on or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change.		o, o.		3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year				4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?		1	I/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5	····.	X
	If "Yes," attach the statement required by General Instruction T.						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eith	her					
	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	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?				7	X	
	If "Yes," complete Part II, col (c), and Part XV.						
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	s) >					
	FL						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Att	orney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation				85	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of sec	tion 4942(j)(3) or 4942(j)(5) foi	calendar				
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," co	omplete Part XIV			9_	Х	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule	listing their names and addresses	Stm	: 2	10	X	

Form 990-PF (2011)

orm 990-PF (2011) THE IOA FOUNDATION, INC.			20-89646	46 Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indire			
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?			s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations	37/3	_
section 53 4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for		. /		
expenditure responsibility for the grant?		I ∕ A	s L No	
If "Yes," attach the statement required by Regulations section 53 4948				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		s X No	
a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	arcanal banafit apatraat?	16		Sb X
If "Yes" to 6b, file Form 8870.	ersonal benefit contract?		-	70 A
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	□ ve	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			,_	7b
Information About Officers Divisions Truck		nagers Highly		, , , , , , , , ,
Part VIII Paid Employees, and Contractors	ooo, r ouridation ma	inagoro, mgm	,	
List all officers, directors, trustees, foundation managers and their	compensation.			
4.00	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowances
	DIRECTOR			
1855 W. STATE ROAD 434				
LONGWOOD, FL 32750	2.00	0.	0.	0.
	DIRECTOR			
1855 W. STATE ROAD 434				
LONGWOOD, FL 32750	2.00	0.	0.	0.
W. Barray				
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."	, ,	
	(b) Title, and average		(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	account, other allowances
NONE				
to an acting the second				
Total number of other employees paid over \$50,000			>	0

Form 990-PF (2011) THE IOA FOUNDATION, INC. 20-	-8964646 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	
3 Five highest-paid independent contractors for professional services. 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	<u>▶</u> 0
Part IX-A Summary of Direct Charitable Activities	T
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 N/A	
	-
	1
2	
	_
3	
	-
4	
··	1
Part IX-B Summary of Program-Related Investments	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	-
	╡
2	
	1
All other program-related investments. See instructions	
3	4
	-
Total. Add lines 1 through 3	0.
The state of the s	Form 990-PF (2011)

P	art X Minimum Investment Return (All domestic foundations must complete t	his part. Foreign four	ndations, see in	structions.)
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	1	1b	
	Fair market value of all other assets		1c	
d	Total (add lines 1a, b, and c)		1d	0.
	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets	- '	2	0.
3	Subtract line 2 from line 1d		3	0.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions))	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.		5	0.
6	Minimum investment return Enter 5% of line 5		6	0.
P	postributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private of foreign organizations check here X and do not complete this part)	perating foundations an	d certain	
1	Minimum investment return from Part X, line 6		1	
2a	Tax on investment income for 2011 from Part VI, line 5			
b	Income tax for 2011 (This does not include the tax from Part VI)			
C	Add lines 2a and 2b		2c	
3	Distributable amount before adjustments Subtract line 2c from line 1		3	
4	Recoveries of amounts treated as qualifying distributions		4	
5	Add lines 3 and 4		5	_
6	Deduction from distributable amount (see instructions)		6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1		7	
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes			700
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		_1a	788.
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	S	2	
3	Amounts set aside for specific charitable projects that satisfy the			
a	Suitability test (prior IRS approval required)		3a	
b	Cash distribution test (attach the required schedule)		3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	1	4	788.
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		5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	788.
	Note: The emount on line 6 will be used in Bort V, column (b), in subsequent years when calculating a	ubathar the foundation (auglifice for the c	notion

Form **990-PF** (2011)

