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Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation**2013**

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▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.**For calendar year 2013 or tax year beginning , 2013, and ending , 20**

| | | |
|--|---|---|
| Name of foundation Dawn Foods Foundation | | A Employer identification number 26-1481941 |
| Number and street (or P O box number if mail is not delivered to street address) | Room/suite | B Telephone number (see instructions) 517-789-4400 |
| City or town, state or province, country, and ZIP or foreign postal code Jackson MI 49201 | | C If exemption application is pending, check here <input type="checkbox"/> |
| G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change | | D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/> |
| H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation | | |
| I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 53,274 | J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis) | |

| 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 instructions)) | | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|---|---|------------------------------------|---------------------------|-------------------------|---|
| 1 | Contributions, gifts, grants, etc., received (attach schedule) | 43,816 | | | |
| 2 | Check <input type="checkbox"/> if the foundation is not required to attach Sch B | | | | |
| 3 | Interest on savings and temporary cash investments | | | | |
| 4 | Dividends and interest from securities | | | | |
| 5a | Gross rents | | | | |
| b | Net rental income or (loss) | | | | |
| 6a | Net gain or (loss) from sale of assets not on line 10 | | | | |
| b | Gross sales price for all assets on line 6a | | | | |
| 7 | Capital gain net income (from Part IV, line 2) | | 0 | | |
| 8 | Net short-term capital gain | | | | |
| 9 | Income modifications | | | | |
| 10a | Gross sales less returns and allowances | | | | |
| b | Less Cost of goods sold | | | | |
| c | Gross profit or (loss) (attach schedule) | 0 | | | |
| 11 | Other income (attach schedule) | | | | |
| 12 | Total. Add lines 1 through 11 | 43,816 | 0 | 0 | |
| 13 | Compensation of officers, directors, trustees | | | | |
| 14 | Other employee salaries and wages | | | | |
| 15 | Pension plans, employee benefits | | | | |
| 16a | Legal fees (attach schedule) | | | | |
| b | Accounting fees (attach schedule) | | | | |
| c | Other professional fees (attach schedule) | | | | |
| 17 | Interest | | | | |
| 18 | Taxes (attach schedule) (see instructions) | | | | |
| 19 | Depreciation (attach schedule) and depletion | | | | |
| 20 | Occupancy | | | | |
| 21 | Travel, conferences, and meetings | | | | |
| 22 | Printing and publications | | | | |
| 23 | Other expenses (attach schedule) | 764 | | | |
| 24 | Total operating and administrative expenses. Add lines 13 through 23 | 764 | 0 | 0 | 0 |
| 25 | Contributions, gifts, grants paid | 66,474 | | | |
| 26 | Total expenses and disbursements. Add lines 24 and 25 | 67,238 | 0 | 0 | 0 |
| 27 | Subtract line 26 from line 12 | | | | |
| a | Excess of revenue over expenses and disbursements | (23,422) | | | |
| b | Net investment income (if negative, enter -0-) | | 0 | | |
| c | Adjusted net income (if negative, enter -0-) | | | 0 | |

| 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 | 76,696 | 53,274 | 53,274 |
| | 2 | Savings and temporary cash investments | | | |
| | 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 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) ▶ | | | |
| Liabilities | 12 | Investments—mortgage loans | | | |
| | 13 | Investments—other (attach schedule) | | | |
| | 14 | Land, buildings, and equipment: basis ▶ | | | |
| | | Less: accumulated depreciation (attach schedule) ▶ | | | |
| | 15 | Other assets (describe ▶) | | | |
| | 16 | Total assets (to be completed by all filers—see the instructions Also, see page 1, item I) | 76,696 | 53,274 | 53,274 |
| Net Assets or Fund Balances | 17 | Accounts payable and accrued expenses | | | |
| | 18 | Grants payable | | | |
| | 19 | Deferred revenue | | | |
| | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| | 21 | Mortgages and other notes payable (attach schedule) | | | |
| | 22 | Other liabilities (describe ▶) | | | |
| Net Assets or Fund Balances | 23 | Total liabilities (add lines 17 through 22) | 0 | 0 | |
| | | Foundations that follow SFAS 117, check here <input type="checkbox"/> | | | |
| | 24 | Unrestricted | 76,696 | 53,274 | |
| | 25 | Temporarily restricted | | | |
| | 26 | Permanently restricted | | | |
| | | Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> | | | |
| | 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 | | | |
| | 30 | Total net assets or fund balances (see instructions) | 76,696 | 53,274 | |
| | 31 | Total liabilities and net assets/fund balances (see instructions) | 76,696 | 53,274 | |

