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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

OMB No 1545-0052

2011

F	ог са	lendar year 2011 or tax year beginning		, 2011,	and ending				<u>,</u> 20
		of foundation				A	Employer identifi	cation numbe	r
	THE	GREEN FAMILY FOUNDATION					59-721837	1	
	Numt	per and street (or P O box number if mail is not delive	red to street address)	_	Room/suite	В	Telephone numb	er (see instructi	ons)
							(90	04) 281-	0600
	296	1 SCOTT MILL LANE		Ì		1			
	City c	or town, state, and ZIP code				T	· · · · · · · · · · · · · · · · · · ·		
		. , ,				c	If exemption applica	ation is	
	TAC	KSONVILLE, FL 32223				l	pending, check here		🗀
_		ck all that apply Initial return	Initial return of	of a former n	uble charity	┨			
G	Cile	'''	Amended ret	•	ublic charity	P	1. Foreign organiza		. – 🗀
		Final return	—				Foreign organiza 85% test, check l		'
_		Address change	Name change			┨	computation .		▶□
۲	_	ck type of organization X Section 501(E	If private foundatio	n status was term	inated
\perp		ection 4947(a)(1) nonexempt charitable trust	Other taxable pri			1	under section 507(b)(1)(A), check her	re . ▶ 🔲
ı	Fair	market value of all assets at end JAcco	unting method $oxedsymbol{oxedsymbol{oxedsymbol{Z}}}{Z}$ Ca	ashAcc	rual	F	If the foundation is	ın a 60-month tei	rmination
	•	1 - 1	ther (specify)		-	1	under section 507(b)(1)(B), check her	е. ▶
_	16)	▶ \$ 1,696,714. (Part I,	column (d) must be on	cash basıs)					
Ŀ	art	Analysis of Revenue and Expenses (The	(a) Revenue and	(b) b) = 1	-4		Advisor de la lace	(d) Disbu	
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expenses per	(b) Net inve		(C)	Adjusted net income	for cha	
		column (a) (see instructions))	books		"		moone	(cash ba	
\Box	1	Contributions, gifts, grants, etc., received (attach schedule)	144,000.						
	2	if the foundation is not required to							
	3	Interest on savings and temporary cash investments							
	ა 4		73,809.	7	3,809.		,	ATCH	1
	•	Dividends and interest from securities			-,			111011	
		Gross rents							
e n		Net rental income or (loss)	16,308.						
		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 16, 916.	10,300.			_	DEOE	/CD	
ē	_	assets on line 6a			- 300		<u>KELE!</u>	<u> VED -</u>	
Revenue	7	Capital gain net income (from Part IV, line 2) .			6,308.	c y			اي
	8	Net short-term capital gain				4	l NAV 1-A	12010 16	3
	9	Income modifications · · · · · · · · · · · · · · · · · · ·				+	MAY 14		
	10 a	Gross sales less returns and allowances · · · · ·				_	L]]	<u> </u>
	b	Less Cost of goods sold .					<u>OGDEN</u>	I IIT	
	С	Gross profit or (loss) (attach schedule)				-	00.221	,	 !
	11	Other income (attach schedule)	_						
	12	Total. Add lines 1 through 11	234,117.	9	0,117.				
٦	13	Compensation of officers, directors, trustees, etc	0						
Į	14	Other employee salaries and wages							
es	15	Pension plans, employee benefits							-
٤	162	Legal fees (attach schedule)						· · · · ·	
핅	IVA	Accounting food (attach ashadula) ATCH 2	1,200.		600.	_		· · · · ·	
삟	D	Accounting fees (attach schedule) ATCH 2						 	
Ĭ	_ C	Other professional fees (attach schedule)			_ +			-	
2	15 16a b c 17 18 19 20 21 22 23 24	Interest	576.		576.			 	
ဋ	18	Taxes (attach schedule) (see instructions)	310.	_	3/6.			 	
Ē	19	Depreciation (attach schedule) and depletion.						ļ	
밁	20	Occupancy							
اجِ	21	Travel, conferences, and meetings							
ᇙ	22	Printing and publications							
5	23	Other expenses (attach schedule) ATCH 4.	3,298.		3,298.			.	
<u> </u>	24	Total operating and administrative expenses.							
9		Add lines 13 through 23	5,074.		4,474.				
미	25	Contributions, gifts, grants paid	77,330.						77,330
	26	Total expenses and disbursements Add lines 24 and 25	82,404.	-	4,474.			7	77,330
\neg	27	Subtract line 26 from line 12							
		Excess of revenue over expenses and disbursements	151,713.		ĺ				
		Net investment income (If negative, enter -0-)		8	5,643.			 	
			-		-, 515.			 	
ᆜ		Adjusted net income (if negative, enter -0-).		<u> </u>	JSA	* *	Amori 2	<u> </u>	0 DF
F 0	1 000	perwork Reduction Act Notice, see instructions 70947I 765G 5/1/2012 10:36			JSA		ATCH 3	∡ Form 99	0-PF (2011)
		109411 1000 3/1/2012 10:30	5:05 AM				9-1	O	PAGE
							_		

For Paperwork Reduction Act Notice, see instructions.

