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Form **990-PF**

Department of the Treasury  
Internal Revenue Service

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**

For calendar year 2011, or tax year beginning 06-01-2011 , and ending 05-31-2012

G Check all that apply

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

Name of foundation  
THE BERNARD A EGAN FOUNDATION INC

**A Employer identification number**  
65-0501660

Number and street (or P O box number if mail is not delivered to street address)  
1900 OLD DIXIE HIGHWAY

Room/suite

**B Telephone number** (see page 10 of the instructions)  
(772) 465-7555

City or town, state, and ZIP code  
FORT PIERCE, FL 34946

**C** If exemption application is pending, check here ☐

**D 1.** Foreign organizations, check here ☐

**2.** Foreign organizations meeting the 85% test, check here and attach computation ☐

**I** Fair market value of all assets at end of year (from Part II, col. (c), line 16)  
\$ 40,397,848

**J** Accounting method ☒ Cash ☐ Accrual  
☐ Other (specify) \_\_\_\_\_  
(Part I, column (d) must be on cash basis.)

**E** If private foundation status was terminated under section 507(b)(1)(A), check here ☐

**F** If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

**H** Check type of organization ☒ Section 501(c)(3) exempt private foundation  
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	<b>1</b> Contributions, gifts, grants, etc , received (attach schedule)	28,305,048			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B				
	<b>3</b> Interest on savings and temporary cash investments	3,140	3,140		
	<b>4</b> Dividends and interest from securities. . . . .	603,568	603,568		
	<b>5a</b> Gross rents . . . . .				
	<b>b</b> Net rental income or (loss) _____				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	329,217			
	<b>b</b> Gross sales price for all assets on line 6a <u>2,288,321</u>				
	<b>7</b> Capital gain net income (from Part IV, line 2) . . . .		329,217		
	<b>8</b> Net short-term capital gain . . . . .				
	<b>9</b> Income modifications . . . . .				
	<b>10a</b> Gross sales less returns and allowances				
	<b>b</b> Less Cost of goods sold . . . . .				
Operating and Administrative Expenses	<b>c</b> Gross profit or (loss) (attach schedule) . . . . .				
	<b>11</b> Other income (attach schedule) . . . . .				
	<b>12 Total.</b> Add lines 1 through 11 . . . . .	29,240,973	935,925		
	<b>13</b> Compensation of officers, directors, trustees, etc				
	<b>14</b> Other employee salaries and wages . . . . .				
	<b>15</b> Pension plans, employee benefits . . . . .				
	<b>16a</b> Legal fees (attach schedule). . . . .				
	<b>b</b> Accounting fees (attach schedule). . . . .	1,050			
	<b>c</b> Other professional fees (attach schedule) . . . . .	101,970	101,970		
	<b>17</b> Interest . . . . .	10,780	10,780		
	<b>18</b> Taxes (attach schedule) (see page 14 of the instructions)	20,166			
	<b>19</b> Depreciation (attach schedule) and depletion . . . .				
	<b>20</b> Occupancy . . . . .				
	<b>21</b> Travel, conferences, and meetings . . . . .				
	<b>22</b> Printing and publications . . . . .				
	<b>23</b> Other expenses (attach schedule). . . . .	59,814	59,693		
	<b>24 Total operating and administrative expenses.</b>				
	Add lines 13 through 23 . . . . .	193,780	172,443		0
	<b>25</b> Contributions, gifts, grants paid . . . . .	562,444			562,444
	<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	756,224	172,443		562,444
	<b>27</b> Subtract line 26 from line 12				
	<b>a Excess of revenue over expenses and disbursements</b>	28,484,749			
	<b>b Net investment income</b> (if negative, enter -0-)		763,482		
	<b>c Adjusted net income</b> (if negative, enter -0-)				

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

Cat No 11289X

Form **990-PF** (2011)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing . . . . .			
	2	Savings and temporary cash investments . . . . .	2,574,164	2,641,886	2,641,886
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .			
	c	Investments—corporate bonds (attach schedule). . . . .			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .	10,491,816	38,908,843	37,755,962
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
Liabilities	15	Other assets (describe ▶ _____)			
	16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	13,065,980	41,550,729	40,397,848
	17	Accounts payable and accrued expenses . . . . .			
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons			
Net Assets or Fund Balances	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ _____)			
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .		0	
		<b>Foundations that follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
		<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	27	Capital stock, trust principal, or current funds . . . . .			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	13,065,980	41,550,729	
	30	<b>Total net assets or fund balances</b> (see page 17 of the instructions) . . . . .	13,065,980	41,550,729	
	31	<b>Total liabilities and net assets/fund balances</b> (see page 17 of the instructions) . . . . .	13,065,980	41,550,729	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return) . . . . .	1	13,065,980
2	Enter amount from Part I, line 27a . . . . .	2	28,484,749
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3 . . . . .	4	41,550,729
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . .	6	41,550,729