4940(e) reduction of tax in those years

Part XIII Undistributed Income (see	instructions)	N/A	-,	
	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7	· · · · · · · · · · · · · · · · · · ·			
2 Undistributed income, if any, as of the end of 2011		***************************************		
a Enter amount for 2010 only				
b Total for prior years	,			
n Total for prior years				
3 Excess distributions carryover, if any, to 2011	!'************************************	······································		
a From 2006				
b From 2007				
c From 2008				
d From 2009				
e From 2010				
f Total of lines 3a through e				
4 Qualifying distributions for 2011 from				······································
Part XII, line 4 > \$				
a Applied to 2010, but not more than line 2a			1	
b Applied to undistributed income of prior	l i dankkirkanski i	····		***************************************
years (Election required - see instructions)				
c Treated as distributions out of corpus				
(Election required - see instructions)				
, , , , , , , , , , , , , , , , , , ,				
d Applied to 2011 distributable amount				
e Remaining amount distributed out of corpus		· · · · · · · · · · · · · · · · · · ·	*	- 1,1-1-1
Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount				
must be shown in column (a))				
6 Enter the net total of each column as indicated below				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income. Subtract				
line 4b from line 2b				
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable	······			
amount - see instructions				
e Undistributed income for 2010 Subtract line				
4a from line 2a Taxable amount - see instr				
f Undistributed income for 2011 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2012				
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
· · · · · · · · · · · · · · · · · · ·				
section 170(b)(1)(F) or 4942(g)(3)		<u> </u>		
8 Excess distributions carryover from 2006				
not applied on line 5 or line 7				
9 Excess distributions carryover to 2012.				
Subtract lines 7 and 8 from line 6a	······			
O Analysis of line 9				
a Excess from 2007				
b Excess from 2008	,			
c Excess from 2009				
d Excess from 2010				
e Excess from 2011		1		

Form **990-PF** (2011)

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

Part XV

Supplementary Information (continued)

orm 990-PF (2011) THE IOA FOUND Part XVI-A Analysis of Income-Proc				20-6	3964646 Page
		usiness income	Evolution	by section 512, 513, or 514	
nter gross amounts unless otherwise indicated	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue a	code		Code	-	
b					
C					
d	_				
e					
g Fees and contracts from government agencies	_		+		
Membership dues and assessments					
Interest on savings and temporary cash					
investments					
Dividends and interest from securities					
Net rental income or (loss) from real estate					
a Debt-financed property	ļ				
b Not debt-financed property			+		
Net rental income or (loss) from personal					
property Other investment income			+		···
Gain or (loss) from sales of assets other			 		······································
than inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue					
a	1 1				
b	1 1		+		
d		•	+		
e					
Subtotal Add columns (b), (d), and (e)		0		0.	
Total. Add line 12, columns (b), (d), and (e)		-		13	
ee worksheet in line 13 instructions to verify calculations	;)				
Part XVI-B Relationship of Activitie	s to the Accom	plishment of I	Exempt F	Purposes	
ine No Explain below how each activity for which i			-A contribute	ed importantly to the accom	olishment of
▼ the foundation's exempt purposes (other th	nan by providing tunds	for such purposes)	····		
					· · · · · · · · · · · · · · · · · · ·
				=	
	· - ·· · · · · · · · · · · · · · · · · · ·			·	
		· —————			

123621 12-02-11

Form **990-PF** (2011)

Part XVII	Information Re Exempt Organ		sfers To a	and Transactions	and Relations	hips With Nonch	aritable)	
1 Did the or		•	of the followin	g with any other organizati	on described in sect	on 501(c) of		Yes	No
				7, relating to political organ		3011 3011(0) 01			
	from the reporting founda								ı
(1) Cash	•			,			1a(1)		Х
(2) Othe							1a(2)		X
b Other tran									
(1) Sales	s of assets to a noncharital	ble exempt organizat	tion				1b(1)		X
(2) Purc	hases of assets from a noi	ncharitable exempt o	organization				16(2)		X
(3) Rent	al of facilities, equipment,	or other assets					1b(3)		X
(4) Reim	bursement arrangements						1b(4)		Х
(5) Loan	s or loan guarantees						1b(5)		X
(6) Perfo	ormance of services or me	mbership or fundrai	sing solicitatio	ns			1b(6)		X
_	of facilities, equipment, ma						10		X
	•		-	dule Column (b) should al	=	•		ets,	
	•			ed less than fair market val	ue in any transaction	or sharing arrangement,	show in		
(a) Line no	d) the value of the goods, (b) Amount involved			exempt organization	(d) December				
(a) Line no	(b) Amount involved	(c) Name of	N/A	exempt organization	(u) Description	of transfers, transactions, and	ı snaring arı	rangeme	nts
-			N/A						
							**		
	 								