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Page 2

В	art II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	year
Ľ			amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	ing	12,850.	16,286.	16,286.
	2		cash investments	39,947.	130,169.	130,169.
	3	Accounts receivable				
		Less allowance for dou	btful accounts ▶			
	4					
	-	Less allowance for dou	btful accounts ▶			
	5					
	6		officers, directors, trustees, and other	***		
			tach schedule) (see instructions)			
	7		receivable (attach schedule)			
	′ ′		Luft of annual to N			
	8		I	+		
sets				<u></u>		
Ass	9		eferred charges			
⋖	10 a	Investments US and stat	e government obligations (attach schedule)	1,443,431.	1,501,486.	1,550,259.
			stock (attach schedule) ATCH 5	1,443,431.	1,301,400.	
	11 C	Investments - corporate Investments - land, building and equipment basis Less accumulated deprecia (attach schedule)				
	12		loans		_	
	13 14		ach schedule)			
		(attach schedule)				
	15	Other assets (describe	>)			
	16	•	completed by all filers - see the age 1, item l)	1,496,228.	1,647,941.	1,696,714.
	17		accrued expenses			
	18					
s	1					
럂	20		ors, trustees, and other disqualified persons			
Liabilities	21		otes payable (attach schedule)			
Ë:	22		e •			
		Other habilities (describe	·/			
	23	Total liabilities (add line	es 17 through 22)	o	o	
_	<u></u> -		low SFAS 117, check here ▶			
			24 through 26 and lines 30 and 31.			
Ses	24	Unrestricted	_ _			
a	25	Temporarily restricted				
Bal	26					
힏	24 25 26		not follow SFAS 117,			
Ξ			plete lines 27 through 31. ▶ X			
5	27		cipal, or current funds			
ţ	28	Paid-in or capital surplus, or	r land, bldg , and equipment fund			
Se	29	•	ulated income, endowment, or other funds	1,496,228.	1,647,941.	
ĕ	27 28 29 30 31	•	i balances (see instructions)	1,496,228.	1,647,941.	
Žet	31		net assets/fund balances (see			
_				1,496,228.	1,647,941.	
Ε	art II		anges in Net Assets or Fund E		<u> </u>	
_			alances at beginning of year - Part		nust agree with	
•			d on prior year's return)			1,496,228.
2		r amount from Part I, I	I . A7 -		1 . 1	151,713.
				• • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · 	
						1,647,941.
_	-	lines 1, 2, and 3	tino 2 (tompo) s		1 - 1	1,047,941.
5	Deci	eases not included in	line 2 (itemize) ►alances at end of year (line 4 minus li	no F) Dod II ad a 11	<u>5</u>	1,647,941.
<u>b</u>	rota	i net assets or fund ba	mances at end or year (line 4 minus li	ine 5) - Partil, column (b),	line 30 6	

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment In			gain minus than -0-) or
2-story brick warehouse, or common stock, 200 shs MLC Co) 1a SEE PART IV SCHEDULE b c d e (e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale a b c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (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 b c d e 2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	acquired P-Purchase D-Donation (I) col	acquired (mo , day, yr) (h) Gain or (li (e) plus (f) min	oss) us (g) gain minus than -0-) or
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If (loss), enter -0- in Part I, line 7 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	2		
Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8			16,308.
Part I, line 8			
Part I, line 8			
Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment In	3		0
	ncomo		
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 ba	ase perio	od?	Yes X No
f "Yes," the foundation does not qualify under section 4940(e) Do not complete this part	·	_	
1 Enter the appropriate amount in each column for each year, see the instructions before making	any entr	ries	
(a) (b) (c)		(d)	
Base period years Calendar year (or tax year beginning in) Adjusted qualifying distributions Net value of noncharitable-use assets		Distribution in (col. (b) divided b	
Curcinal year (or ax year beginning in)	 	(COI (D) divided D	0.046102
			0.040102
	 		
2008 4,000. 1,090,472.	 		0.003668
2007 52,600. 963,497.			0.054593
2006 6,000. 775,490.			0.007737
	[
2 Total of line 1, column (d)	2	<u></u>	0.133468
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		0.026694
,	\Box		
4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5	4	1.	,729,824.
,			
E. Multiply line 4 by line 3			46 176
s multiply line 4 by line 3	5		40,170.
			0
Enter 1% of net investment income (1% of Part I, line 27b)	6		856.
•			47,032.
7 Add lines 5 and 6	7		
7 Add lines 5 and 6	7		
7 Add lines 5 and 6	8		77,330.
Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b)	5		46,176. 856.