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 | 76,696 |
| 2 | Enter amount from Part I, line 27a | 2 | (23,422) |
| 3 | Other increases not included in line 2 (itemize) ▶ | 3 | |
| 4 | Add lines 1, 2, and 3 | 4 | 53,274 |
| 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 | 53,274 |

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 shares MLC Co.) | | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) |
|--|---|---|---|----------------------------------|
| 1a | | | | |
| 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 | | | | |
| b | | | | |
| c | | | | |
| d | | | | |
| e | | | | |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 | | | (i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h)) | |
| (i) FMV as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col. (i) over col. (j), if any | | |
| a | | | | |
| b | | | | |
| c | | | | |
| d | | | | |
| e | | | | |
| 2 Capital gain net income or (net capital loss) | <div style="display: inline-block; vertical-align: middle;"> { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div> | | 2 | |
| 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8 | | | 3 | |

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.

| (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)) |
|--|--|--|---|
| 2012 | | | |
| 2011 | | | |
| 2010 | | | |
| 2009 | | | |
| 2008 | | | |
| 2 Total of line 1, column (d) | | | 2 |
| 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 |
| 4 Enter the net value of noncharitable-use assets for 2013 from Part X, line 5 | | | 4 |
| 5 Multiply line 4 by line 3 | | | 5 |
| 6 Enter 1% of net investment income (1% of Part I, line 27b) | | | 6 |
| 7 Add lines 5 and 6 | | | 7 |
| 8 Enter qualifying distributions from Part XII, line 4 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. | | | 8 |

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see 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 | |
| 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 | 0 |
| 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 | 0 |
| 6 | Credits/Payments: | | |
| a | 2013 estimated tax payments and 2012 overpayment credited to 2013 | 6a | |
| b | Exempt foreign organizations—tax withheld at source | 6b | |
| c | Tax paid with application for extension of time to file (Form 8868) | 6c | |
| d | Backup withholding erroneously withheld | 6d | |
| 7 | Total credits and payments. Add lines 6a through 6d | 7 | 0 |
| 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 | 0 |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | 0 |
| 11 | Enter the amount of line 10 to be Credited to 2014 estimated tax Refunded | 11 | 0 |

Part VII-A Statements Regarding Activities

| | Yes | No |
|---|-----|----|
| 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? | | X |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i> | | X |
| c Did the foundation file Form 1120-POL for this year? | | X |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ 0 (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 managers. ▶ \$ 0 | | |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i> | | X |
| 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? <i>If "Yes," attach a conformed copy of the changes</i> | | X |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | X |
| b If "Yes," has it filed a tax return on Form 990-T for this year? | | X |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i> | | X |
| 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? | X | |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> | X | |
| 8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ MI | | |
| 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? <i>If "No," attach explanation</i> | X | |
| 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 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i> | | X |
| 10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> | | X |

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 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 | X | |
| Website address ► <u>www.dawnfoods.com</u> | | | | |
| 14 | The books are in care of ► <u>Sarah Richmond</u> | Telephone no. ► | <u>517-789-4400</u> | |
| | Located at ► <u>3333 Sargent Road, Jackson, MI</u> | ZIP+4 ► | <u>49201</u> | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —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 2013, 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 ► | | | X |