Part IV

Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a See Additional Data Table				
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table			
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	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a See Additional Data Table			
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 }	2	329,217
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8 . . . . .		3	-18,012

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No  
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2010	321,441	11,298,098	0 028451
2009	198,550	6,457,465	0 030747
2008	257,313	3,973,917	0 064750
2007	250,000	5,348,574	0 046741
2006	172,675	5,107,804	0 033806

2 Total of line 1, column (d). . . . .	2	0 204495
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 040899
4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5. . . . .	4	32,077,164
5 Multiply line 4 by line 3. . . . .	5	1,311,924
6 Enter 1% of net investment income (1% of Part I, line 27b). . . . .	6	7,635
7 Add lines 5 and 6. . . . .	7	1,319,559
8 Enter qualifying distributions from Part XII, line 4. . . . .	8	562,444

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions on page 18

Part VIExcise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a		Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1			
		Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)			
b		Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .		1	15,270
c		All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2		Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2	
3		Add lines 1 and 2. . . . .		3	15,270
4		Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	
5		Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- . . . . .		5	15,270
6		Credits/Payments			
a		2011 estimated tax payments and 2010 overpayment credited to 2011	6a	14,097	
b		Exempt foreign organizations—tax withheld at source . . . . .	6b		
c		Tax paid with application for extension of time to file (Form 8868)	6c	5,000	
d		Backup withholding erroneously withheld . . . . .	6d		
7		Total credits and payments Add lines 6a through 6d. . . . .		7	19,097
8		Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached		8	
9		Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . . . . .		9	
10		Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. . . . .		10	3,827
11		Enter the amount of line 10 to be Credited to 2012 estimated tax <input type="checkbox"/> 3,827	Refunded <input type="checkbox"/>	11	

Part VII-AStatements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		Yes	No
		1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? . . . . .			No
	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.			
c	Did the foundation file Form 1120-POL for this year? . . . . .	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . .	2		No
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . . . . .	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . .	5		No
	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			
	• 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	Yes	
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	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) <input type="checkbox"/> _____			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV . . . . .	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		No

Part VII-A

Statements Regarding Activities *(continued)*

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions).	11		No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>N/A</b>	13	Yes	
14	The books are in care of <b>JEFFREY A HURWITZ</b> Telephone no <b>(772) 465-7555</b> Located at <b>1900 OLD DIXIE HIGHWAY FORT PIERCE FL</b> ZIP +4 <b>34946</b>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year.	15		
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes", enter the name of the foreign country				

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (6) Agree to pay money or property to a government official? ( <b>Exception.</b> 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 ). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	1b		
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?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see page 20 of the instructions ).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
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? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011.</i> )	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(3) Provide a grant to an individual for travel, study, or other similar purposes?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(4) Provide a grant to an organization other than a charitable, etc , organization described in section 509(a)(1 ), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions).		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here.		5b		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d).</i>				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <i>If "Yes" to 6b, file Form 8870.</i>		6b		No
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?				
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		7b		

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. . . . .		

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see page 23 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See page 24 of the instructions.	
3	
Total. Add lines 1 through 3. . . . .	



Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities. . . . .	1a	24,792,496
b	Average of monthly cash balances. . . . .	1b	7,773,153
c	Fair market value of all other assets (see page 24 of the instructions). . . . .	1c	0
d	Total (add lines 1a, b, and c). . . . .	1d	32,565,649
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	
3	Subtract line 2 from line 1d. . . . .	3	32,565,649
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25 of the instructions). . . . .	4	488,485
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	32,077,164
6	Minimum investment return. Enter 5% of line 5. . . . .	6	1,603,858

