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Form 990-PF

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

| | | t of the Treasury | Nata The fee | | reated as a Privat | e Founda | ation | -tina raaiiiramaata | 2012 |
|---------------------------------------|---------------------|--|---|----------------|--|--|--|---|--|
| | | venue Service | tax year beginning | indation may i | be able to use a copy of this | and e , | | rung requirements | Open to public Inspection |
| | | foundation | tax year beginning | | | , 4114 0 | | A Employer Identification | number |
| В | T-1 | LO/WINN- | DIXIE FOU | NDATIO | N. INC. | | | 59-0995428 | |
| | | | number if mail is not de | | - · | | Room/suite | B Telephone number | |
| _5 | 05 | 0 EDGEWO | OD COURT | | | | | 904-783-55 | 99 |
| • | | own, state, and ZII KSONVILL | | 254 | | | | C If exemption application is pe | ending, check here . |
| | | all that apply | Initial return | n | Initial return of a fo | rmer public o | charity | D 1. Foreign organizations | , check here |
| | | . an anat appro | Final return | | Amended return | , , , , , , , , , , , , , , , , , , , | , | | |
| | | | Address ch | ange | X Name change | | | 2. Foreign organizations mee check here and attach cor | eting the 85% test, putation |
| H | _ | type of organizati | | | empt private foundation | • | | E If private foundation stat | |
| <u> </u> | | | nonexempt charitable | J Accounti | Other taxable private foundating method Cash | X Accr | rual | under section 507(b)(1) | • |
| | | arket value of all a: Part II, col. (c), lii | ssets at end of year | | her (specify) | LZZ ACCI | uai | F If the foundation is in a 6 under section 507(b)(1)(| |
| | •\$ | | | | mn (d) must be on cash i | basis) | | Brider Section 507(b)(1)(| b), check liefe |
| | irt l | Analysis of Rev | renue and Expenses this in columns (b), (c), and the amounts in column (a | d (d) may not | (a) Revenue and expenses per books | (b) Net in | vestment ome | (c) Adjusted net | (d) Disbursements for chantable purposes |
| | 1 | | | | 1,722,895. | | | | (cash basis only) |
| | 2 | . — | fts, grants, etc., recei ne foundation is not required t | | | | | | |
| | 3 | Interest on savings cash investments | • | - | 105. | , ,,, | 105. | | STATEMENT 1 |
| | 4 | | terest from securities | | | | | | |
| 3 | 5a | Gross rents | | | | | | | , , , |
| 2013 | b | Net rental income of | r (loss) | | | | | | |
| ره دره | 6a | 62 Net gain or (loss) from sale of assets not on line 10 | | | | | | | ····· |
| Ę | b | Gross sales price fo assets on line 6a | rall | | , ., | | | | |
| <u>_</u> | 7 | | ome (from Part IV, line 2) | | | | 0. | | ······ |
| JUI Revenue | 8 | Net short-term ca | • | | _\\\ | -, , , , , , , , , , , , , , , , , , , | | | , , , , , , , , , , , , , , , , , , , |
| | y | Income modifica Gross sales less ret | tions _{ums} | | | | | | |
| 끶 | 10a | | | | , , , ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, | | ''' ' '' | | ' Hrr 7K |
| SCANNED | l | Less Cost of goods Gross profit or (I | | | | | | | |
| \mathcal{S} | 11 | Other income | | | | | | | <u> </u> |
| Ö | 12 | Total. Add lines | 1 through 11 | | 1,723,000. | | 105. | 0. | |
| | 13 | Compensation of of | ficers, directors, trustees | s, etc | 0. | | 0. | 0. | 0. |
| | 14 | | salaries and wages | | | | | | <u> </u> |
| Ø | 15 | Pension plans, e | mployee benefits | | | | | RECEIVE | $\frac{2}{100}$ |
| nse | 16a | Legal fees | •• | | | | | T 111 1 2 20 | 13 191 |
| хbе | b | Accounting fees | . СП | МТ 2 | 718. | | 0. | | 13 0. |
| ē Ē | ⁶ 17 | Other profession Interest | arrees 51 | rii Z | 710. | | | | 17 |
| Operating and Administrative Expenses | 18 | Taxes | | | | | | | |
| istr | 19 | Depreciation and | depletion | | | | | | |
| Ë | 20 | Occupancy | | | | | | | |
| PΑ | 21 | Travel, conference | ces, and meetings | •• | | | | | |
| and | 22 | Printing and pub | | | | | | | |
| gu | 23 | Other expenses | | 'МТ 3 | 36,988. | | 0. | 0. | 0. |
| rat | 24 | | and administrative | | 27 706 | | ^ | , | ^ |
| ŏ | - | • | ines 13 through 23 | | 37,706. 1,157,646. | | 0. | 0. | 0. 1,157,646. |
| - | 25 | Contributions, gr | - | | 1,13/,040. | | ······································ | <u> </u> | 1,137,040. |
| | 26 | Add lines 24 and | and disbursements. 25 | | 1,195,352. | | 0. | 0. | 1,157,646. |
| | 27 | Subtract line 26 | | | | | | | -,,,010. |
| | 1 | | over expenses and disbu | rsements | 527,648. | | | | |
| | I | | ncome (if negative, ent | | | | 105. | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · |
| | 1 | | OM8 (if negative, enter | | | | | 0. | |

| | | Ralance Shoots Attached schedules and amounts in the description | beginning of year | Ellu OI | year |
|-----------------------------|-------|--|--------------------|----------------|-----------------------|
| | an | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | 1,283,329. | 1,436,423. | 1,436,423. |
| | 1" | Savings and temporary cash investments | | | |
| | 1 | Accounts receivable | . , , | | |
| | - | Less allowance for doubtful accounts ▶ | | | |
| | 4 | Pledges receivable | | | |
| | 7 | Less allowance for doubtful accounts | i | 1 | |
| | _ ا | · · · · · · · · · · · · · · · · · · · | | | |
| | I - | Grants receivable | | - | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | |
| | | disqualified persons . | | | |
| | 7 | Other notes and loans receivable | | | |
| | | Less allowance for doubtful accounts | | | |
| ţ | 8 | Inventories for sale or use | | | |
| Assets | 9 | Prepaid expenses and deferred charges | L | | |
| Ä | 10a | Investments - U S and state government obligations | | | |
| | | Investments - corporate stock | | | |
| | | Investments - corporate bonds STMT 4 | 900. | 900. | 900. |
| | | Investments - land, buildings, and equipment basis | | | |
| | '' | | ļ | į | |
| | | Less: accumulated depreciation . | | | |
| | 1 | Investments - mortgage loans | | | |
| | | Investments - other | | | |
| | 14 | Land, buildings, and equipment basis | | 1 | |
| | Ì | Less: accumulated depreciation | | | |
| | 15 | Other assets (describe ► PREPAID TAXES) | 714. | 714. | 714. |
| | ŧ | | | | |
| | 16 | Total assets (to be completed by all filers) | 1,284,943. | 1,438,037. | 1,438,037. |
| | 17 | Accounts payable and accrued expenses | | ï | |
| | 18 | Grants payable | 374,554. | | |
| S | | Deferred revenue | | | |
| Liabilities | | Loans from officers, directors, trustees, and other disqualified persons | | | |
| ₫ | | Mortgages and other notes payable | | | |
| :" | | Other liabilities (describe) | | | |
| | 22 | Other habilities (describe | | | |
| | 22 | Total liabilities (add lines 17 through 22) | 374,554. | 0. | |
| _ | 23 | Total liabilities (add lines 17 through 22) | 3/1/3311 | | |
| | | Foundations that follow SFAS 117, check here | | | |
| ç | l | and complete lines 24 through 26 and lines 30 and 31. | | | |
| ဦ | | Unrestricted . | | | |
| ē | 25 | Temporarily restricted | | | |
| Ö | 26 | Permanently restricted | | | |
| Ĕ | | Foundations that do not follow SFAS 117, check here | | | |
| Ē | | and complete lines 27 through 31. | | | |
| S | 27 | Capital stock, trust principal, or current funds | 0. | 0. | |
| set | 28 | Paid-in or capital surplus, or land, bldg, and equipment fund | 0. | 0. | |
| As | 29 | Retained earnings, accumulated income, endowment, or other funds | 910,389. | 1,438,037. | |
| Net Assets or Fund Balances | | Total net assets or fund balances | 910,389. | 1,438,037. | |
| _ | | | | | |
| | 21 | Total liabilities and net assets/fund balances | 1,284,943. | 1,438,037. | |
| | | | | 2710070070 | |
| P | art | Analysis of Changes in Net Assets or Fund B | alances | | |
| 1 | Total | net assets or fund balances at beginning of year - Part II, column (a), line | 30 | | <u> </u> |
| | | t agree with end-of-year figure reported on prior year's return) | | 1 | 910,389. |
| 2 | | amount from Part I, line 27a | | 2 | 527,648. |
| | | r increases not included in line 2 (itemize) | | 3 | 0. |
| | | lines 1, 2, and 3 | | 4 | 1,438,037. |
| | | eases not included in line 2 (itemize) | | 5 | 0. |
| _ | | net assets or fund balances at end of year (line 4 minus line 5) - Part II, co | olumn (b), line 30 | | 1,438,037. |
| | | | | | |