									·-··
		•		or more tax-exempt organ	izations described	,			7
	501(c) of the Code (other	, ,)(3)) or in sect	ion 527?			Yes	X	No
b If "Yes," c	omplete the following scho			(h) Turn of a recovery	T	(a) Danamation of validion			
	(a) Name of org	janization		(b) Type of organization		(c) Description of relation	snip		
	N/A								
					<u> </u>		<u> </u>		
	· -								
Unde	r penalties of perjury, I declare	that have examined this	s return, includin	g accompanying schedules and	statements, and to the	best of my knowledge	lav tha IDO	4	
Sign and b	elief, it is true, correct, and cor	nelete Declaration of or	eparer (other than	n taxpayer) is based on all infor	mation of which prepare	has any knowledge	lay the IRS of turn with the hown below	e prepar	er
Here				13-13-12	Direc	tn 🏻 🖺	X Yes] No
	natare of officer or trustee			Date	Title	Ľ			
	Print/Type preparer's na	ime	Preparer's si	gnature	Date	Check if PTIN			
CAAIA						self- employed			
Paid	John E. Cu		J.U.	suice -	3-2-12		0370		
Preparer	Firm's name ► Due	rr & Cull	en CP	As, P.A.		Firm's EIN ► 20-4	4215	15	
Use Only			<u> </u>						
	•			, Suite 102			<i>-</i>		_
	<u> </u>	itland, F	'L 3275	1			<u>-644</u>		
						F	orm 990)-PF(2011)

123622 12-02-11

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2011

Employer identification number

20-8964646 THE IOA FOUNDATION, INC. Organization type (check one). Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 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 (i) Form 990, Part VIII, line 1h, or (ii) 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, total 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 total 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. 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 Part I, 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).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule 8 (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization

Employer identification number

THE IOA FOUNDATION, INC.

20-8964646

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHUBB & SON 15 MOUNTAIN VIEW ROAD WARREN, NJ 07059	\$9,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Omnicash Complete Part II if there is a noncash contribution.)

Employer identification number

THE IOA FOUNDATION, INC.

20-8964646

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
4.		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
(a)						
No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		<u> </u>				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
-			_			
3453 01-23-	.12		l <u> </u>			

Name of orga	anization		Employer identification number				
тне то	A FOUNDATION, INC.		20-8964646				
Part III	Exclusively religious, charitable, etc., indiving year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if additional	following line entry. For organizati , contributions of \$1,000 or less fo	c)(7), (8), or (10) organizations that total more than \$1,000 for the				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how sift is held				
Part I	(u) ruipose oi giit	(c) Use of grit	(d) Description of how gift is held				
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				

Form 990-PF	Accounting Fees		Statement 1			
Description		(b) Net Invest- ment Income		(d) Charitable Purposes		
ACCOUNTING FEES	788.	0.	0.	788.		
To Form 990-PF, Pg 1, ln 16b	788.	0.	0.	788.		
Name of Contributor	Addr					
	Part VII-A,					
INSURANCE OFFICE OF AMERICA,		1855 W. STATE ROAD 434 LONGWOOD, FL 32750				
TRACK SHACK	1104	1104 NORTH MILLS ORLANDO, FL 32803				
CHUBB & SON		15 MOUNTAIN VIEW ROAD WARREN, NJ 07059				