Part XI

Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

1	Minimum investment return from Part X, line 6. . . . .	1	1,603,858
2a	Tax on investment income for 2011 from Part VI, line 5. . . . .	2a	15,270
b	Income tax for 2011 (This does not include the tax from Part VI ). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	15,270
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	1,588,588
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	
5	Add lines 3 and 4. . . . .	5	1,588,588
6	Deduction from distributable amount (see page 25 of the instructions). . . . .	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	1,588,588

Part XII

Qualifying Distributions (see page 25 of the instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	1a	562,444
b	Program-related investments—total from Part IX-B. . . . .	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required). . . . .	3a	
b	Cash distribution test (attach the required schedule). . . . .	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	562,444
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see page 26 of the instructions). . . . .	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4. . . . .	6	562,444
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years			

Part XIII

Undistributed Income (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 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 20__, 20__, 20__			
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 ▶ \$ 562,444			
a	Applied to 2010, but not more than line 2a			
b	Applied to undistributed income of prior years (Election required—see page 26 of the instructions)			
c	Treated as distributions out of corpus (Election required—see page 26 of the instructions). . .			
d	Applied to 2011 distributable amount. . . . .			
e	Remaining amount distributed out of corpus			
5	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:			
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5			
b	Prior years' undistributed income Subtract line 4b from line 2b. . . . .			
c	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .			
d	Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions. . .			
e	Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions. . . . .			
f	Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2011. . . . .			
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions). . . . .			
8	Excess distributions carryover from 2006 not applied on line 5 or line 7 (see page 27 of the instructions). . . . .			
9	Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a. . . . .			
10	Analysis of line 9			
a	Excess from 2007. . . . .			
b	Excess from 2008. . . . .			
c	Excess from 2009. . . . .			
d	Excess from 2010. . . . .			
e	Excess from 2011. . . . .			

Part XIVPrivate Operating Foundations (see page 27 of the instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling.

b

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

☐ 4942(j)(3) or ☐ 4942(j)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.	Tax year	Prior 3 years			(e) Total
		(a) 2011	(b) 2010	(c) 2009	(d) 2008	
b	85% of line 2a					
c	Qualifying distributions from Part XII, line 4 for each year listed.					
d	Amounts included in line 2c not used directly for active conduct of exempt activities.					
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c.					
3	Complete 3a, b, or c for the alternative test relied upon					
a	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties).					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					

Part XVSupplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see page 27 of the instructions.)

1

Information Regarding Foundation Managers:

a

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a

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

b

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

c

Any submission deadlines

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)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total . . . . .			3a	562,444
b Approved for future payment				
Total . . . . .			3b	

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See page 28 of the instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> _____					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . . .					
<b>3</b> Interest on savings and temporary cash investments			14	3,140	
<b>4</b> Dividends and interest from securities. . . . .			14	603,568	
<b>5</b> Net rental income or (loss) from real estate					
<b>a</b> Debt-financed property. . . . .					
<b>b</b> Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .					
<b>8</b> Gain or (loss) from sales of assets other than inventory			18	329,217	
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory. . .					
<b>11</b> Other revenue <b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>12</b> Subtotal. Add columns (b), (d), and (e). . . . .				935,925	
<b>13 Total.</b> Add line 12, columns (b), (d), and (e). . . . .					935,925

[illegible]

<b>1</b>	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?	<b>Yes</b>	<b>No</b>
<b>a</b>	Transfers from the reporting foundation to a noncharitable exempt organization of		
	<b>(1)</b> Cash. . . . .	<b>1a(1)</b>	<b>No</b>
	<b>(2)</b> Other assets. . . . .	<b>1a(2)</b>	<b>No</b>
<b>b</b>	Other transactions		
	<b>(1)</b> Sales of assets to a noncharitable exempt organization. . . . .	<b>1b(1)</b>	<b>No</b>
	<b>(2)</b> Purchases of assets from a noncharitable exempt organization. . . . .	<b>1b(2)</b>	<b>No</b>
	<b>(3)</b> Rental of facilities, equipment, or other assets. . . . .	<b>1b(3)</b>	<b>No</b>
	<b>(4)</b> Reimbursement arrangements. . . . .	<b>1b(4)</b>	<b>No</b>
	<b>(5)</b> Loans or loan guarantees. . . . .	<b>1b(5)</b>	<b>No</b>
	<b>(6)</b> Performance of services or membership or fundraising solicitations. . . . .	<b>1b(6)</b>	<b>No</b>
<b>c</b>	Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .	<b>1c</b>	<b>No</b>
<b>d</b>	If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received.		