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? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| b | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1b | X |
| | Organizations relying on a current notice regarding disaster assistance check here | | |
| c | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2013? | 1c | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | | |
| a | At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013? <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 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 | X |
| 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 2013 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 2013.) | 3b | X |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | X |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013? | 4b | X |

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 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 any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? | | | 5b |
| | Organizations relying on a current notice regarding disaster assistance check here | | | X |
| 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? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| | If "Yes," attach the statement required by Regulations section 53.4945–5(d) | | | |
| 6a | Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | |
| b | Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | | 6b |
| | If "Yes" to 6b, file Form 8870. | | | X |
| 7a | At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | |
| 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 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 Attached | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

2 Compensation of five highest-paid employees (other than those included on line 1—see 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 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 instructions)

| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 | Amount |
|--|--------|
| 1 | |
| 2 | |
| 3 All other program-related investments. See instructions | |

Total. Add lines 1 through 3 ▶ 0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see 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 | 0 |
| b | Average of monthly cash balances | 1b | 0 |
| c | Fair market value of all other assets (see instructions) | 1c | 0 |
| d | Total (add lines 1a, b, and c) | 1d | 0 |
| e | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) | 1e | 0 |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0 |
| 3 | Subtract line 2 from line 1d | 3 | 0 |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see instructions) | 4 | 0 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 0 |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 0 |

Part XI Distributable Amount (see 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 | 0 |
| 2a | Tax on investment income for 2013 from Part VI, line 5 | 2a | |
| b | Income tax for 2013. (This does not include the tax from Part VI.) | 2b | |
| c | Add lines 2a and 2b | 2c | 0 |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 0 |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | Add lines 3 and 4 | 5 | 0 |
| 6 | Deduction from distributable amount (see instructions) | 6 | |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 0 |

Part XII Qualifying Distributions (see 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 | 67,238 |
| 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 | 67,238 |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions) | 5 | |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 67,238 |

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 instructions)

| | (a) Corpus | (b) Years prior to 2012 | (c) 2012 | (d) 2013 |
|---|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2013 from Part XI, line 7 | | | | 0 |
| 2 Undistributed income, if any, as of the end of 2013: | | | | |
| a Enter amount for 2012 only | | | 0 | |
| b Total for prior years: 20____, 20____, 20____ | | 0 | | |
| 3 Excess distributions carryover, if any, to 2013: | | | | |
| a From 2008 | | | | |
| b From 2009 | | | | |
| c From 2010 | | | | |
| d From 2011 | | | | |
| e From 2012 | | | | |
| f Total of lines 3a through e | 0 | | | |
| 4 Qualifying distributions for 2013 from Part XII, line 4: ► \$ _____ | | | | |
| a Applied to 2012, but not more than line 2a | | | | |
| b Applied to undistributed income of prior years (Election required—see instructions) | | | | |
| c Treated as distributions out of corpus (Election required—see instructions) | | | | |
| d Applied to 2013 distributable amount | | | | |
| e Remaining amount distributed out of corpus | | | | |
| 5 Excess distributions carryover applied to 2013 (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 | 0 | | | |
| 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 | | | | |
| d Subtract line 6c from line 6b. Taxable amount—see instructions | | 0 | | |
| e Undistributed income for 2012. Subtract line 4a from line 2a. Taxable amount—see instructions | | | 0 | |
| f Undistributed income for 2013. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2014 | | | | 0 |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) | | | | |
| 8 Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions) | | | | |
| 9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a | 0 | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2009 | | | | |
| b Excess from 2010 | | | | |
| c Excess from 2011 | | | | |
| d Excess from 2012 | | | | |
| e Excess from 2013 | | | | |

Part XIV Private Operating Foundations (see 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 2013, enter the date of the ruling **▶**