Form **990-PF** (2011)

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	etruc	tions	1
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	30 00	101	
\I a	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check		8	356.
_	here X and enter 1% of Part I, line 27b			
r	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		_	
3	Add lines 1 and 2		8	356.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			Ō
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		8	356.
6	Credits/Payments			
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 791.			
b	Exempt foreign organizations - tax withheld at source			
c	Tax paid with application for extension of time to file (Form 8868) 6c			
đ	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		7	91.
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			65.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11_	Enter the amount of line 10 to be Credited to 2012 estimated tax ▶ 0 Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate	 	Yes	No
	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	ıİ		
	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	i 1	1	.,
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 \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers \$	i l		v
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	. !		
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		Х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
3	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 either	,		
Ū	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 Part XV	7	Х	
8а	Enter the states to which the foundation reports or with which it is registered (see instructions)			_
	FL,			
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		v	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	-X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		Ì	
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete			
	Part XIV	9		<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names	, [ļ	X
	and addresses	10		ι ^

Pa	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14		-05	51	
	The books are in care of NANCY HANNA Located at 2961 SCOTT MILL LANE JACKSONVILLE, FL Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	TT
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of	<u> </u>		
	the foreign country			
Pai	t 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
1 a	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 X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?	ĺ		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)?	'		
	(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			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b		
	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 2011?	1 c		X
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 2011, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2011?			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2011 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 2011)	3 b		_
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	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 2011?	4 b		X

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Pai	t VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requi	ired (continued)				
- ۰5 a	During the year did the foundation pay or incur any amou	nt to						
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?							
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on,							
	directly or indirectly, any voter registration drive?	•	• •		,			
	(3) Provide a grant to an individual for travel, study, or other				1 1	.		
	(4) Provide a grant to an organization other than a							
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s				,			
	(5) Provide for any purpose other than religious, ch							
	purposes, or for the prevention of cruelty to children of	·	• .		,			
h								
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?								
	Organizations relying on a current notice regarding disast	-	,					
_				– 🗀				
Ç	If the answer is "Yes" to question 5a(4), does the		· ·					
	because it maintained expenditure responsibility for the gi			Yes No	'			
_	If "Yes," attach the statement required by Regulations section							
6 a	Did the foundation, during the year, receive any fund	•						
	on a personal benefit contract?			. Yes X No		, ,		
D	Did the foundation, during the year, pay premiums, direct	tly or indirectly, on a p	personal benefit contrac	:t [?]	6b	<u> </u>		
	If "Yes" to 6b, file Form 8870							
	At any time during the tax year, was the foundation a pa	•	•	•	·			
	If "Yes," did the foundation receive any proceeds or have				7b			
Pai	t VIII Information About Officers, Directors and Contractors	, Trustees, Foun	dation Managers,	Highly Paid Emplo	oyees,			
1	List all officers, directors, trustees, foundation n	nanagers and their	compensation (see	instructions).				
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all			
- 								
AΤ	TACHMENT 6		0	0		0		
		ļ						
								
2	Compensation of five highest-paid employees "NONE."	(other than thos	e included on line	1 - see instruction	ons). If no	one, enter		
		(b) Title, and average		(d) Contributions to	<i>(-) (</i>			
(a	Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expens other all			
		devoted to position		compensation				
	NONE							
-								
		<u> </u>						
		[
Γota	I number of other employees paid over \$50,000 .					•		

Form 990'-PF (2011) Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE 0 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 Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc. Summary of Program-Related Investments (see instructions) Amount Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 NONE All other program-related investments. See instructions 3 NONE

Form 990-PF (2011)

Total. Add lines 1 through 3.