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . ☐ Yes ☒ No

<b>b</b> If "Yes," complete the following schedule		
<b>(a)</b> Name of organization	<b>(b)</b> Type of organization	<b>(c)</b> Description of relationship

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge				
	*****			2013-01-13	*****
	Signature of officer or trustee			Date	Title
	Paid Preparer's Use Only	Preparer's Signature ▶ HEATHER K MCDONOUGH		Date  2013-01-15	Check if self-employed ▶ <input checked="" type="checkbox"/>
		Firm's name ▶ BERMAN HOPKINS WRIGHT LAHAM CPAS & ASSOC 8035 SPYGLASS HILL RD		Firm's EIN ▶	
Firm's address ▶ MELBOURNE, FL 32940		Phone no (321) 757-2020			

May the IRS discuss this return with the preparer shown above? See instructions . . . . . ☐ Yes ☒ No

<div>Schedule B</div> <div>(Form 990, 990-EZ, or 990-PF)</div> <div>Department of the Treasury Internal Revenue Service</div>	<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF.</div>	OMB No 1545-0047
		2011

<div>Name of organization</div> <div>THE BERNARD A EGAN FOUNDATION INC</div>	<div>Employer identification number</div> <div>65-0501660</div>
--	---

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<div><input type="checkbox"/> 501(c)( ) (enter number) organization</div> <div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation</div> <div><input type="checkbox"/> 527 political organization</div>
Form 990-PF	<div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div> <div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div> <div><input type="checkbox"/> 501(c)(3) taxable private foundation</div>

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—

☒ 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<sup>1</sup>/<sub>3</sub>% 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, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. . . . . ▶ \$ \_\_\_\_\_

**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 in the heading of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

<b>Name of organization</b> THE BERNARD A EGAN FOUNDATION INC	<b>Employer identification number</b> 65-0501660
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Part I

Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	EGAN FAMILY CHARITABLE LD ANN TR 1900 OLD DIXIE HIGHWAY  FORT PIERCE, FL 34946	\$ 28,305,048	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/>  (Complete Part II if there is a noncash contribution )
—		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
—		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
—		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
—		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
—		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
—		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )





<b>Name of organization</b> THE BERNARD A EGAN FOUNDATION INC	<b>Employer identification number</b> 65-0501660
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Part III

**Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year.** (Complete columns (a) through (e) and the following line entry )  
For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc , contributions of **\$1,000 or less** for the year (Enter this information once See instructions ) ➤ \$  
Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div>(e) Transfer of gift</div>		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div>	<div></div>	
	<div></div>	<div></div>	
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div>(e) Transfer of gift</div>		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div>	<div></div>	
	<div></div>	<div></div>	
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div>(e) Transfer of gift</div>		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div>	<div></div>	
	<div></div>	<div></div>	
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div>(e) Transfer of gift</div>		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div>	<div></div>	
	<div></div>	<div></div>	
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div>(e) Transfer of gift</div>		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div>	<div></div>	
	<div></div>	<div></div>	

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 65-0501660  
**Name:** THE BERNARD A EGAN FOUNDATION INC

**Form 990PF - Special Condition Description:**

<b>Special Condition Description</b>
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Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
INVESCO GLOBAL CORE EQUITY FUND CL A	P	2009-11-12	2011-09-15
INVESCO GLOBAL CORE EQUITY FUND CL A	P	2009-12-10	2011-09-15
INVESCO GLOBAL CORE EQUITY FUND CL A	P	2010-12-10	2011-09-15
INVESCO GLOBAL CORE EQUITY FUND CL A	P	2010-12-10	2011-09-15
INVESCO GLOBAL CORE EQUITY FUND CL A	P	2011-05-18	2011-09-15
INVESCO GLOBAL CORE EQUITY FUND CL A	P	2011-05-18	2011-09-15
INVESCO GLOBAL CORE EQUITY FUND CL A	P	2011-05-18	2011-09-15
INVESCO GLOBAL CORE EQUITY FUND CL A	P	2011-05-18	2011-09-15
INVESCO GLOBAL CORE EQUITY FUND CL A	P	2011-05-18	2011-09-15
NOVO-NORDISK A S ADR	P	2011-08-26	2012-02-08
KELLOGG CO COM	P	2011-08-26	2012-02-15
BIO-RAD LABS INC CL A	P	2004-06-08	2012-04-04






Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
444,930		499,998	-55,068
7,906		8,774	-868
12,411		15,541	-3,130
23		28	-5
9,218		10,738	-1,520
12		14	-2
12		14	-2
90,047		104,889	-14,842
10		12	-2
6,722		5,088	1,634
15,004		15,147	-143
1,412,486		1,298,861	113,625

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-55,068
			-868
			-3,130
			-5
			-1,520
			-2
			-2
			-14,842
			-2
			1,634
			-143
			113,625

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
BERNADETTE EMERICK 	TRUSTEE/PRES 0 00	0	0	0
465 12TH SE PLACE VERO BEACH,FL 32962				
JB EGAN III 	TRUSTEE/VP 0 00	0	0	0
4631 9TH PLACE VERO BEACH,FL 32966				
GREGORY P NELSON 	TRUSTEE/SEC 0 00	0	0	0
1806 OCEAN DRIVE VERO BEACH,FL 32963				
JJ GILET 	TRUSTEE/TREA 0 00	0	0	0
402 SPYGLASS LANE VERO BEACH,FL 32963				
CATHERINE ROHM 	TRUSTEE/A TR 0 00	0	0	0
2627 N INDIAN RIVER DRIVE FORT PIERCE,FL 34946				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
SAMARITAN CENTER3650 41ST STREET VERO BEACH,FL 32967			BAE GOLF TOURNAMENT	9,000
LC PASTORAL SERVICES601 N HILLSIDE DRIVE HILLSIDE,IL 60162			PASTORAL ASSISTANCE	1,000
TEAM HOLE IN THE WALL555 LONG WHARF DRIVE NEW HAVEN,CT 06511			CAMPS	750
SUBSTANCE AWARENESS COUNCIL OF IRC1507 20TH STREET VERO BEACH,FL 32960			EVENT SPONSOR	600
ST ANASTASIA SCHOOL ENDOWMENT INC401 SOUTH 33RD STREET FORT PIERCE,FL 34947			GALA EVENT FUNDRAISER	500
THE SAFEWAY FOUNDATION5918 STONERIDGE MALL ROAD PLEASANTON,CA 94588			BREAST CANCER CAMPAIGN	2,000
FL K OF C CHARITIES INCHELPING LI11940 LITTLE CREEK LANE JACKSONVILLE,FL 32223			HELPING LIFE FUND	250
MIAMI DOLPHINS FOUNDATION 347 DON SHULA DRIVE MIAMI GARDENS,FL 33056			CANCER RESEARCH PROGRAM -SYLVESTER C	500
SAMARITAN CENTER3650 41ST STREET VERO BEACH,FL 32967			SOUP BOWL	200
TOYS FOR TOTSPO BOX 1811 FORT PIERCE,FL 32954			GENERAL CONTRIBUTION	500
APOSTOLIC LIFE COMMUNITY OF PRIESTS2926 N WILLIAMS AVENUE PORTLAND,OR 97227			FR MARK MLAY'S TANZANIA ORPHANAGE	1,000
FLORIDA CITRUS HALL OF FAME PO BOX 900 WINTER HAVEN,FL 33882			GENERAL CONTRIBUTION	500
INDIAN RIVER HABITAT FOR HUMANITY4568 N US HIGHWAY 1 VERO BEACH,FL 32969			GENERAL CONTRIBUTION	500
UNITED WAY OF ST LUCIE CO 4800 S US 1 FORT PIERCE,FL 34982			ANNUAL CAMPAIGN	7,500
UNITED WAY OF INDIAN RIVER COPO BOX 1960 VERO BEACH,FL 32961			ANNUAL CAMPAIGN	7,500
INDIAN RIVER COUNTY HEALTHY START C1615 10TH AVENUE VERO BEACH,FL 32960			DANCING WITH VERO STARS FUNDRAISER	1,000
AMERICAN CANCER SOCIETY 3375 20TH STREET SUITE 1 VERO BEACH,FL 32960			RESTRICTED TREASURE COAST PROGRAMS	10,000
HOLY CROSS GOLF TOURNAMENT 2605 KELLY DRIVE SEBASTIAN,FL 32958			CHURCH FUNDRAISER	4,000
KNIGHTS OF COLUMBUS CHARITIES INCONE COLUMBUS PLAZA NEW HAVEN,CT 06509			SHRINE - BLESSED JOHN PAUL II	10,000
KNIGHTS OF COLUMBUS COUNCIL 56291306 41ST AVENUE VERO BEACH,FL 32960			HANDICAPPED DRIVE	1,500
VETERANS COUNCIL OF INDIAN RIVER CO2525 ST LUCIE AVENUE VERO BEACH,FL 32960			VIETNAM MEMORIAL	500
FRIENDS OF HARBOR BRANCH (PAYABLE T5600 US 1 NORTH FORT PIERCE,FL 34946			CANCER RESEARCH PROGRAM	5,000
JOHN CARROLL CATHOLIC HIGH SCHOOL3402 DELAWARE AVENUE FORT PIERCE,FL 34947			HIGHER EDUCATION	15,000
JOHN CARROLL CATHOLIC HIGH SCHOOL3402 DELAWARE AVENUE FORT PIERCE,FL 34947			TUITION ASSISTANCE	3,000
JOHN CARROLL EDUCATIONAL FOUNDATION3402 DELAWARE AVENUE FORT PIERCE,FL 34947			GENERAL CONTRIBUTION	2,000
LEGIONARIES OF CHRIST SEMINARY590 COLUMBUS AVENUE THORNWOOD,NY 10594			SCHOLARSHIPS (2) NAMING	35,000
NOTRE DAME CATHOLIC MISSION217 NORTH US HIGHWAY 1 FORT PIERCE,FL 34950			HAITIAN EDUCATION	3,000
PAULIST FATHERS1225 20TH AVENUE VERO BEACH,FL 32960			FOR LOCAL RETIRED PRIESTS	5,000
REDLANDS CHRISTIAN MIGRANTS ASSOCIA402 W MAIN STREET IMMOKALEE,FL 34142			EDUCATION	7,500
ST HELEN CATHOLIC CHURCHP O BOX 2927 VERO BEACH,FL 32961			PERSPECTIVES PROGRAM	1,500