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

| | Tax year | Prior 3 years | | | (e) Total |
|--|----------|---------------|----------|----------|-----------|
| | (a) 2013 | (b) 2012 | (c) 2011 | (d) 2010 | |
| 2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed | | | | | 0 |
| b 85% of line 2a | 0 | 0 | 0 | 0 | 0 |
| c Qualifying distributions from Part XII, line 4 for each year listed | | | | | 0 |
| d Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | 0 |
| e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c | 0 | 0 | 0 | 0 | 0 |
| 3 Complete 3a, b, or c for the alternative test relied upon: | | | | | |
| a "Assets" alternative test—enter: | | | | | |
| (1) Value of all assets | | | | | 0 |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | 0 |
| b "Endowment" alternative test—enter $\frac{2}{3}$ of minimum investment return shown in Part X, line 6 for each year listed | | | | | 0 |
| 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) | | | | | 0 |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | 0 |
| (3) Largest amount of support from an exempt organization | | | | | 0 |
| (4) Gross investment income | | | | | 0 |

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see 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).)

None

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.

None

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 instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

Sarah C. Richmond, President, Dawn Foods Foundation, 3333 Sargent Road, Jackson, MI 49201

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

See Attached

c Any submission deadlines:

See Attached

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

See Attached

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 <i>Paid during the year</i> | | | | | |
| See Attached | | | | | 66,474 |
| Total | | | | 3a | 66,474 |
| b <i>Approved for future payment</i> | | | | | |
| Total | | | | 3b | 0 |

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

| | | Unrelated business income | | Excluded by section 512, 513, or 514 | | (e) Related or exempt function income (See instructions) |
|-----------|--|---------------------------|---------------|--------------------------------------|---------------|---|
| | | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | |
| 1 | Program service revenue: | | | | | |
| a | _____ | | | | | |
| b | _____ | | | | | |
| c | _____ | | | | | |
| d | _____ | | | | | |
| e | _____ | | | | | |
| f | _____ | | | | | |
| g | Fees and contracts from government agencies | | | | | |
| 2 | Membership dues and assessments | | | | | |
| 3 | Interest on savings and temporary cash investments | | | | | |
| 4 | Dividends and interest from securities | | | | | |
| 5 | Net rental income or (loss) from real estate: | | | | | |
| a | Debt-financed property | | | | | |
| b | Not debt-financed property | | | | | |
| 6 | Net rental income or (loss) from personal property | | | | | |
| 7 | Other investment income | | | | | |
| 8 | Gain or (loss) from sales of assets other than inventory | | | | | |
| 9 | Net income or (loss) from special events | | | | | |
| 10 | Gross profit or (loss) from sales of inventory | | | | | |
| 11 | Other revenue a _____ | | | | | |
| b | _____ | | | | | |
| c | _____ | | | | | |
| d | _____ | | | | | |
| e | _____ | | | | | |
| 12 | Subtotal Add columns (b), (d), and (e) | | 0 | | 0 | 0 |
| 13 | Total. Add line 12, columns (b), (d), and (e) | | | | | 13 0 |

(See worksheet in line 13 instructions to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

1 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?

(1) Cash

(2) Other assets

(1) Sales of assets to a noncharitable exempt organization

(2) Purchases of assets from a noncharitable exempt organization

(3) Rental of facilities, equipment, or other assets

(4) Reimbursement arrangements

(5) Loans or loan guarantees


(6) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column **(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 **(d)** the value of the goods, other assets, or services received.

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

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
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|------------------|--|---------|-----------|
| 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) is based on all information of which preparer has any knowledge. | | |
| |  | 4-16-14 | President |
| | Signature of officer or trustee | Date | Title |

May the IRS discuss this return with the preparer shown below (see instructions)? ☐ Yes ☒ No

**Paid
Preparer
Use Only**

Print/Type preparer's name

Preparer's signature

Date _____

Check ☐ if
self-employed

| | |
|------|--|
| PTIN | |
|------|--|

Firm's name ▶

Firm's EIN ►

Firm's address ►

Phone no

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

OMB No 1545-0047

2013

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

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.**Name of the organization**