Page 3

| (a) List and descr | ibe the kind | ses for Tax on Ind(s) of property sold (e g r common stock, 200 shs | , real estate, | | P | How ac - Purch - Dona | nase | (c) Date a | icquired ay, yr) | (d) Date sold (mo , day, yr) |
|---|----------------------------|--|-----------------|------------------------------------|---------------|-----------------------------|----------------|------------|---------------------------|-----------------------------------|
| 1a | | | · - | | | | | | | |
| b | | | | | | | | | | |
| <u>c</u> | | | <u></u> | | <u> </u> | | | | | |
| <u>d</u> | | | | | | | | | | |
| е | | - · · · · · · · · · · · · · · · · · · · | | <u> </u> | Щ, | | | | | |
| (e) Gross sales price | | preciation allowed (or allowable) | 137 | t or other basis xpense of sale | | | | | in or (loss (f) minus | (g) |
| a b | | | | | | | | | | 0 |
| C | | | | | | | | | | <u> </u> |
| d | | | | | | | | | | |
| е | | | | | | | | | | |
| Complete only for assets showin | g gain in co | olumn (h) and owned by t | he foundation | on 12/31/69 | | | (1) | Gains (Co | ol (h) gain | minus |
| (i) F M.V as of 12/31/69 | (j) | Adjusted basis | (k) Ex | cess of col (I) | | | | (k), buṫ n | ot less tha from col (| n -0-) or |
| | | 15 01 12/51/09 | Over | COI (j), II ally | | | | | | 0. |
| <u>a</u> b | | | | | | | | | | |
| C | | | | | | | | | | |
| d | | | | | | | | | | |
| e | | | | | | | | | | |
| | | Cif coun also enter | in Dort I line | 7 | 7 | | | | *** | |
| 2 Capital gain net income or (net ca | pital loss) | If gain, also enter If (loss), enter -0- | in Part I, line | 7 . | } | 2_ | | | | 0 |
| 3 Net short-term capital gain or (los | s) as define | ` | | | | | | | | |
| If gain, also enter in Part I, line 8, | | | - (0) | |] [| | | | | |
| If (loss), enter -0- in Part I, line 8 Part V Qualification U | | | | | | 3 | | | | 0. |
| f section 4940(d)(2) applies, leave th Was the foundation liable for the sect f "Yes," the foundation does not qual | ion 4942 ta fy under se | ax on the distributable ame | mplete this pa | rt | | _ | | | | Yes X No |
| 1 Enter the appropriate amount in e | ach colum | | structions be | fore making any e | | | | Т | | (d) |
| (a) Base period years Calendar year (or tax year beginnir | ıg ın) | (b) Adjusted qualifying dist | | Net value of no | (c) onchar | ritable-i | | | Distrit col_(b) div | oùtión ratio vided by col (c)) |
| 2011 | | 1,07 | 1,810. | | | | 2 , 766 | | | 1.525131 |
| 2010 | | | 0,000. | | | | 8,513 | | | 1.509408 |
| 2009 | | | 6,500. | | | | 7,988 | | | 2.316000 |
| 2008 | | | 6,800. | | | | 3,312 | | | 2.674894 |
| 2007 | | 1,45 | 3,183. | | | 71. | 1,778 | • | | 2.041624 |
| 2 Total of line 1, column (d) | | | | | | | | 2 | | 10.067057 |
| 3 Average distribution ratio for the 5 | -year base | period - divide the total o | n line 2 by 5, | or by the number | r of ye | ars | | | | |
| the foundation has been in exister | ice if less t | han 5 years | | | | | | 3 | | 2.013411 |
| 4 Enter the net value of noncharitab | le-use asse | ets for 2012 from Part X, I | ine 5 | | | | | 4 | _ | 679,676 |
| 5 Multiply line 4 by line 3 | | | | | | | | _5 | | 1,368,467 |
| 6 Enter 1% of net investment incom | ie (1% of P | art I, line 27b) | | | | | | 6 | | 1 |
| 7 Add lines 5 and 6 | | | | | | | | 7 | | 1,368,468 |
| 8 Enter qualifying distributions from | Part XII, li | ne 4 | | | | | | 8 | | 1,157,646 |
| If line 8 is equal to or greater than See the Part VI instructions | line 7, che | ck the box in Part VI, line | 1b, and comp | lete that part usir | ng a 19 | % tax r | ate | | | |

| | | | 95428 | | Page 4 |
|----|--|-------------|----------|-------|-------------|
| | ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 | ; - se | e instru | ictio | ns) |
| | Exempt operating foundations described in section 4940(d)(2), check here ▶ 🔲 and enter "N/A" on line 1 | | | | |
| | Date of ruling or determination letter (attach copy of letter if necessary-see instructions) | | | | _ |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 📖 and enter 1% | ᆜ | | | <u> 2.</u> |
| | of Part I, line 27b | | | | |
| | 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 | | | | <u>0.</u> |
| 3 | Add lines 1 and 2 | | | | 2. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | | | | <u>0.</u> |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- | | | | |
| 6 | Credits/Payments | | | | |
| | 2012 estimated tax payments and 2011 overpayment credited to 2012 6a 714. | | | | |
| | Exempt foreign organizations - tax withheld at source | | | | |
| | Tax paid with application for extension of time to file (Form 8868) | | | | |
| | Backup withholding erroneously withheld 6d | | | 7 | 14. |
| _ | Total credits and payments Add lines 6a through 6d | | | | 14. |
| 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 | +- | | 7 | 12. |
| | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2013 estimated tax 712 Refunded 11 | \neg | | | 0. |
| | Enter the amount of line 10 to be Credited to 2013 estimated tax ► 712 . Refunded ► 11 art VII-A Statements Regarding Activities | | | | |
| | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in | | | Vac | No |
| ıa | any political campaign? | | 1a | 163 | X |
| ь | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? | | 1b | | X |
| | If the answer is "Yes" to 1aor 1b, attach a detailed description of the activities and copies of any materials published or | | 1.5 | | - |
| | distributed by the foundation in connection with the activities. | | | | |
| c | Did the foundation file Form 1120-POL for this year? | | 10 | • | Х |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | | | |
| Ī | (1) On the foundation. > \$ O • (2) On foundation managers. > \$ 0 • | | | | |
| e | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | | | |
| Ĭ | managers > \$ 0. | | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | 2 | ſ | X |
| _ | If "Yes," attach a detailed description of the activities. | | 7 | | |
| 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 | 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? | N/A | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | 5 | | X |
| | If "Yes," attach the statement required by General Instruction T. | | , i | | |
| 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 | Х | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? | | 7 | Х | |
| | If "Yes," complete Part II, col. (c), and Part XV | | | | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) | | _ | | |
| | FL | | _ | | |
| b | olf the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) | | | | |
| | of each state as required by General Instruction G? If "No," attach explanation | | . 8b | Х | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar | | | | |
| | year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV | | 9 | | X |
| 10 | Did any persons become substantial contributors during the tax year? It 'Yes' attach a schedule listing their names and addresses | | 10 | | ΙX |

| | 990-PF (2012) BI-LO/WINN-DIXIE FOUNDATION, INC. 59-0995 | 428 | | <u> Page 5</u> |
|----|--|-----|-----|----------------|
| Pa | rt 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 | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Х | |
| | Website address ► N/A | | | |
| 14 | The books are in care of ▶ D. MICHAEL BYRUM Telephone no ▶904-78 | 3-5 | 000 | |
| | Located at ▶ 5050 EDGEWOOOD COURT, JACKSONVILLE, FL ZIP+4 ▶32 | 254 | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in fleu of Form 1041 - Check here | | ▶ | |
| | and enter the amount of tax-exempt interest received or accrued during the year | N | /A | |
| 16 | At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, | | Yes | No |
| | 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 the foreign | | | |
| | country | | | |
| Pa | rt 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. | 1 | 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? | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | | | |
| | (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" | Ì | | |
| | If the foundation agreed to make a grant to or to employ the official for a period after | 1 | | |
| | | | | |
| _ | | Ì | | |
| O | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | 4. | х | |
| | section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1b | A | |
| | 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 | | | Х |
| _ | before the first day of the tax year beginning in 2012? | 10 | | |
| 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 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning | | | |
| | before 2012? Yes X No | | | |
| | If "Yes," list the years ▶ | | | |
| þ | 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 | ļļ | |
| C | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | | |
| | <u> </u> | | | |
| 3a | 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 2012 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 2012) N/A | 3b | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | _4a | Ļ., | _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 2012? | 4b | l | <u>X</u> |