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
ST ANASTASIA CATHOLIC SCHOOL401 SOUTH 33RD STREET FORT PIERCE,FL 34947			EDUCATION	15,000
ST ANASTASIA CATHOLIC SCHOOL401 SOUTH 33RD STREET FORT PIERCE,FL 34947			TUITION ASSISTANCE	3,000
ST ANASTASIA SCHOOL ENDOWMENT INC401 SOUTH 33RD STREET FORT PIERCE,FL 34947			EDUCATION	1,500
ST FRANCES XAVIER HIGH SCHOOL30 WEST 16TH STREET NEWYORK,NY 10114			EDUCATION	15,000
ST HELEN CATHOLIC CHURCHP O BOX 2927 VERO BEACH,FL 32961			CATHOLIC TUITION ASSISTANCE- HIGH SC	3,000
ST HELEN CATHOLIC SCHOOLP O BOX 2927 VERO BEACH,FL 32961			EDUCATION	15,000
SERRA INTERNATIONAL FOUNDATIONP O BOX 5039 CHICAGO,IL 60680			CATHOLIC VOCATIONS	1,500
SPRING HILL COLLEGE4000 DAUPHIN STREET MOBILE,AL 36608			EDUCATION - SCHOLARSHIP FUND	1,500
TRINITY MISSIONS9001 NEW HAMPSHIRE AVENUE SILVER SPRING,MD 20903			SEMINARY	1,000
EQUESTRIAN ORDER OF THE HOLY SEPULC2955 RIDGELAKE DRIVE STE METAIRIE,LA 70002			AID & ASSISTANCE TO CHRISTIANS IN HO	900
HOLY CROSS CATHOLIC CHURCH PO BOX 999 INDIANTOWN,FL 34956			CATHOLIC CHURCH-BUILDING FUND	750
OUR LADY OF GUADALUPEPO BOX 9 FELLSMERE,FL 32948			CHRISTIAN EDUCATION & ASSIST	15,000
RELIGIOUS OF THE SACRED HEART OF MA50 WILSON PARK TARRYTOWN,NY 10591			RENOVATE MARYMOUNT CONVENT	10,000
ST ANASTASIA CATHOLIC CHURCH407 SOUTH 33RD STREET FORT PIERCE,FL 34947			CHURCH	15,000
ST HELEN CATHOLIC CHURCHP O BOX 2927 VERO BEACH,FL 32961			CHURCH	15,000
ST HELEN CATHOLIC CHURCHP O BOX 2927 VERO BEACH,FL 32961			FR TRI'S MISSION - VIETNAM	3,000
ST HELEN CATHOLIC CHURCHP O BOX 2927 VERO BEACH,FL 32961			FR JEAN'S HAITIAN MISSION	3,000
ST JOHN OF THE CROSS CATHOLIC CHUR2355 82ND AVENUE VERO BEACH,FL 32966			CHURCH	3,000
AMERICAN RED CROSS2506 17TH AVENUE VERO BEACH,FL 32960			2011 SPRING DISASTERS	1,000
BOYS AND GIRLS CLUB OF IRCP O BOX 643068 VERO BEACH,FL 32964			GENERAL CONTRIBUTION	1,000
BUREAU OF CATHOLIC INDIAN MISSIONS2021 H STREET NW WASHINGTON,DC 20006			AMERICAN INDIAN EDUCATION & ASSISTAN	15,000
CATHOLIC RELIEF SERVICES228 WLEXINGTON ST BALTIMORE,MD 21201			WORLDWIDE CATHOLIC SERVICES	3,000
HIBISCUS CHILDREN'S CENTER PO BOX 1742 VERO BEACH,FL 32961			CHILD ABUSE COUNSELING & SHELTER	1,500
HOMELESS FAMILY CENTER720 4TH STREETVERO BEACH VERO BEACH,FL 32962			HOMELESS SHELTER	3,000
INDIAN RIVER COMMUNITY FOUNDATIONPO BOX 643968 VERO BEA VERO BEACH,FL 32964			GENERAL CONTRIBUTION	750
KNIGHTS OF COLUMBUS CHARITIES INC1 COLUMBUS PLAZA NEW HAVEN,CT 06509			UNITED IN CHARITY CAMPAIGN	10,000
RESTORATION HOUSEPO BOX 2375FORT PIERCE FORT PIERCE,FL 34954			GENERAL CONTRIBUTION	1,000
ST FRANCIS MANOR OF VERO BEACH1750 20TH AVENUE VERO BEACH,FL 32960			LOW INCOME SENIOR APARTMENTS	10,500
ST JOSEPH'S REGIONAL MEDICAL CENTE315 EAST LINDSLEY ROAD CEDAR GROVE,NJ 07009			DESIGNATED FOR ST VINCENT NURSING H	5,000
