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0425574673 Dec. 20, 2012 LTR 2697C 0 R 26-1628191 201112 44 00026679

FIS FOUNDATION INC IT CORP TAX DEPARTMENT 601 RIVERSIDE AVE JACKSONVILLE FL 32204



006053

DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Signature of Officer of Trustee

Date

Ti⁄kle

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2012

Name of the organization			Employer identification number		
FIS FOL	JNDATION, INC.		26-1628191		
	zation type (check on	e)	20 1000 13.		
Filers o	of:	Section:			
Form 990 or 990-EZ		501(c)() (enter number) organization			
		4947(a)(1) nonexempt charitable trust not treated as a private for	oundation		
		527 political organization			
Form 990-PF		501(c)(3) exempt private foundation			
		4947(a)(1) nonexempt charitable trust treated as a private found	lation		
		☐ 501(c)(3) taxable private foundation			
Note. C	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.				
Genera	ıl Rule				
Ø	For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more tilt money or property) from any one contributor. Complete Parts I and II.				
Special	l Rules		JAN 3 1 2013		
	For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) 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.				
990-EZ,	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)				

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Cat No 30813X Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

	organization	Te-	ployer identification number
	DATION, INC.		26-1628191
Part I	Contributors (see instructions) Use duplicate co	pies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Fidelity National Information Services, Inc 601 Riverside Ave. Jacksonville, FL 32204	\$ 600,000 00	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
	Frank R. Martire 112 - 5th Ave. S., Unit 901 Jacksonville Beach, FL 32250-6796	\$ 5,000.00	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization			mployer identification number
Part II	Noncash Property (see instructions). Use duplicate cop	ues of Part II if additional sc	26-1628191 pace is needed.
(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 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
		s	

Name of or	ganization		·		Employer identification number		
Part III	Exclusively religious, charitable, e that total more than \$1,000 for the						
	For organizations completing Part II contributions of \$1,000 or less for the	I, enter the total of e	xclusively religious,	charitable	e, etc ,		
~~	Use duplicate copies of Part III if ad	ditional space is nee	ded.	<u></u>			
(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) Trans	fer of gift				
	(e) Transfer of gift						
_	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee				
-				*******			
-(a) Na				Y-			
(a) No. from Part I	(b) Purpose of gift (c) Use		of gift	(d) De	scription of how gift is held		
-							
*******		***************************************					
-	(e) Transfer of gift						
	•			ship of tra	insferor to transferee		
					·		
(a) No.			<u> </u>				
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
-							
L							
	(e) Transfer of gift						
	Transferee's name, address, a	Relationship of transferor to transferee					
-		***************************************					
-		••••••	***************************************				

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)