| Form 990-PF (2012) BI-LO/WINN-DIXIE FOUNDA | | Dameirale | 59-09954 | 28 | Page 6 |
|---|-------------------------------------|-------------------------|--|--|-------------|
| Part VII-B Statements Regarding Activities for Which | Form 4/20 May Be | Requirea (contin | ued) | | |
| 5a During the year did the foundation pay or incur any amount to | 40.457.330 | | [V] | | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section (2)) | | | es X No | | |
| (2) Influence the outcome of any specific public election (see section 4955), | , or to carry on, directly or indir | | es X No | | |
| any voter registration drive? | 0 | • = | | | |
| (3) Provide a grant to an individual for travel, study, or other similar purpose | | 11 | es X No | | |
| (4) Provide a grant to an organization other than a charitable, etc., organizat | ion described in section | | es X No | | |
| 509(a)(1), (2), or (3), or section 4940(d)(2)? | | | es 🔼 NO | | |
| (5) Provide for any purpose other than religious, charitable, scientific, literar | y, or educational purposes, or | | es X No | | |
| the prevention of cruelty to children or animals? | | • • — | es LALINO | | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u | | in Regulations | N7 / N | _ | |
| section 53 4945 or in a current notice regarding disaster assistance (see inst | · | - | N/A | 5b | |
| Organizations relying on a current notice regarding disaster assistance check | | | | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption | | -/- | l | | |
| expenditure responsibility for the grant? | | 1/A Y | es L No | | |
| If "Yes," attach the statement required by Regulations section 53.49 | | | | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, t | o pay premiums on | | w. | | |
| a personal benefit contract? | | . L Y | es X No | _ | ., |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a | personal benefit contract? | | - | 6b | X |
| If "Yes" to 6b, file Form 8870. | | | (B) | | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax | | Y | es X No | | |
| b If "Yes," did the foundation receive any proceeds or have any net income attri | | | N/A | 7b | |
| Part VIII Information About Officers, Directors, Trus Paid Employees, and Contractors | itees, Foundation Ma | anagers, Highly | У | | |
| List all officers, directors, trustees, foundation managers and their | r compensation | | | | |
| List all Officers, and eters, trastees, roundation managers and tree | (b) Title, and average | (c) Compensation | (d) Contributions to | (0) | Expense |
| (a) Name and address | hours per week devoted | (If not paid, | employee benefit plans and deferred | acco | ount, other |
| MARY KELLMANSON | to position PRESIDENT | enter -0-) | compensation | allo | owances |
| 5050 EDGEWOOD COURT | FRESIDENI | | | | |
| JACKSONVILLE, FL 32254 | 1.00 | 0. | 0. | | 0. |
| D. MICHAEL BYRUM | TREASURER | 0. | 0. | ├ | |
| 5050 EDGEWOOD COURT | TREASURER | | | į | |
| JACKSONVILLE, FL 32254 | 1.00 | 0. | 0. | | 0. |
| M. SANDLIN GRIMM | SECRETARY | - 0. | 0. | ├ | |
| 5050 EDGEWOOD COURT | BECKETAKI | | , | | |
| JACKSONVILLE, FL 32254 | 1.00 | 0. | 0. | | 0. |
| ANTHEA JONES | DIRECTOR | · · · · · | <u> </u> | | |
| 5050 EDGEWOOD COURT | DIRECTOR | | | | |
| JACKSONVILLE, FL 32254 | 1.00 | 0. | 0. | | ^ |
| 2 Compensation of five highest-paid employees (other than those in | | | <u> </u> | ــــــــــــــــــــــــــــــــــــــ | 0. |
| 2 Compensation of the inglicat-paid employees (other than those in | (b) Title, and average | Tenter HONE. | (d) Contributions to | (e) | Expense |
| (a) Name and address of each employee paid more than \$50,000 | hours per week | (c) Compensation | employee benefit plans and deferred | acco | ount, other |
| NONE | devoted to position | | compensation | and | owances |
| NOME | - | | | | |
| | | | | | |
| | \dashv | | | | |
| | | | | | |
| | - | | | | |
| | | | | | |
| | 7 | | • | | |
| | | | | | |
| | | | | | |
| Total number of other employees paid over \$50,000 | | | <u> </u> | ь | 0 |

| Form 990-PF (2012) BI-LO/WINN-DIXIE FOUNDATION, I | INC • 59-0 | 995428 Page 7 |
|---|---|------------------|
| Part VIII Information About Officers, Directors, Trustees, Four Paid Employees, and Contractors (continued) | ndation Managers, Highly | |
| 3 Five highest-paid independent contractors for professional services. If none, e | 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 | | ▶ 0 |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant s number of organizations and other beneficiaries served, conferences convened, research papers | tatistical information such as the produced, etc. | Expenses |
| 1N/A | | |
| 2 | | |
| | | |
| 3 | | |
| 4 | | |
| | | |
| Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year | r on lines 1 and 2 | Amount |
| 1 N/A | | |
| 2 | | |
| | | |
| All other program-related investments See instructions 3 | | |
| Total. Add lines 1 through 3 | > | 0. |

| Part 2 | Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations must complete this part. | ndations, | see instructions.) |
|---------------|---|---------------|--------------------|
| 1 Fair | market value of assets not used (or held for use) directly in carrying out chantable, etc., purposes: | | |
| a Aver | age monthly fair market value of securities | 1a | 0. |
| b Aver | age of monthly cash balances | 1b | 690,026. |
| c Fair | market value of all other assets | 10 | |
| d Tota | I (add lines 1a, b, and c) | 1d | 690,026. |
| e Redu | action claimed for blockage or other factors reported on lines 1a and | | |
| 1c (a | attach detailed explanation) | | |
| 2 Acqu | usition indebtedness applicable to line 1 assets | 2 | <u>0.</u> |
| 3 Subt | tract line 2 from line 1d | 3 | 690,026. |
| 4 Cash | deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 10,350. |
| 5 Net | value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 679,676. |
| 6 Mini | mum investment return. Enter 5% of line 5 | 6 | 33,984. |
| Part 2 | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part) | id certain | |
| 1 Mini | mum investment return from Part X, line 6 | 1 | 33,984. |
| | on investment income for 2012 from Part VI, line 5 | | |
| b Inco | me tax for 2012 (This does not include the tax from Part VI) | | |
| | lines 2a and 2b | 2c | 2. |
| 3 Disti | abutable amount before adjustments. Subtract line 2c from line 1 | 3 | 33,982. |
| 4 Reco | overies of amounts treated as qualifying distributions | 4 | 0. |
| 5 Add | lines 3 and 4 | 5 | 33,982. |
| 6 Dedi | uction from distributable amount (see instructions) | 6 | 0. |
| 7 Dist | ributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 33,982. |
| | Qualifying Distributions (see instructions) | | |
| | nunts paid (including administrative expenses) to accomplish charitable, etc., purposes | | 1 157 646 |
| - | enses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 1,157,646. |
| - | gram-related investments - total from Part IX-B | 1b | <u>U .</u> |
| | nunts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| | nunts set aside for specific charitable projects that satisfy the | | |
| | ability test (prior IRS approval required) | 3a | |
| | a distribution test (attach the required schedule) | 3b | 1,157,646. |
| | Infying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 1,157,040. |
| | ndations that qualify under section 4940(e) for the reduced rate of tax on net investment | _ | ^ |
| | me Enter 1% of Part I, line 27b | 5 | 0. 1,157,646. |
| - | sted qualifying distributions. Subtract line 5 from line 4 | 6 | |
| Note | The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years | qualities for | tne section |

Form **990-PF** (2012)

Form 990-PF (2012)

Part XIII Undistributed Income (see instructions)

| • | (a) Corpus | (b) Years prior to 2011 | (c) 2011 | (d) 2012 |
|--|---|--|---|---------------------------------------|
| 1 Distributable amount for 2012 from Part XI, | О. рад | 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7 | | |
| line 7 | | ······································ | | 33,982. |
| 2 Undistributed income, if any, as of the end of 2012 | | | 0. | |
| a Enter amount for 2011 only | *************************************** | <u> </u> | V. | · · · · · · · · · · · · · · · · · · · |
| b Total for prior years | | 0. | | |
| 3 Excess distributions carryover, if any, to 2012 | · ···· | | + | |
| a From 2007 1,418,589. | | | | |
| b From 2008 1,478,905. | | | | |
| c From 2009 1, 151, 131. | | | | |
| d From 2010 1,121,587. | | | | |
| e From 2011 1,036,672. | | | | |
| f Total of lines 3a through e | 6,206,884. | | | |
| 4 Qualifying distributions for 2012 from | | | | |
| Part XII, line 4 ► \$ 1,157,646. | | | | |
| a Applied to 2011, but not more than line 2a | · | | 0. | |
| b Applied to undistributed income of prior | | _ | | |
| years (Election required - see instructions) | | 0. | · · · · · · · · · · · · · · · · · · · | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2012 distributable amount | 1 100 664 | ······ | | 33,982. |
| e Remaining amount distributed out of corpus | 1,123,664. | | ''' '. '. '. '. '. '. '. '. '. '. '. '. | |
| 5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a)) | 0. | | | 0. |
| 6 Enter the net total of each column as indicated below: | | | | |
| 2 Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 7,330,548. | | | |
| b Prior years' undistributed income Subtract | | | | |
| line 4b from line 2b | | 0. | | |
| 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 | | 0. | | |
| d Subtract line 6c from line 6b Taxable | | | | ······ |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2011 Subtract line | | | | |
| 4a from line 2a Taxable amount - see instr | | | 0. | |
| f Undistributed income for 2012 Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2013 | | | | 0. |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | _ | | | |
| section 170(b)(1)(F) or 4942(g)(3) | 0. | | | |
| 8 Excess distributions carryover from 2007 | 1 410 500 | | | |
| not applied on line 5 or line 7 | 1,418,589. | | | |
| 9 Excess distributions carryover to 2013. | E 011 050 | | | |
| Subtract lines 7 and 8 from line 6a | 5,911,959. | | *************************************** | |
| 10 Analysis of line 9 | | | | |
| a Excess from 2008 1,478,905. b Excess from 2009 1,151,131. | | | | |
| | | | | |
| c Excess from 2010 1,121,587. d Excess from 2011 1,036,672. | | | | |
| 1 100 664 | | | | |
| e Excess from 2012 1,123,664. | L | | | <u> </u> |