Page 8

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	n found	lations,
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	1,661,855.
b	Average of monthly cash balances	1b	94,311.
С	Fair market value of all other assets (see instructions)	1 c	<u> </u>
d	Total (add lines 1a, b, and c)	1 d	1,756,166.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3		3	1,756,166.
4	Subtract line 2 from line 1d		<u> </u>
		4	26,342.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,729,824.
6	Minimum investment return. Enter 5% of line 5	6	86,491.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here	art)	· · · · · · · · · · · · · · · · · · ·
1	Minimum investment return from Part X, line 6	1	86,491.
2 a	Tax on investment income for 2011 from Part VI, line 5 2a 856.		
b			
c	Add lines 2a and 2b	2c	856.
3	Distributable amount before adjustments Subtract line 2c from line 1		85,635.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	5	85,635.
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	85,635.
		•	
Pa	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	77,330.
b		1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.		<u> </u>
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	77,330.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
-	Enter 1% of Part I, line 27b (see instructions)	5	856.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	76,474.
٠	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when cal		
	qualifies for the section 4940(e) reduction of tax in those years	Juliania	michiol tile loundation

Form **990-PF** (2011)

Form 990-PF (2011) Page 9 Part XIII Undistributed Income (see instructions) (b) (d) (a) (c) Corpus Years prior to 2010 2010 2011 Distributable amount for 2011 from Part XI, 1 85,635. Undistributed income, if any, as of the end of 2011 73,756 Enter amount for 2010 only . . Total for pnor years 20 09 20 08 20 07 Excess distributions carryover, if any, to 2011 From 2006 From 2007 c From 2008 d From 2009 From 2010 Qualifying distributions for 2011 from Part XII, 77,330. line 4 > \$ 73,756 a Applied to 2010, but not more than line 2a . . . b Applied to undistributed income of prior years (Election required - see instructions)..... c Treated as distributions out of corpus (Election required - see instructions) 3,574. d Applied to 2011 distributable amount Remaining amount distributed out of corpus . . Excess distributions carryover applied to 2011 (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: Corpus Add lines 3f, 4c, and 4e Subtract line 5 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 Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount - see Undistributed income for 2011 Subtract lines 4d and 5 from line 1. This amount must be 82,061. distributed in 2012 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2012. 0 Subtract lines 7 and 8 from line 6a Analysis of line 9 a Excess from 2007 . . . b Excess from 2008 c Excess from 2009 . . .

Form 990-PF (2011)

d Excess from 2010 . . . e Excess from 2011 . . .

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Form 990-PF (2011)				Page 11
Part XV Supplementary Information (continued)			
3 Grants and Contributions Paid Duri	ng the Year or Appl	oved for F	uture Payment	
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CONTIDUION	
a Paid during the year	ľ			
ATTACHMENT 7				
		1		
		}		
		ĺ		
Total			▶ 3a	77,330.
b Approved for future payment			T	
.,			•	
]		
	1			
Total	· · · · · · · · · · · · · · · · · · ·	<u> </u>	▶ 3b	

Part XVI-A Analysis of Income-Producing Activities

Page 12

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by	y section 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
a	<u> </u>				(occ manachons)
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			14	73,809.	
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			18	16,308.	
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				00 117	
12 Subtotal Add columns (b), (d), and (e)			L	90,117.	
13 Total. Add line 12, columns (b), (d), and (e)				¹³	90,117.
Part XVI-B Relationship of Activities		complishment of Exc	empt Purp	oses	
Line No. Explain below how each activit					
▼ accomplishment of the foundation	on's exemp	t purposes (other than t	by providing	tunas for such purpose	s) (See instructions)
		 -			
		·			
					·
	<u>.</u>			 	
	<u>,</u>				
	· · · · · · · · · · · · · · · · · · ·				
					