ST HELEN CATHOLIC CHURCHPO BOX 2927 VERO BEACH,FL 32961			DIOCESAN SERVICE APPEAL	1,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ST VINCENT DE PAUL407 S 33RD STREET FORT PIERCE,FL 34947			GENERAL CONTRIBUTION	6,000
ST VINCENT DE PAUL SOCIETY1445 14TH AVENUE VERO BEACH,FL 32960			GENERAL CONTRIBUTION	6,000
SAMARITAN CENTER3650 41ST STREET VERO BEACH,FL 32967			HOMELESS SHELTER	67,500
SUNSHINE PHYSICAL THERAPY CLINIC1705 17TH AVENUE VERO BEACH,FL 32960			SCHOLARSHIP FOR FREE SERVICE	750
THE ARC OF ST LUCIE COUNTYPO BOX 1016 FORT PIERCE,FL 34954			HANDICAPPED DRIVE	750
TREASURE COAST FOOD BANK3051 INDUSTRIAL 25TH STRE FORT PIERCE,FL 34946			LOCAL HUNGER	1,500
YOUTH ON A MISSIONPO BOX 2927 VERO BEACH,FL 32961			SCHOLARSHIP CONTRIBUTION	2,500
AMERICAN CANCER SOCIETY3375 20TH STREET STE 100 VERO BEACH,FL 32960			GENERAL CONTRIBUTION	5,000
AMERICAN CANCER SOCIETY3375 20TH STREET STE 100 VERO BEACH,FL 32960			RELAY FOR LIFE	1,500
AMERICAN HEART ASSOCIATION11207 BLUE HERON BLVD N ST PETERSBURG,FL 33716			GENERAL CONTRIBUTION	10,000
HAITI CLINIC INC1962 26TH AVENUE VERO BEACH,FL 32960			GENERAL CONTRIBUTION	4,500
INDIAN RIVER MEDICAL CENTER FOUNDAT1000 36TH STREET VERO BEACH,FL 32960			SICU QUIET ROOM - BETTY & BERNARD EG	109,719
MENTAL HEALTH ASSOCIATION820 27TH PLACE VERO BEACH,FL 32960			LOCAL SERVICES	1,500
NEW HORIZONS4500 W MIDWAY ROAD FORT PIERCE,FL 34981			4 OUR KIDS CAMPAIGN - CHILDREN MENTA	750
OUR FAMILY FOUNDATIONPO BOX 156 CARLISLE,PA 17013			VARIOUS CHILDREN'S MEDICAL	12,500
VISITING NURSE ASSOCIATION (VNA FOU1110 35TH LANE VERO BEACH,FL 32960			LOCAL SERVICES/PARADISE UNDER THE PA	2,500
OCEAN RESEARCH AND CONSERVATION ASS1420 SEAWAY DRIVE FORT PIERCE,FL 34949			LAND TO SEA INITIATIVE/STUDENT URBAN	2,300
HARVEST FOOD AND OUTREACH CENTER1360 28TH STREET VERO BEACH,FL 32960			INDIAN RIVER LOCAL HUNGER	2,300
THE MOUNTAIN FUND2716 SAN PEDRO NESUITE D ALBUQUERQUE,NM 87110			BENEFIT EL SALVADOR CAMPAIGN	2,300
CORNERSTONE ACADEMYPO BOX 357430 GAINESVILLE,FL 32635			TUITION ASSISTANCE	2,300
CAMP HOBE' INCORPORATEDPO BOX 520755 SALT LAKE CITY,UT 84152			CAMPER'S TUITION	800
DIOCESE OF PALM BEACHPO BOX 109650 PALM BEACH GARDENS,FL 33410			CATHOLIC CHARITIES	1,500
MARCH OF DIMES112 43RD AVENUE SW VERO BEACH,FL 32968			GENERAL CONTRIBUTION	750
JUVENILE DIABETES RESEARCH FOUNDATI8035 SPYGLASS HILL ROAD MELBOURNE,FL 32940			GENERAL CONTRIBUTION	1,500
EXCHANGE CLUB OF INDIAN RIVER FOUNDP VERO BEACH,FL 32961			PREVENTION OF CHILD ABUSE	500
RESTORATION HOUSEPO BOX 2375FORT PIERCE FORT PIERCE,FL 34954			FLORIDAY - DRUG/ALCOHOL REHAB	1,000
VARIOUS CHARITIES1900 OLD DIXIE HWY FORT PIERCE,FL 34946			ST VINCENT DE PAUL SOCIETY - MEMORI	2,525
<b>Total . . . . .</b>  <b>3a</b>				562,444