| | VINN-DIXIE F | | | | 95428 Page 10 |
|--|---|------------------------------|---------------------------|-------------------------------|--------------------|
| Part XIV Private Operating F | oundations (see in | structions and Part VII | I-A, question 9) | N/A | |
| 1 a If the foundation has received a ruling of | or determination letter that | t it is a private operating | | | |
| , foundation, and the ruling is effective fo | or 2012, enter the date of t | the ruling | ▶ | | |
| b Check box to indicate whether the foun- | d <u>ation is a private operatir</u> | ng foundation described i | | 4942(j)(3)_or4 | 942(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | _ |
| income from Part I or the minimum | (a) 2012 | (b) 2011 | (c) 2010 | (d) 2009 | (e) Total |
| investment return from Part X for | | | | | |
| each year listed . | | | | | |
| 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 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 | | <u> </u> | | | |
| an exempt organization | | | | | |
| (4) Gross investment income | | | | | |
| Part XV Supplementary Info | rmation (Comple | te this part only | if the foundation | had \$5 000 or m | ore in assets |
| at any time during | | | ii tile loullaatioi | 11124 40,000 01 111 | ore in assets |
| - · · · · · · · · · · · · · · · · · · · | | | | <u> </u> | |
| Information Regarding Foundation List any managers of the foundation whyear (but only if they have contributed in the | no have contributed more | | ributions received by the | e foundation before the clo | se of any tax |
| NONE | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | |
| b List any managers of the foundation wh | Own 10% or more of th | e stock of a corporation (| (or an equally large port | on of the ownership of a r | nartnership or |
| other entity) of which the foundation ha | | | tor an oquany largo port | ion of the evillations of a p | arthoromp of |
| NONE | | | | | |
| 2 Information Regarding Contribut Check here | | | _ | not accept unsolicited req | uests for funds If |
| the foundation makes gifts, grants, etc | (see instructions) to indiv | viduals or organizations u | inder other conditions, c | omplete items 2a, b, c, an | d d |
| a The name, address, and telephone num | iber or e-mail of the perso | on to whom applications s | should be addressed | | |
| SEE STATEMENT 5 | | | | | |
| b The form in which applications should it | pe submitted and informat | tion and materials they st | hould include | | |
| c Any submission deadlines | | | | | |
| d Any restrictions or limitations on award | s, such as by geographic | al areas, charitable fields, | kınds of institutions, or | other factors | |
| | | | | | |
| | | | | | |

| 3 Grants and Contributions Paid During the | | rayment | | |
|---|--|----------------------|----------------------------------|------------------|
| Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount |
| | or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| | | | | |
| | | | | |
| NEW HEIGHTS OF NE FLORIDA, INC | NONE | 501(C)(3) | | |
| 3311 BEACH BLVD | | | | |
| JACKSONVILLE, FL 32207 | | | | 5,00 |
| | | | | |
| | | | | |
| | | | | |
| ROBERT E. LEE HIGH SCHOOL ROTC | NONE | 501(C)(3) | | |
| 1200 S MCDUFF AVENUE | | | | 1 50 |
| JACKSONVILLE, FL 32205 | - | | | 1,50 |
| | | | | |
| BOYS & GIRLS CLUB OF NORTHEAST | NONE | 501(C)(3) | | |
| FLORIDA | | | | |
| 1300 RIVERPLACE BLVD, STE. 310 | | | | |
| JACKSONVILLE, FL 32207 | | | | 5,00 |
| | | | | |
| | | | | |
| ONE WILLIAM CHILIPPENC HOME | NONE | 501(C)(3) | | |
| CAMP TRACEY CHILDRENS HOME 1051 ARLINGTON ROAD | NONE | B01(C)(3) | | |
| JACKSONVILLE, FL 32211 | | | | 2,50 |
| | • | | | |
| | | | | |
| AMERICA'S SECOND HARVEST OF COASTAL | NONE | 501(C)(3) | | |
| GA | | | | |
| 2501 E. PRESIDENT STREET | | | | |
| SAVANNAH, GA 310404 Total SEE CO | TINUATION SHE | 」 <u> </u> | ▶ 3a | 5,00 1,157,64 |
| b Approved for future payment | <u> </u> | 1 1 | 34 | 1,157,04 |
| a Approved for lattire payment | | | | |
| | | | | |
| NONE | | | | |
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| | | | | |
| Total | | . I _ | ▶ 3b | |

Part XVI-A Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated | Unrelated business income | | | ided by section 512, 513, or 514 | (e) | | |
|---|---------------------------|---|------------------------|---------------------------------------|-----------------------------------|--|--|
| | (a) Business code | (b) Amount | Exclu- sion code | (d) Amount | Related or exempt function income | | |
| 1 Program service revenue | Cone | | code | - | | | |
| ā | | | ├- | | | | |
| b | | | | | | | |
| <u> </u> | | | ├ | | | | |
| d | | | | | | | |
| e | | | | | | | |
| g Fees and contracts from government agencies | | | | | | | |
| 2 Membership dues and assessments . | | | | | | | |
| 3 Interest on savings and temporary cash | | | | | | | |
| investments | | | 14 | 105. | | | |
| 4 Dividends and interest from securities | | | | | 71 | | |
| 5 Net rental income or (loss) from real estate | | | <u> </u> | | | | |
| a Debt-financed property | | | | | <u> </u> | | |
| 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 | | | ļ | | | | |
| than inventory | | | | | | | |
| 9 Net income or (loss) from special events | | | | | <u> </u> | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | | | |
| 11 Other revenue | | | | | | | |
| a | | | | | | | |
| b | | | | | | | |
| C | | | | | | | |
| d | _ | | <u> </u> | | | | |
| e | | | | | | | |
| 12 Subtotal Add columns (b), (d), and (e) | <u> </u> | 0. | <u> </u> | 105. | | | |
| 13 Total. Add line 12, columns (b), (d), and (e) | • | | | . 13 | 105. | | |
| (See worksheet in line 13 instructions to verify calculations) | | | | | <u> </u> | | |
| Part XVI-B Relationship of Activities to | the Acc | omplishment of Ex | emp | t Purposes | | | |
| Line No. Explain below how each activity for which incom | | | contrit | outed importantly to the accom | plishment of | | |
| the foundation's exempt purposes (other than b | y providing tu | nas for such purposes) | | | | | |
| | | | | · · · · · · · · · · · · · · · · · · · | | | |
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| orm 990 |)-PF (20 | 12) BI-LO | /WINN-DIX | IE FOU | NDATION, INC | l. | 59-0 | 995428 | Page 13 |
|---------------|------------------|--|-------------------------|-------------------|--|-----------------------|------------------------------|---|----------------|
| Part) | (VII | Information Re Exempt Organ | | sfers To a | and Transactions a | and Relation | ships With Non | charitable | |
| • | • | anization directly or indi | rectly engage in any | | g with any other organizati 27, relating to political organ | | ction 501(c) of | | Yes No |
| | nsfers f Cash | rom the reporting founda | ation to a noncharita | ble exempt or | ganization of | | | 1a(1) | х |
| (2) | Other | assets | • | | | | | 1a(2) | Х |
| (1) | | of assets to a noncharita | • • | | | | | 16(1) | X |
| | | ases of assets from a no of facilities, equipment, | | organization | • | • | | 1b(2) 1b(3) | X |
| (4) | | ursement arrangements | | • | • | | | 1b(4) | X |
| | | or loan guarantees mance of services or me | mbership or fundrai | ısıng solicitatic | ons | - | | 1b(5) 1b(6) | X |
| | | facilities, equipment, ma | | | | | _ | 16 | X |
| ors | services | | oundation If the fou | ndation receiv | edule Column (b) should al ed less than fair market val | | | | нs, |
| (a) Line n | | b) Amount involved | | f noncharitable | e exempt organization | (d) Descripti | on of transfers, transaction | s, and shanng am | angements |
| | | | | N/A | | | | | |
| | | | | | | | | - | |
| | + | | | | | | | | |
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| | + | | : | | | | | | |
| ın s | section ! | dation directly or indirec 501(c) of the Code (othe mplete the following sch | r than section 501(c | | or more tax-exempt organ tion 527? | izations described | | Yes | X No |
| | | (a) Name of org | _ | | (b) Type of organization | | (c) Description of rel | ationship | |
| | | N/A_ | | | 1 | | | | . |
| | | | | | | | | *. | |
| | - | | | | | | | | |
| | | | | | | | book of Lucudodae | | |
| Sign Here | and be | lief, it is true, correct, and col | mplete Declaration of p | | ng accompanying schedules and in taxpayer) is based on all infor | mation of which prepa | | May the IRS dereturn with the shown below | preparer |
| - | Sign | ature of officer or trustee Print/Type preparer's na | | Preparer's s | Date Sonature | Title Date | Check If | PTIN | |
| Deia | | | u1110 |) | B : | 7/2/13 | self- employed | P00445 | Ω |
| Paid Prep | arer | AMY BIBBY Firm's name ► DIX | ON HUGHES | GOODM | IAN LLP | 1145 | Firm's EIN ► 56 | | |