	<u> </u>				
	<u></u>	,			
JSA					Form 990-PF (2011)
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Form 990-PF	(2011)	THE GREEN	FAMILY F	OUNDATION			59-721	8371	Pa	ge 13
Part XVI	I Information R Exempt Orga		nsfers To an	d Transact	ions an	d Relation	ships With Non	chari	table	•
ın se	he organization direction 501(c) of the Conizations?				_				Yes	No
	sfers from the reporting									v
(2) (ash	• • • • • • • • • •					• • • • • • • • • •	1a(1) 1a(2)	_	X
	r transactions	• • • • • • • • • •					• • • • • • • • • • • • • • • • • • • •	14(2)		
(1) S	ales of assets to a no	oncharitable exem	pt organization					1b(1)		Х
(2) P	urchases of assets from	om a noncharitab	le exempt orgar	nization				1b(2)		Х
(3) R	ental of facilities, equ	ipment, or other a	ssets					1b(3)		X
(4) K	teimbursement arrang	ements	• • • • • • • •	• • • • • • • •				1b(4)		X
(6) P	oans or loan guarante erformance of service	es	or fundraising	solicitations			• • • • • • • • • • • • • • • • • • • •	1b(5) 1b(6)		X
c Shar	ing of facilities, equipr	ment, mailing lists	other assets.	or paid employ	/ees			1c		Х
d If the	answer to any of the	ne above is "Yes,	" complete the	e following so	chedule (Column (b) s	should always show	v the t		
	of the goods, other									
	(b) Amount involved									
(a) Line no	N/A	(c) Name of nor	ncharitable exempt	organization	N/A	cription of trans	fers, transactions, and share	ing arra	ngemer	nts
					11/11					
			•			-				
							-			
				<u> </u>			 -			
					<u>. </u>					
				<u> </u>						
-		 								
	foundation directly tibed in section 501(c)						t organizations	Y	es X] No
b If "Ye	s," complete the follo									
N/Ā	(a) Name of organization	n	(b) Type	of organization			(c) Description of relations	hip		
						· · -				
		-					-			
				· · ·	-					
Und	der penalties of perjury, I declared, and complete Declaration	are that I have examined	this return, includir	ng accompanying so	chedules and	statements, and	to the best of my knowledg	e and b	elief, it	ıs true,
Sigii			1 5/2	/.	-			discuss		
Here \	25/			//d		US FEL	with the pr	epar <u>er</u>	shown_	below
"	grature of officer or trustee		Date /		Title		(see instruction	s)?	Yes	No
Doid	Print/Type preparer's	name	Preparer's evgr	nature /		Date , ,	Check If F	PTIN		
Paid	JAMIE M. JOLI	ES	1	lla		15/1/1	z self-employed	P002	9374	4
Preparer	Firm's name Fire	CINZ & COMPA					Firm's EIN ▶ 20-3			_
Use Only				SUITE 20						_
	JA	CKSONVILLE,	FL		322	256	Phone no 904-6			
							E	orm QQ	O DE	2044

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

2011

Name of the organization **Employer identification number** THE GREEN FAMILY FOUNDATION 59-7218371 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, 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 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.

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Employer identification number 59-7218371

Part I	Contributors (see instructions). Use duplicate copies of	Part I if additional space is need	ded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	ALAN & PAMELA GREEN 2961 SCOTT MILL LANE JACKSONVILLE, FL 32223	\$\$\$	Person X 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
-		ss	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 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)

Name of organization THE GREEN FAMILY FOUNDATION

Employer identification number

59-7218371

ash Property (see instructions) Use duplicate copie	s of Part II if additional space is ne	eded
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	 \$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
	(b) Description of noncash property given (b) (b) Description of noncash property given	Description of noncash property given (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions) (f) FMV (or estimate) (see instructions) (go instructions) (h) Description of noncash property given (c) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions)

Name of organization THE GREEN FAMILY FOUNDATION

Employer identification number

59-7218371

Part III	Exclusively religious, charitable, etc., in that total more than \$1,000 for the year	ndividual contributions to	o section 501(c)(7), (8), or (10) organization through (e) and the following line entry
	For organizations completing Part III, ent contributions of \$1,000 or less for the y	er the total of exclusively i	religious, charitable, etc.,
	Use duplicate copies of Part III if addition	al space is needed	
(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	-	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	
		(e) Transier 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
	1		

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

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OMB No 1545-0092

Name of estate or trust

THE GREEN FAMILY FOUNDATION

Employer identification number

59-7218371

Note	e: Form 5227 filers need to complete only Pa	rts I and II.					
Par	t I Short-Term Capital Gains and Lo	sses - Assets	Held One Ye	ar or Less			
-	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other b (see instructions		(f) Gain or (loss) for the entire year Subtract (e) from (d)
1 a							
	 				 		
þ	Enter the short-term gain or (loss), if any, for	rom Schedule D	-1, line 1b			1b	
2	Short-term capital gain or (loss) from Form	s 4684, 6252,	6781, and 882	4		2	
3	Net short-term gain or (loss) from partners					_3	
4	Short-term capital loss carryover Enter		-		· ·	4	()
5	Carryover Worksheet	lines 1a throug	h 4 in colum	in (f) Enter here and	d on line 13,		
	column (3) on the back	<u> </u>		 <u>.</u> 	▶	5	
Par	Long-Term Capital Gains and Lo	T		han One Year	T		(f) Gain or (loss) for
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other b		the entire year Subtract (e) from (d)
6a							
		ļ					
			·				
		-					
þ	Enter the long-term gain or (loss), if any, from	om Schedule D-	1, line 6b			6 b	
7	Long-term capital gain or (loss) from Form	s 2439 4684 i	6252 6781 ai	nd 8824		7	ļ
•	Long torm outside game or (1000) from 1 orm	5 £ 100, 400 1,	0202, 0701, di	10 0024		<u>-</u>	
8	Net long-term gain or (loss) from partnersh	nips, S corporat	ions, and other	estates or trusts		8	 -
_							16 200
9	Capital gain distributions					9	16,308.
10	Gain from Form 4797, Part I]	10	
11	Long-term capital loss carryover Enter t	the amount, if	any, from lir	ne 14 of the 2010	Capital Loss		
	Carryover Worksheet					11	()
12	Net long-term gain or (loss). Combine lin	nes 6a through	i 11 in colum	n (f) Enter here and	on line 14a,	42	16,308.
	column (3) on the back				<u></u>	14	10,300.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2011