Dawn Foods Foundation

Employer identification number

26-1481941

Organization type (check one)**Filers of:****Section:**

Form 990 or 990-EZ

☐ 501(c)() (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck 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 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did

Name of organization

Dawn Foods Foundation

Employer identification number

26-1481941

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 | Dawn Food Products, Inc. 3333 Sargent Road Jackson, MI 49201 | \$ 43,816 | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions) |
| | | \$ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions) |
| | | \$ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions) |
| | | \$ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions) |
| | | \$ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions) |
| | | \$ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions) |

Name of organization

Dawn Foods Foundation

Employer identification number

26-1481941

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---------------------------|--|--|----------------------|
| ----- | ----- ----- ----- ----- | \$----- | ----- |
| (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 |
| ----- | ----- ----- ----- ----- | \$----- | ----- |

Name of organization

Dawn Foods Foundation

Employer identification number

26-1481941

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total 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 |
|---|-------------------------|--|-------------------------------------|
| ----- | ----- ----- ----- | ----- ----- ----- | ----- ----- ----- |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| ----- ----- ----- | | ----- ----- ----- | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| ----- | ----- ----- ----- | ----- ----- ----- | ----- ----- ----- |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| ----- ----- ----- | | ----- ----- ----- | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| ----- | ----- ----- ----- | ----- ----- ----- | ----- ----- ----- |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| ----- ----- ----- | | ----- ----- ----- | |

Dawn Foods Foundation
26-14181941

Part VIII - Listing of Officers and Directors

| Name | Address | Title | Compensation |
|------------------------|--------------------------------------|-----------------|---------------------|
| Sarah C. Richmond | 3333 Sargent Road, Jackson, MI 49201 | President | \$0 |
| Ronald L. Jones | 3333 Sargent Road, Jackson, MI 49201 | Vice President | \$0 |
| Miles E. Jones | 3333 Sargent Road, Jackson, MI 49201 | Treasurer | \$0 |
| Samuel R. Jones | 3333 Sargent Road, Jackson, MI 49201 | Secretary | \$0 |
| Aaron M. Jones | 3333 Sargent Road, Jackson, MI 49201 | Asst. Treasurer | \$0 |
| Benjamin A. Jones | 3333 Sargent Road, Jackson, MI 49201 | Asst. Secretary | \$0 |
| Carrie L. Jones Barber | 3333 Sargent Road, Jackson, MI 49201 | Board Member | \$0 |

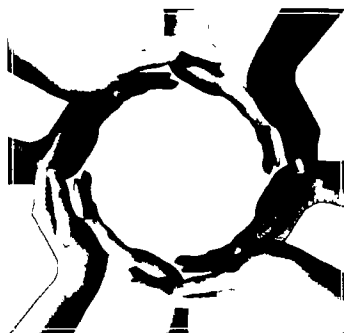


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"There are many needy people and worthy causes around the world that deserve our attention and help "

"Our ongoing successes at Dawn give the People of Dawn a tremendous opportunity to assist these needy populations and organizations with gifts of our personal time and other resources, especially in the many locations where Dawn is located around the world "

*– Miles E Jones,
Co-Chairman of the Board*

Commitment to Community

Community Improvement Making a Real Difference Across the Globe

Team Dawn is dedicated to serving the communities in which we live and work. The Dawn Foods Foundation is about more than simply giving money to worthy causes. We invest in our people and our communities around the globe and in the future of the baking industry, which we proudly serve. The Dawn Foods Foundation is a direct reflection of the ideals expressed in our Three Pillars – We know. We care. We can help®. The Foundation is clearly focused on supporting organizations that ensure the communities our people live in are healthy, educated and vibrant. Additionally, all of our Team Members are encouraged to become volunteers or mentors assisting the young and less fortunate.

For a list of locations currently accepting grant applications, please [click here](#).



The Dawn Foods Foundation Mission Statement

Dawn will actively strengthen the COMMUNITIES in which our Team Members work and live by supporting essential HEALTH, EDUCATION and COMMUNITY IMPROVEMENT initiatives.