Form **990-PF** (2012)

(828) 254-2254

Phone no

Use Only

Firm's address ► 500 RIDGEFIELD COURT

ASHEVILLE, NC 28806

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

| | OMB | No | 1545-0047 |
|--|-----|----|-----------|
|--|-----|----|-----------|

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Schedule of Contributors

Employer identification number

| E | BI-LO/WINN-DIXIE FOUNDATION, INC. | 59-0995428 |
|--|---|---|
| Organization type (check | cone): | |
| Filers of: | Section: | - |
| The soft section: Form 990 or 990 EZ | | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | |
| | 527 political organization | |
| Form 990-PF | X 501(c)(3) exempt private foundation | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | |
| | 501(c)(3) taxable private foundation | |
| Note. Only a section 501 | | Rule. See instructions. |
| X For an organizat | | money or property) from any one |
| Special Rules | | |
| 509(a)(1) and 17 | O(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of th | |
| total contribution | ns of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or e | |
| contributions for If this box is che purpose. Do not | use exclusively for religious, charitable, etc., purposes, but these contributions did not cocked, enter here the total contributions that were received during the year for an exclusion complete any of the parts unless the General Rule applies to this organization because | total to more than \$1,000. Ively religious, charitable, etc., e it received nonexclusively |
| but it must answer "No" | | · · · · · · · · · · · · · · · · · · · |
| LHA For Paperwork Re | duction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule | B (Form 990, 990-EZ, or 990-PF) (2012) |

Name of organization

Employer identification number

BI-LO/WINN-DIXIE FOUNDATION, INC.

59-0995428

| 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) Total contributions | (d) Type of contribution |
| 1 | PGA TOUR CHARITIES, INC. 100 PGA TOUR BOULEVARD PONTE VEDRA BEACH, FL 32082 | \$\$\$\$. | Person X Payroll |
| (a) | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| No. | Name, address, and zir + 4 | \$ | 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) 990, 990-EZ, or 990-PF) (2012) |

Employer identification number

BI-LO/WINN-DIXIE FOUNDATION, INC.

59-0995428

| Part II | Noncash Property (see instructions). Use duplicate copies of Par | rt II if additional space is needed. | |
|------------------------------|--|--|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |

Employer identification number

| _T.O./1 | WINN-DIXIE FOUNDATION, | TNC | 59-0995428 | | |
|------------------------|---|---|--|--|--|
| ert III | Exclusively religious, charitable, etc., indivi year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc Use duplicate copies of Part III if additiona | dual contributions to section 501(c)(7) e following line entry For organizations , contributions of \$1,000 or less for the |), (8), or (10) organizations that total more than \$1,000 for | | |
|) No. rom 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 | d ZIP + 4 | Relationship of transferor to transferee | | |
|) No. | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | |
| art I - | | | | | |
| | | (e) Transfer of gift | | | |
| | Transferee's name, address, an | d ZIP + 4 | Relationship of transferor to transferee | | |
| No. rom art I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | |
| - | | (e) Transfer of gift | | | |
| - | Transferee's name, address, an | d ZIP + 4 | Relationship of transferor to transferee | | |
| No. | (1) D | | | | |
| art I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | |
| - | | (e) Transfer of gift | | | |
| | Transferee's name, address, an | - | Relationship of transferor to transferee | | |
| - | | | | | |

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient BEACHES EMERGENCY ASSISTANCE MINISTRY NONE 501(C)(3) 850 SIXTY AVE S. SUITE 400 JACKSONVILLE BEACH, FL 32250 10,000. BOY SCOUTS OF AMERICA, N. FLORIDA NONE 501(C)(3) COUNCIL 521 EDGEWOOD AVENUE, S JACKSONVILLE, FL 32209 60,000. NONE CENTER OF ACHIEVEMENT, INC. REED 501(C)(3) **CAMPUS** 4336 ROTH DRIVE JACKSONVILLE, FL 32703 1,000. CENTRAL FLORIDA COUNCIL, BOY SCOUTS NONE 501(C)(3) OF A 1951 S. ORANGE BLOSSOM TRAIL APOPKA, FL 32206 10,000. CLINTON BUSH MINISTRIES INSTITUTE FOR NONE 501(C)(3) FIN 1805 N. MAIN STREET STE 4 JACKSONVILLE, FL 32801 1,500. COALITION FOR THE HOMELESS OF CENTRAL NONE 501(C)(3) FL 639 WEST CENTRAL BLVD ORLANDO, FL 32801 10,000. NONE 501(C)(3) COMMUNITY BAPTIST MISSION, INC. 114 W CRYSTAL AVENUE LAKE WALES , FL 33853 10,000. 501(C)(3) COMMUNITY CONNECTIONS OF NONE JACKSONVILLE, IN 327 DUVAL STEET JACKSONVILLE, FL 32202 4,000. NONE DREAMS COME TRUE OF JACKSONVILLE, 501(C)(3) 6803 SOUTHPOINT PARKWAY JACKSONVILLE, FL 32216 25,000. THE FLORIDA BAPTIST CHILDREN'S HOME NONE 501(C)(3) PO BOX 8190 LAKELAND FL 33802 1,000. Total from continuation sheets 1,138,646.

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient show any relationship to Foundation Purpose of grant or **Amount** any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient FRESH MINISTRIES NONE 501(C)(3) 1131 N. LAURA STREET JACKSONVILLE, FL 32206 1,000. GIRLS INCORPORATED OF JACKSONVILLE NONE 501(C)(3) 1627 ROGERO ROAD JACKSONVILLE, FL 32211 1,000. NONE 501(C)(3) HERO, INC. 3787 PALM VALLEY ROAD POINT VEDRA BEACH, FL 32082 1,000. NONE HUBBARD HOUSE 501(C)(3) PO BOX 4909 JACKSONVILLE, FL 32201 1,500. NONE I M SULZBACHER CENTER FOR THE 501(C)(3) HOMELESS 611 E ADAMS STREET JACKSONVILLE, FL 32202 10,000. JEWISH FAMILY & COMMUNITY SERVICES NONE 501(C)(3) 6262 DUPONT STATION COURT, E. 15,000. ST JOHNS, FL 32259 NONE KIPP JACKSONVILLE, INC. 501(C)(3) 1440 MCDUFF AVENUE JACKSONVILLE, FL 32254 50,000. NONE 501(C)(3) LEADERSHIP COUNCIL OF RIVERSIDE PRESBYTE PRESBYTERIAN DAY SCHOOL JACKSONVILLE, FL 32204 350. MALIVAI WASHINGTON KIDS FOUNDATION NONE 501(C)(3) 1096 W. 6TH STREET JACKSONVILLE, FL 32209 3,500. MEALS ON WHEELS OF POLK COUNTY, INC. NONE 501(C)(3) 620 SIXTH STREET N.W. WINTER HAVEN, FL 33881 5,000. **Total from continuation sheets**