: Sche	dule D-(Form 1041) 2011						Page 2
	t III Summary of Parts I and II		(1) Bene	ficiaries'	(2) Esta	ate's	
•	Caution: Read the instructions before completing this	part.		instr)	or tru		(3) Total
13	Net short-term gain or (loss)	13					
14	Net long-term gain or (loss):						
а	Total for year	14a					16,308.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b					
C	28% rate gain	14c					
15	Total net gain or (loss). Combine lines 13 and 14a ▶	15					16,308.
	: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (
	, go to Part V, and do not complete Part IV If line 15, column (3), is a net loss, co	omplete	Part IV and	the Capita	Loss Carryo	ver Wo	orksheet, as necessary
	t IV Capital Loss Limitation				_ .		
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F					l	
a	The loss on line 15, column (3) or b \$3,000. If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page	: : :	. 00 / 5-	··· 000 T /		16	()
Cany	over Worksheet in the instructions to figure your capital loss carryover	e 1, IIN	e 22 (or Foi	m 990-1, III	ne 34), IS a I	oss, co	ompiete the Capital Loss
Pai	Tax Computation Using Maximum Capital Gains Rate	s					
orn	1041 filers. Complete this part only if both lines 14a and 15 in colu	ımn (2) are gains	, or an am	ount is ent	ered	in Part I or Part II and
here	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor	e thar	zero				
	tion: Skip this part and complete the Schedule D Tax Worksheet in the i	nstruc	tions if				
	ther line 14b, col (2) or line 14c, col (2) is more than zero, or oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero						
	n 990-T trusts. Complete this part only if both lines 14a and 15 are		o or qual	find divide	nda ara in	مابيطم	d in income in Bort I
of Fe	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part a	e gain	s, or quair molete the	Schedule	D Tax Wo	rksh	eet in the instructions
	her line 14b, col (2) or line 14c, col (2) is more than zero		inplote the	Concadio	, D Tux III	· KOIII	
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	N/)	17				
18	Enter the smaller of line 14a or 15 in column (2)) ' ') .	· · ' / 				
	but not less than zero					- 1	
19	Enter the estate's or trust's qualified dividends		⊣				
	from Form 1041, line 2b(2) (or enter the qualified						
	dividends included in income in Part I of Form 990-T) 19						
20	Add lines 18 and 19		- [
21	If the estate or trust is filing Form 4952, enter the		-				
- '	amount from line 4g, otherwise, enter -0 ▶ 21		1 1			1	
22	Subtract line 21 from line 20 If zero or less, enter -0-		22				
23	Subtract line 22 from line 17 If zero or less, enter -0-		23				
			· · -			j	
24	Enter the smaller of the amount on line 17 or \$2,300		24			1	
25	Is the amount on line 23 equal to or more than the amount on line 24	;? ;?					
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box						
	No. Enter the amount from line 23		25				
26	Subtract line 25 from line 24						
27	Are the amounts on lines 22 and 26 the same?						
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or lin	ne 22	27				
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28				
29	Subtract line 28 from line 27		29			ļ	
30	Multiply line 29 by 15% (15)					30	
31	Figure the tax on the amount on line 23 Use the 2011 Tax Rate						
	(see the Schedule G instructions in the instructions for Form 1041) $\underline{\ }$					31	
32	Add lines 30 and 31					32	
33	Figure the tax on the amount on line 17 Use the 2011 Tax Rate					1	
	(see the Schedule Ginstructions in the instructions for Form 1041)					33	
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 l			m 1041, S	Schedule		
	G. line 1a (or Form 990-T. line 36)				1	34	

JSA 1F1220 2 000 Schedule D (Form 1041) 2011

SCHEDUŁE D-1 (Form 1041)

Continuation Sheet for Schedule D (Form 1041) ► See instructions for Schedule D (Form 1041).