## TY 2011 Accounting Fees Schedule

**Name:** THE BERNARD A EGAN FOUNDATION INC

**EIN:** 65-0501660

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	1,050			

**TY 2011 Compensation Explanation****Name:** THE BERNARD A EGAN FOUNDATION INC**EIN:** 65-0501660

Person Name	Explanation
BERNADETTE EMERICK	
JB EGAN III	
GREGORY P NELSON	
JJ GILET	
CATHERINE ROHM	

## TY 2011 Investments - Other Schedule

**Name:** THE BERNARD A EGAN FOUNDATION INC

**EIN:** 65-0501660

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
BOND FUNDS		7,144,538	6,870,140
EQUITY FUNDS		7,876,011	7,567,925
OTHER FUNDS		13,516,253	13,535,493
BONDS		2,543,579	2,586,617
EQUITIES		4,457,766	4,351,286
COMMODITY FUNDS		3,370,696	2,844,501

**TY 2011 Other Expenses Schedule****Name:** THE BERNARD A EGAN FOUNDATION INC**EIN:** 65-0501660

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
ANNUAL REPORT FEE	61			
ADMIN FEES	59,693	59,693		
BOARD EXPENSE	60			

## TY 2011 Other Professional Fees Schedule

**Name:** THE BERNARD A EGAN FOUNDATION INC

**EIN:** 65-0501660

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
GENSPRING/SARATOGA MGMT FEE	101,970	101,970		

# TY 2011 Taxes Schedule

**Name:** THE BERNARD A EGAN FOUNDATION INC

**EIN:** 65-0501660

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX WITHHELD	166			
TAX ON INVESTMENT INCOME	20,000			