| 3 Grants and Contributions Paid During the Year (Continuation) | | | | | | |
|--|--|--------------------------------------|---------------------------------------|--------|--|--|
| Recipient Name and address (home or business) | 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 | | |
| | Of Substantial Contributor | Toopion | · · · · · · · · · · · · · · · · · · · | | | |
| | | F01/5//2) | | | | |
| MISSION IN ACTION FOR GOD, INC. | NONE | 501(C)(3) | | | | |
| 789 S.W. 22ND COURT COURT BELL , FL 32619 | | | | 1,0 | | |
| JOOK! BEIDE , IE SEOTS | | | | | | |
| RONALD MCDONALD HOUSE CHARITIES JAX | NONE | 501(C)(3) | | | | |
| B24 CHILDREN'S WAY | | | | | | |
| JACKSONVILLE, FL 32207 | | | | 1,50 | | |
| | | | | | | |
| SECOND HARVEST NORTH FLORIDA | NONE | 501(C)(3) | | | | |
| 4615 PHILIPS HIGHWAY | | | | | | |
| JACKSONVILLE, FL 32207 | | | | 25,00 | | |
| SOCIAL SERVICE COUNCI/JEWISH FED. | NONE | 501(C)(3) | | | | |
| VOLUSIA | | | | | | |
| VOLUSIA AND FLAGLER COUNTIES | | | | | | |
| DRMOND BEACH, FL 32174 | | | - | 5,00 | | |
| ST VINCENT DEPAUL SOCIETY / ST | NONE | 501(C)(3) | | | | |
| rimothy | | | | | | |
| 1351 PAIGE PLACE | | | | | | |
| LADY LAKE, FL 32159 | | | | 7,00 | | |
| _ | | | | | | |
| ST VINCENT'S HEALTHCARE FOUNDATION | NONE | 501(C)(3) | | | | |
| 1 SHIRCLIFF WAY JACKSONVILLE, FL 32204 | | | | 35,00 | | |
| , | | | - | | | |
| ST. THERESA'S SOCIAL SERVICES | NONE | 501(C)(3) | | | | |
| 11528 S.E. US HIGHWAY 301 | AONE | 501(0)(3) | | | | |
| BELLEVIEW , FL 34420 | | | | 10,00 | | |
| | | | | | | |
| THE FIRST TEE OF JACKSONVILLE | none | 501(C)(3) | | | | |
| 1157 MB01 GOLFAIR BLVD. | | 1 | | | | |
| JACKSONVILLE, FL 32209 | | | | 20,00 | | |
| | | | | | | |
| THE PATH OF CITRUS COUNTY | NONE | 501(C)(3) | | | | |
| PO BOX 3024 | | 1 | | 7 50 | | |
| INVERNESS, FL 34451 | | | | 7,50 | | |
| THE POTTER'S HOUSE CHRISTIAN | NONE | 501(C)(3) | | | | |
| FELLOWSHIP | | | | | | |
| 5119 NORMANDY BLVD. | | | | 10.00 | | |
| JACKSONVILLE, FL 32205 Total from continuation sheets | | <u> </u> | | 10,00 | | |

| Part XV Supplementary Information | | | | |
|---|--|----------------------|----------------------------------|-------------|
| 3 Grants and Contributions Paid During the | | ., | | |
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | | |
| THE SALVATION ARMY OF NORTHEAST FL | NONE | 501(C)(3) | | |
| 328 N. OCEAN STREET | | | | |
| JACKSONVILLE, FL 32202 | | | | 3,000 |
| THORMING, THE HOUSE OF REFUGE MINST. PO BOX 26889 | NONE | 501(C)(3) | | |
| JACKSONVILLE, FL 32226 | | | | 1,000 |
| FRINITY RESCUE MISSION | NONE | 501(C)(3) | | |
| 522 W. UNION STREET JACKSONVILLE, FL 32202 | | | | 10,000 |
| INF FOUNDATION - BROOKS COLLEGE OF HEALTH INF, BROOKS COLLDGE OF HEALTH | NONE | 501(C)(3) | | |
| JACKSONVILLE, FL 32224 | | | | 1,000 |
| | | F01/01/21 | | |
| JNITED NEGRO COLLEGE FUND 1080 WOODCOCK RD STE 280 DRLANDO, FL 32803 | NONE | 501(C)(3) | | 60,000 |
| | | | | I |
| WE CARE FOOD PANTRY | NONE | 501(C)(3) | | |
| 6629 S BASSETT DRIVE HOMOSASSA, FL 34448 | | | | 10,000 |
| ACHIEVEMENT & REHABILITATION CENTERS | NONE | 501(C)(3) | | |
| LO250 NW 53RD STREET SUNRISE, FL 33351 | | | | 3,500 |
| | | | | |
| BLESSINGS FOOD PANTRY 210 NE 3RD STREET | NONE | 501(C)(3) | | |
| POMPANO BEACH , PL 33060 | | | | 10,000 |
| | | | | |
| CAMILLUS HOUSE | NONE | 501(C)(3) | | |
| MIAMI, FL 33128-1616 | | | | 10,000 |
| | | | | |
| CARIBBEAN AMERICAN FOR COMMUN. INV. | NONE | 501(C)(3) | | |
| 1030 ROYAL PALM BEACH BLVD PALM BEACH, FL 33411 | | | | 2,500 |

| 3 Grants and Contributions Paid During the | | | | |
|--|---|--------------------------------------|----------------------------------|--------|
| Recipient Name and address (home or business) | 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 |
| | | | | |
| CASA (COMMUNITY ACTION STOPS ABUSE | NONE | 501(C)(3) | | |
| INC) | | | | |
| PO BOX 414 | | | | 3 000 |
| ST PETERSBURG, FL 33731 | | | | 3,000 |
| | | | | |
| CHARLOTTE COUNTY HOMELESS COALITION | NONE | 501(C)(3) | | |
| PO BOX 380157 MURDOCK, FL 33939 | | | | 3,000 |
| MARDOCK, 12 33333 | | | | 3,000 |
| CHILDREN'S HARBOR | NONE | 501(C)(3) | | |
| 19425 SW 58TH MANOR | NONE | 501(0)(3) | | |
| PEMBROKE PINES, FL 33332 | | | | 3,000 |
| | | | | 7,000 |
| | | | | |
| CHRISTIANS REACHING OUT TO SOCIETY | NONE | 501(C)(3) | | |
| 301 1ST AVENUE SOUTH LAKE WORTH, FL 33460 | | | | 5,000 |
| BART WORTH, 12 33400 | | | | 3,000 |
| TOTAL TOTAL TO THE HOUSE HERVING | YOVE | F01/61/31 | | |
| COALITION TO END HOMELESSNESS PO BOX 030177 | NONE | 501(C)(3) | | |
| FT LAUDERDALE, FL 33303 | | | | 3,000 |
| | | | | |
| COMMUNITY HABILITATION CENTER, INC. | NONE | 501(C)(3) | | |
| 11450 SW 79TH STREET | NONE | 501(0)(3) | | |
| MIAMI, FL 33173 | | | | 3,500 |
| | | | | |
| COVENANT HOUSE FLORIDA | NONE | 501(C)(3) | | |
| 733 BREAKERS AVENUE | | | | |
| FT LAUDERDALE, FL 33304 | | | | 2,500 |
| CURLEY'S HOUSE OF STYLE/HOPE RELIEF | NONE | 501(C)(3) | | |
| FOOD | | | | |
| 6025 NW 6TH COURT | | | | |
| MIAMI, FL 33127 | - | | | 7,000 |
| DOWNOOM A BUILD CUDI MED TWO TO ONTO | NONE | E01(C)(2) | | |
| DOMESTIC ABUSE SHELTER, INC. FLORIDA KEYS | NONE | 501(C)(3) | | |
| PO BOX 522696 | | | | |
| MARATHON SHORES, FL 33052 | _ | | | 5,000 |
| | | | | |
| EAST PASCO MEALS ON WHEELS, INC. | NONE | 501(C)(3) | | |
| 381 15TH AVENUE | | | | |
| ZEPHYRHILLS, FL 33542 | | | | 2,500 |
| Total from continuation sheets | | | <u> </u> | |

| 3 Grants and Contributions Paid During the Y | ear (Continuation) | | | |
|--|---|--------------------------------|----------------------------------|---------|
| Recipient Name and address (home or business) | 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 |
| | | | | |
| FEED THE HUNGRY AT VILLAGE BAPTIST | NONE | 501(C)(3) | | |
| CHURCH | | | | |
| 3600 VILLAGE BLVD | | | | |
| PALM BEACH, FL 33407 | | | | 5,000 |
| | | | | |
| GREATER ST. PAUL A.M.E. CHRUCH, INC. | NONE | 501(C)(3) | | |
| 3680 THOMAS AVENUE | | | | |
| HIAMI, PL 33133 | | - | | 7,500 |
| GULF RIDGE COUNCIL, BOY SCOUTS OF | NONE | 501(C)(3) | | |
| AMERICA | HOND | | | |
| LEARNING FOR LIFE | | | | |
| PAMPA, PL 33612 | | | | 2,500 |
| <u> </u> | | | | |
| | | | | |
| EARTLAND RURAL HEALTH NETWORK, INC | NONE | 501(C)(3) | | |
| 200 W AVON BLVD, STE 109 | | | | |
| EBRING, FL 33825 | | | | 4,500 |
| | | | | |
| | | | | |
| WEWISH ADOPTION & FOSTER CARE OPTIONS | NONE | 501(C)(3) | | |
| 1200 N UNIVERSITY DR | | | | |
| MARATHON , FL 33351 | | | | 2,500 |
| AIR-KEYS AREA INTERDENOMINATIONAL | NONE | 501(C)(3) | | |
| RES. | NON D | | | |
| 3010 OVERSEAS HIGHWAY | | | | |
| MARATHON, FL 33250 | | | | 10,000 |
| | | | | |
| | | | | |
| KINGDOM LIFE COMMUNITY SERVICES | NONE | 501(C)(3) | | |
| 0801 BISCAYNE BLVD., STE 403 | | | | |
| AVENTURA, FL 33180 | | | | 7,000 |
| | | | | |
| TERMEMARANTITEC | NONE | E01/0\/3\ | | |
| LIFENET4FAMILIES ONE NW 33RD TERRACE | NONE | 501(C)(3) | | |
| AUDERHILL, FL 33311 | | | | 5,000 |
| nionaliza, 12 over | | | | 3,000 |
| | | | | |
| JIGA CONTRA EL CANCER | NONE | 501(C)(3) | | |
| 2180 SW 12TH AVENUE | | | | |
| MIAMI, PL 33129 | | | <u> </u> | 100,000 |
| | | T | | |
| MAKE-A-WISH FOUNDATION OF SOUTHERN | NONE | 501(C)(3) | | |
| PLORID | | | | |
| 491 S STATE ROAD 7, STE 201 | | | | |
| FT LAUDERDALE, FL 33314 | <u>.l</u> | | | 2,500 |