OMB No 1545-0092

2011

Department of the Treasury Internal Revenue Service

▶ Attach to Schedule D to list additional transactions for lines 1a and 6a. Name of estate or trust **Employer identification number** THE GREEN FAMILY FOUNDATION 59-7218371 Short-Term Capital Gains and Losses - Assets Held One Year or Less (b) Date (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (c) Date sold (mo , day, yr) (e) Cost or other basis (f) Gain or (loss) (d) Sales price acquired (see instructions) Subtract (e) from (d) (mo , day, yr) 1a INTREPID CAP FUND 608. 608.

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

		INS AND LO			NVESII	VII PI		
Kind of			Desci			or D	Date acquired	Date sold
Gross sale price less	Depreciation allowed/	Cost or other	FMV as of	Adj basis	Excess of FMV over	Ħ	Gain	
expenses of sale	allowable	basis	12/31/69	as of 12/31/69	adı basıs	Ц	or _(loss)_	
		TOTAL CARE	יאן כאדאי הדי					
		TOTAL CAPIT	AL GAIN DIS	TRIBUTIONS			16,308.	
						$\ \ $		
		INTREPID CA	P FUND			Ш	VAR	VAF
608.		608.				Ш		
						Ш		
COTAL GAIN(I	.0881					$\ \cdot \ $	16 200	
I) NIAD GAIN	1033)		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • •		16,308.	
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- DIVIDENDS AND INTEREST FROM SECURITIES PART I FORM 990PF,

NET INVESTMENT INCOME	73,748.	73.809
REVENUE AND EXPENSES PER BOOKS	73,748. 61.	73.809
DESCRIPTION	DIVIDEND INCOME - BANK OF AMERICA INTEREST INCOME - BANK OF AMERICA	TOTAI,

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- ACCOUNTING FEES PART I FORM 990PF,

CHARITABLE <u>PURPOSES</u>		
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	.009	.009
REVENUE AND EXPENSES PER BOOKS	1,200.	1,200.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

ATTACHMENT 2 PAGE 23

ATTACHMENT 3

- TAXES PART I FORM 990PF, REVENUE AND EXPENSES PER BOOKS

NET INVESTMENT INCOME

FOREIGN TAX PAID EXCISE TAX

DESCRIPTION

576.

576.

TOTALS

576.

576.

ATTACHMENT 3 PAGE 24

- OTHER EXPENSES

PART I

FORM 990PF,

REVENUE AND DESCRIPTION INVESTMENT FEES

INCOME 3,298. NET INVESTMENT EXPENSES
PER BOOKS
3, 298. 3,298.

3,298.

TOTALS

ATTACHMENT 4

ATTACHMENT 4 PAGE 25

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59-7218371

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION

CORPORATE STOCKS

ENDING BOOK VALUE

ENDING FMV

1,550,259.

1,550,259.

1,501,486.

1,501,486.

TOTALS

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FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	ICERS, DIRECTORS, AND TRUSTEES		ATTACH	ATTACHMENT 6
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
ALAN J. GREEN 2961 SCOTT MILL LANE JACKSONVILLE, FL 32223	TRUSTEE 1.00	O	0	0
PAMELA L. GREEN 2961 SCOTT MILL LANE JACKSONVILLE, FL 32223	TRUSTEE 1.00	0	0	0
NANCY L. HANNA 2961 SCOTT MILL LANE JACKSONVILLE, FL 32223	TRUSTEE 1.00	0	0	0
	GRAND TOTALS	0	0	0

ATTACHMENT 7

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ST. JOHNS RIVER KEEPER 2800 UNIVERSITY BLVD. N JACKSONVILLE, FL 32211	N/A 501 (C) (3)	GENERAL FUND	1,500.
FIRST COAST NO MORE HOMELESS PETS 6817 NORWOOD AVENUE JACKSONVILLE, FL 32208	501(C)(3)	GENERAL FUND	4,500.
HOPE HAVEN CHILDREN'S CLINIC 4600 BEACH BOULEVARD JACKSONVILLE, FL 32207	501(C)(3)	GENERAL FUND	1,000.
JACKSONVILLE HUMANE SOCIETY 8464 BEACH BLVD JACKSONVILLE, FL 32216	501(C)(3)	GENERAL FUND	2,500.
HUBBARD HOUSE 8012 LEM TURNER ROAD JACKSONVILLE, FL 32208	501 (C) (3)	GENERAL FUND	4,500.
CHILDREN'S HOME SOCIETY OF FLORIDA 1485 S. SEMORAN BLVD., SUITE 1448 WINTER PARK, FL 32792	501(C)(3)	GENERAL FUND	2,000.