| 3 Grants and Contributions Paid During the | rear (Continuation) | | | |
|---|---|---------------------|----------------------------------|--------|
| Recipient | If recipient is an individual, show any relationship to | Foundation | Purpose of grant or contribution | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | status of recipient | contribution | Amount |
| | | | | |
| MIAMI-DADE COUNTY LEAGUE OF CITIES | NONE | 501(C)(3) | | |
| 226 E FLAGLER STREET, STE 200 | | | | |
| MIAMI, PL 33131 | | | | 7,500 |
| | | | | |
| MOTHERS HELPING MOTHERS | NONE | 501(C)(3) | | |
| PO BOX 342 | | | | |
| SARASOTA, FL 34230-3042 | | | · | 7,500 |
| | | | | |
| QUANTUM HOUSE, INC. | NONE | 501(C)(3) | | |
| 901 45TH STREET | | | | |
| PALM BEACH, FL 33407 | | | | 10,000 |
| SOUTH FL COUNCIL BOY SCOUTS OF | NONE | 501(C)(3) | | |
| AMERICA | | | | |
| 15255 NW 82ND AVE | | | | |
| MIAMI LAKES, FL 33016 | | | | 2,500 |
| | | | | |
| STAR OF THE SEA FOUNDATION, INC. | NONE | 501(C)(3) | | : |
| 5640 MALONEY AVENUE | NONE | | | |
| KEY WEST, FL 33040 | | | | 10,000 |
| | | | | |
| DARROW CRRIVES CHERVIER CENTER INC | NONE | E01/01/21 | | |
| TARPON SPRINGS SHEPHERD CENTER, INC. PO BOX 1766 | NONE | 501(C)(3) | | |
| TARPON SPRINGS FL 34688 | | | | 2,400 |
| | | | | 2,100 |
| | | 504453433 | | |
| THE CENTER FOR FAMILY SERVICES, INC 4101 PARKER AVENUE | NONE | 501(C)(3) | | |
| WEST PALM BEACH, FL 33405 | | | | 10,000 |
| • | | | | |
| THE POVERELLO CENTER, INC. | NONE | 501(C)(3) | | |
| 2056 N DIXIE HIGHWAY | N-0412 | 501(0)(3) | | |
| WILTON MANORS, FL 33305 | | | | 10,000 |
| | | | | |
| DUP CALVATION ADMY OF THE | none | 501(C)(3) | | |
| THE SALVATION ARMY OF IRC 2655 5TH STREET, S.W. | NOME | 501(C)(3) | | |
| VERO BEACH , FL 32968 | | | | 12,000 |
| | | | | |
| | Love | | | |
| TREASURE COAST FOOD BANK TCFB | NONE | 501(C)(3) | | |
| 3051 INDUSTRIAL 25TH STREET FT PIERCE, FL 34946-8635 | | | | 7,500 |
| Total from continuation sheets | | | | 7,200 |

| Part XV Supplementary Information | | | | |
|--|--|----------------------|----------------------------------|--------|
| 3 Grants and Contributions Paid During the Y | · · · · · · · · · · · · · · · · · · · | | | |
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | contribution | |
| WOMEN IN DISTRESS OF BROWARD COUNTY | NONE | 501(C)(3) | | |
| PO BOX 676 | | | | |
| FT LAUDERDALE, FL 33302 | | | | 5,000 |
| YOUTH L.E.A.D. FUND - MIAMI POUNDATION 200 BISCAYNE BLVD., SUITE 505 | NONE | 501(C)(3) | , | |
| MIAMI, PL 33131 | | | | 3,500 |
| 210 2 2000 | L.O.V. | E01/G)/2) | | |
| A'S & ACES 1036 ARABELLA STREET | NONE | 501(C)(3) | | ! |
| NEW ORLEANS, LA 70115 | | | | 3,000 |
| | | | | • |
| D. D. T. C. | NOVE | E01/G\/3\ | | |
| BAPTIST HEALTH CARE FOUNDATION PO BOX 241647 | NONE | 501(C)(3) | | |
| MONTGOMERY, AL 36124-1647 | | | | 3,000 |
| | | | | |
| BEECH GROVE BAPTIST CHURCH OF BATON | NONE | 501(C)(3) | | |
| ROUGE | | | | |
| 2376 THOMAS ROAD BATON ROUGE, LA 70807 | | | | 3,000 |
| ENTON ROCCE, EN 10001 | | | | 3,000 |
| | | | | |
| BOYS & GIRLS CLUB OF LAKE MARTIN AREA | NONE | 501(C)(3) | | |
| PO BOX 1016 ALEXANDER CITY AL 35011 | | | | 3,000 |
| MINIMUM CITT, IN SOUT | | | | 3,000 |
| | | | | |
| BOYS & GIRLS CLUB OF MONTGOMERY | NONE | 501(C)(3) | | |
| PO BOX 234 MONTGOMERY, AL 36101 | | | | 3,000 |
| MONITORINAL, AM JOIOT | | | | 3,000 |
| | | | | |
| BOYS CLUB OF COLUMBUS AND PHENIX CITY | NONE | 501(C)(3) | | |
| 3810 BUENA VISTA RD COLUMBUS, GA 31906-4346 | | | | 3 000 |
| CODUMDOS, ON 31700-4140 | | | - | 3,000 |
| BOYS HOPE GIRLS HOPE OF GREATER NEW | NONE | 501(C)(3) | | |
| ORLEA | | | | |
| PO BOX 19307 | | | | |
| NEW ORLEANS, LA 70179 | | | <u> </u> | 3,000 |
| | | | | |
| COMMUNITY CENTER OF ST BERNARD | NONE | 501(C)(3) | | |
| 1107 LEBEAU ST | | | | |
| ST ARABI , LA 70032 Total from continuation sheets | | | | 10,000 |

| Recipient | If recipient is an individual, | | - | _ |
|---------------------------------------|--|--------------------------------------|----------------------------------|--------|
| Name and address (home or business) | show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| - | Of Substantial Contributor | Toopion | | |
| OVENANT HOSPICE | NONE | 501(C)(3) | | |
| 5041 NORTH 12TH AVENUE | | | | |
| PENSACOLA, FL 32504 | <u> </u> | | | 3,00 |
| | | | | |
| PACE TO PACE ENRICHMENT CENTER | NONE | 501(C)(3) | | |
| 2010 S. BURNSIDE AVENUE, SUITE A | | | | 2 00 |
| GONZALES, LA 70737 | | - | | 3,00 |
| PAITH HEALTH CLINIC / FHC | NONE | 501(C)(3) | | |
| 1182 BALTZELL STREET | | | | |
| MARIANNA, FL 32447 | | | | 10,00 |
| PERST FOUNDATION FOR CHILDHOOD | NONE | 501(C)(3) | | |
| LITERACY | | | | |
| PO BOX 1327 | | | | |
| MADISON, GA 30650 | | | | 3,00 |
| GREATER ALABAMA COUCIL, BOY SCOUTS OF | NONE | 501(C)(3) | | |
| AM. | | | | |
| 516 LIBERTY PARKWAY | | | | |
| BIRMINGHAM, AL 35242 | | | | 3,00 |
| ADIES LEUKEMIA LEAGUE | NONE | 501(C)(3) | | |
| PO BOX 9355 | | | | |
| METAIRIE, LA 70055-9355 | | | | 5,00 |
| | | | | |
| OUISIANA CASA ASSOCIATION | NONE | 501(C)(3) | | |
| 9654 BROOKLINE AVE, STE 210 | | | | |
| BATON ROUGE, LA 70806 | | - | | 3,00 |
| UTHERAN SOCIAL SERVICES OF THE SOUTH | NONE | 501(C)(3) | | |
| BEREAL | | | | |
| NEW ORLEANS, LA 70127 | | | | 3,00 |
| | | | | |
| MANNA MINISTRIES INC. | NONE | 501(C)(3) | | |
| 120 STREET A, SUITE A | | | | |
| PICAYUNE, MS 39466 | | + | | 20,00 |
| MEMORIAL HOSPITAL AT GULFPORT | NONE | 501(C)(3) | | |
| FOUNDATION | | | | |
| РО ВОХ 940 | | | | |
| GULFPORT, MS 39502 | | | | 10,00 |

| 3 Grants and Contributions Paid During the Y | | | | |
|--|--|---------------------------------------|----------------------------------|--------|
| Recipient Name and address (home or business) | 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 |
| | | · · · · · · · · · · · · · · · · · · · | | |
| METROPOLITAN CNTR FOR WOMEN AND | NONE | 501(C)(3) | | |
| CHILDREN | | | | |
| PO BOX 10775 | | | | 3 000 |
| JEFFERSON, LA 70181 | | | | 3,000 |
| MONTGOMERY AREA FOOD BANK | NONE | 501(C)(3) | | |
| 521 TRADE CENTER STREET | NONE | 501(6)(3) | | |
| MONTGOMERY, AL 36108 | | | | 20,000 |
| DATE CONTOUTING FOR WOMEN AND | NOVE | E01/0\/3\ | | |
| OASIS COUNSELING FOR WOMEN AND CHILDREN | NONE | 501(C)(3) | | |
| 1900 14TH AVENUE S. | | | | |
| BIRMINGHAM, AL 35205 | | | | 4,000 |
| | | | | |
| PANAMA CITY RESCUE MISSION | NONE | 501(C)(3) | | |
| РО ВОХ 2359 | | | | |
| PANAMA CITY, FL 32402 | | | | 5,000 |
| RONALD MCDONALD HOUSE CHARITIES OF NW | NONE | 501(C)(3) | | |
| FL | | | | |
| 5200 BAYOU BLVD | | | | |
| PENSACOLA, FL 32503 | | <u></u> | | 3,500 |
| SECOND CHANCE OF NORTHWEST FLORIDA, | NONE | 501(C)(3) | | |
| INC. | | | | |
| 222 E EACH DRIVE | | | | |
| PANAMA CITY, FL 32401 | - | | | 3,500 |
| | | | | |
| SECOND HARVEST FD BANK OF NEW ORLEANS | NONE | 501(C)(3) | | |
| NEW ORLEANOS | | | | |
| NEW ORLEANS, LA 70115 | | | | 35,000 |
| | | | | |
| SPIRIT OF HOPE YOUTH RANCH | NONE | 501(C)(3) | | |
| 194 KINGS RANCH DRIVE | | | | 2 000 |
| WILSONVILLE, AL 35186 | | | | 3,000 |
| | | | | |
| ST. TAMMANY CANCER FUND | NONE | 501(C)(3) | | 1 |
| 2895 HIGHWAY 190, SUITE S-3 | | | | 5 000 |
| MANDEVILLE, LA 70471 | | | | 5,000 |
| | | | | |
| THE EXCEPTIONAL FOUNDATION 1616 OXMOORE ROAD | NONE | 501(C)(3) | | |
| BIRMINGHAM, AL 35209 | | | | 3,000 |
| Total from continuation sheets | · | | | |

| Recipient | If recipient is an individual, | _ 1 | _ | i |
|---|--|--------------------------------------|-------------------------------------|--------|
| Name and address (home or business) | show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| | or outstands on motor | 100 | | |
| THE GOOD SAMARITAN MINISTRY | NONE | 501(C)(3) | | |
| 10 CROSS GATES BLVD | | | | |
| LIDELL, LA 70461 | | | | 20,00 |
| NIVERSITY OF S ALABAMA - MITCHELL | NONE | 501(C)(3) | | |
| ANCER | | | | |
| 50 CLINIC DRIVE | | | | |
| OBILE, AL 36688 | | | | 5,00 |
| | | | | |
| NITED CEREBRAL PALSY OF WEST ALABAMA | NONE | 501(C)(3) | | |
| .10 UCP PARKWAY IORTHPORT, AL 35476 | | | | 3,50 |
| | | | | , , , |
| OLUNTEERS OF AMERICA GREATER NEW | NONE | 501(C)(3) | | |
| ORLEANS IEW ORLEANS | | | | |
| IEW ORLEANS, LA 70119 | | | | 3,00 |
| | | | | - |
| ESLEY HOUSE COMMUNITY CENTER INC | NONE | 501(C)(3) | | |
| 520 8TH AVENUE | | | | |
| ERIDIAN, MS 39301 | 1 | | | 25,00 |
| | | | | |
| PEEDING AMERICA | NONE | 501(C)(3) | | |
| 5 EAST WACHER DRIVE | | | | |
| HICAGO, IL 60601 | | - | | 75,00 |
| NUMBER OF THE PROPERTY OF THE | NOVE | E01/G)/3) | | |
| THE GUARDIAN CATHOLIC SCHOOLS | NONE | 501(C)(3) | | |
| FACRSONVILLE, FL 32206 | | | | 75,00 |
| | | | | |
| PROJECT SERVE | none | 501(C)(3) | | |
| 33 NE 2ND AVE APT 2906 | | | | |
| IIAMI, FL 33132 | | | | 1,50 |
| | | 501/07/23 | | |
| PEEDING AMERICA TAMPA BAY | NONE | 501(C)(3) | | |
| PAMPA, FL 33605 | | | | 4.5 |
| | | | | |
| MAYO CLINIC | NONE | 501(C)(3) | | |
| 3400 E. SHEA BLVD. | | -,-,,2, | | |
| COTTSDALE, AZ 85259 | | | | 25,44 |

| FORM 990-PF INTEREST ON SAVI | NGS AND TEM | PORARY CASH | INVESTMENTS | STATEMENT | 1 |
|-------------------------------------|------------------------------|-----------------------------------|-------------|-------------|-----|
| SQURCE | | | | AMOUNT | |
| WACHOVIA CHECKING | | | | | 05. |
| TOTAL TO FORM 990-PF, PART I, | LINE 3, CO | LUMN A | | 10 | 05. |
| FORM 990-PF OTHER PROFESSIONAL FEES | | | | STATEMENT 2 | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | | | |
| BANK FEES | 718. | 0 | • | 0. | 0. |
| TO FORM 990-PF, PG 1, LN 16C | 718. | 0 | • | 0. | 0. |
| FORM 990-PF | OTHER E | XPENSES | | STATEMENT | 3 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | | | |
| MISCELLANEOUS EXPENSE | 36,988. | 0 | • | 0. | 0. |
| TO FORM 990-PF, PG 1, LN 23 | 36,988. | 0 | • | 0. | 0. |
| FORM 990-PF | CORPORAT | E BONDS | | STATEMENT | 4 |
| DESCRIPTION | | В | OOK VALUE | FAIR MARKET | т |
| MADISON CO. TOBACCO WAREHOUSE | E | | 800. | | 00. |
| MADISON INDUSTRIES | | | 100. | 10 | 00. |

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

5

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

MELISSA ADAMS 5050 EDGEWOOD COURT JACKSONVILLE, FL 32254

FORM AND CONTENT OF APPLICATIONS

THERE ARE FORMAL GUIDELINES AND AN APPLICATION PROCESS FOR GRANTS. THE ORIGINAL AND PAPER CLIPPED COPES OF THE FOLLOWING MUST BE SUBMITTED: 1.) GRANT APPLICATION 2.) BOARD LIST 3.) GRANT PROPOSAL NARRATIVE 4.) IF ANOTHER PROGRAM, A PROGRESS REPORT MUST BE SUBMITTED AS PART OF THEIR NEW GRANT PROPOSAL 5.) ONE COPY OF THE IRS 501(C)(3) LETTER DETERMINING TAX-EXEMPT STATUS. THE APPLICATION FOR GRANT FUNDING AND THE INSTRUCTIONS FOR THE GRANT PROPOSAL NARRATIVE ARE ATTACHED.

ANY SUBMISSION DEADLINES

REQUESTS FOR GIFTS ARE ACCEPTED THROUGHT THE YEAR

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE FOUNDATION'S OBJECTIVE IS TO CONDUCT, OPERATE AND CARRY ON ACTIVITIES TO BENEFIT ONLY PEOPLE IN THE STATES OF ALABAMA, FLORIDA, GEORGIA, LOUISIANA AND MISSISSIPPI. THE FOUNDATION MAKES GRANTS TO ONLY LOCAL NON-PROFIT 501(C)(3) ORGANIZATIONS IN THOSE AREAS WHICH FOCUS ON HUNGER, WOMEN AND CHILDREN, HEALTH AND EDUCATION INITIATIVES. THE FOUNDATION MAY PUT RESOURCES INTO PROJECTS OF ITS OWN CREATION. IN MAKING GRANT DECISIONS, THE FOUNDATION SEEKS TO SUPPORT INITIATIVES THAT FOSTER SIGNIFICANT VALUE WHICH LASTS BEYOND THE FUNDING PERIOD. THE FOUNDATION WILL NOT CONSIDER REQUESTS FOR MULTI-YEAR COMMITMENTS, CAPITAL CAMPAIGNS OR GENERAL OPERATING SUPPORT.