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FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
SALVATION ARMY OF NE FLORIDA 328 N. OCEAN STREET JACKSONVILLE, FL 32202	501 (C) (3)	GENERAL FUND	1,500.
CITY RESCUE MISSION 5343 NORMANDY BOULEVARD JACKSONVILLE, FL 32205	501(C)(3)	GENERAL FUND	. 500.
WOLFSONS CHILDREN'S HOSPITAL 800 PRUDENTIAL DRIVE JACKSONVILLE, FL 32207	501(C)(3)	GENERAL FUND	7,800.
HABITAT FOR HUMANITY 2404 HUBBARD ST JACKSONVILLE, FL 32206	501 (C) (3)	GENERAL FUND	1,500.
TRINITY RESCUE MISSION 622 WEST UNION STREET JACKSONVILLE, FL 32202	501(C)(3)	GENERAL FUND	5,000.
COMMUNITY CONNECTIONS 327 EAST DUVAL STREET PO BOX 41086 JACKSONVILLE, FL 32203	501(C)(3)	GENERAL FUND	4,500.

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FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
JEWISH FAMILY & COMMUNITY SERVICES 6261 DUPONT STATION COURT, EAST JACKSONVILLE, FL 32217	501(C)(3)	GENERAL FUND	1,000.
CARE P.O. BOX 7039 MERRIFIELD, VA 22116	N/A 501(C)(3)	GENERAL FUND	5,000.
COMMUNITY HOSPICE FOUNDATION 4266 SUNBEAM ROAD JACKSONVILLE, FL 32257	N/A 501(C)(3)	GENERAL FUND	1,500.
DOCTORS WITHOUT BORDERS 333 7TH AVENUE, 2ND FLOOR NEW YORK, NY 10001-5004	N/A 501(C)(3)	GENERAL FUND	1,000.
FLORIDA SCHOOL FOR THE DEAF AND THE BLIND 207 N. SAN MARCO AVENUE SAINT AUGUSTINE, FL 32084	N/A 501(C)(3)	GENERAL FUND	2,500.
HAVEN HORSE RANCH 7333 COUNTY ROAD 208 ST. AUGUSTINE, FL 32092	N/A 501(C)(3)	GENERAL FUND	750.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

AMOUNT	1,000.	1,500.	250.	2,000.	5,000.	1,500.
PURPOSE OF GRANT OR CONTRIBUTION	GENERAL FUND	GENERAL FUND	GENERAL FUND	GENERAL FUND	GENERAL FUND	GENERAL FUND
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	N/A 501(C)(3)	N/A 501(C)(3)	N/A 501(C)(3)	N/A 501(C)(3)	501 (C) (3)	N/A 501(C)(3)
RECIPIENT NAME AND ADDRESS	INTERNATIONAL RESCUE COMMITTEE 122 EAST 42ND STREET NEW YORK, NY 10168	JACKSONVILLE 200 370 200 PARKWAY JACKSONVILLE, FL 32218	NATIONAL MS SOCIETY OF NORTH EAST FLORIDA 4237 SALISBURY RD # 406 JACKSONVILLE, FL 32216	SAFE PET RESCUE P.O. BOX 840215 ST. AUGUSTINE, FL 32080	SECOND HARVEST NORTH FLORIDA 1502 JESSIE STREET JACKSONVILLE, FL 32206	SPECIAL OLYMPICS 3712 BENSON DRIVE, SUITE 201 RALEIGH, NC 27609

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	AMOUNT	2,500.	1,030.	1,500.	1,000.	2,500.
	PURPOSE OF GRANT OR CONTRIBUTION	GENERAL FUND	GENERAL FUND	GENERAL FUND	GENERAL FUND	GENERAL FUND
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	FOUNDATION STATUS OF RECIPIENT	N/A 501(C)(3)	N/A 501(C)(3)	N/A 501(C)(3)	N/A 501(C)(3)	N/A 501(C)(3)
	RECIPIENT NAME AND ADDRESS	CHILDREN'S CHRISTMAS PARTY OF JACKSONVILLE P.O. BOX 5338 JACKSONVILLE, FL 32247-5338	WORLD FOOD PROGRAM USA 1819 L STREET, NW SUITE 900 WASHINGTON, DC 20036	WOMEN'S CENTER OF JACKSONVILLE 5644 COLCORD AVENUE JACKSONVILLE, FL 32211	WORLD WILDLIFE FUND 1250 24TH STREET, N.W P.O. BOX 97180 WASHINGTON, DC 20090-7180	WOUNDED WARRIOR PROJECT 4899 BELFORT RD, SUITE 300 JACKSONVILLE, FL 32256

TOTAL CONTRIBUTIONS PAID

77,330.

ATTACHMENT 7 PAGE 32

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