We know. We care. We can help®



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Areas of Commitment



Areas of Commitment

Following the principles set forth in our Circle of Excellence and Three Pillars, Dawn has selected the following areas of commitment for our local and global investing

- Health and Well-being
- Education
- Community Improvement
- Volunteerism
- Product Donations

Health and Well-being

To support and strengthen our communities and team members, Dawn is committed to supporting services and groups that promote health, and well-being. Also, as a food business, we are equally concerned about the effects of hunger on our society. This is why we commit to supporting

- Healthy Lifestyle programs
- Alleviation and prevention of hunger
- Disease prevention and research

Education

Dawn understands the competitive value of an educated, knowledgeable workforce. Not only does our industry need skilled strategists, accountants and computer technicians, we need Team Members with advanced culinary skills in addition to food scientists and people who are outstanding bakers. All of these crucial skills require an excellent education. To help create and maintain an educated, global workforce, Dawn supports

- Programs and organizations that develop literacy for adults and children
- Vocational Baking Programs

Community Improvement

We want our Team Members and the communities in which they live, to grow and thrive. For that reason, Dawn supports organizations that enrich the lives of community members through the fine arts, including but not limited to

- Art, theatre, dance and music programs for people of all ages

Volunteerism

To help others and show gratitude for what we have, Dawn Team Members around the globe generously donate their time and resources. Whether individually, or as Team Dawn, all are encouraged to assist those in need.

Product Donations

As a global food products company, Dawn is especially sensitive to the needs of those who are hungry. We are committed to donating products to a variety of food banks and shelters where we have operating facilities and offices. Also, when possible, we donate finished goods to non-profits for use at special events.



Grant Seekers

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Grant Seekers Guidelines



Grant Seekers Guidelines

Welcome to the Dawn Foods Foundation. Thank you for looking to us to collaborate with your efforts. Before you complete a grant application, please familiarize yourself with our [Areas of Commitment](#) and determine if your venture aligns with ours. If you find that your proposal matches one of these areas and you are requesting less than \$500, we encourage you to mail a letter of request to the applicable [Dawn location](#). If you are requesting over \$500, please complete and mail in the grant application and other necessary paperwork to the applicable Dawn location. Grant requests are not accepted via email, fax or video.

What We Fund

We award grants from The Dawn Foods Foundation to organizations that

- Are tax exempt under section 501 (c) (3) of the U S Internal Revenue Tax Code
- Serve the people/community in which a Dawn facility is located
- Support one or more of our Areas of Commitment
- Complete the grant application and submit the requested documents to the applicable Dawn location (if necessary)
- Are in compliance with the Equal Employment Opportunities Act, and other federal, state and local laws and regulations

What We Don't Fund

In keeping with Foundation policies, budget limitations and federal laws the Dawn Foods Foundation does not fund the following

- Individuals
- Partisan political organizations, committees, candidates or public office holders
- Labor Unions
- Fraternal, service and veteran organizations
- Religious organizations in support of their sacramental or theological functions
- Fees for participation in competitive programs
- Debt-reduction campaigns
- Sports Tournaments
- Talent/Beauty Contests
- Loans
- Organizations that practice discrimination based on race, creed/religion, gender, sexual orientation, age, height, weight, marital status, national origin, ancestry, disability or veteran status

Multiple grants are rarely made to the same organization in the same calendar year

Preferred Criteria

The Foundation Board and review teams closely examine each proposal and conclude whether or not a request equates with our [Areas of Commitment](#) and/or funding ability. Proposals that contain the following are looked on with favor:

- Correlation with the Foundation's [Areas of Commitment](#)
- Support of local community
- Number of people benefiting from the project
- Specific, measurable outcomes
- Leveraging resources from other sources

Process and Timeline

Grant requests are received throughout the year at active Dawn locations. You will be notified via phone or email that your proposal has been received. Review of the proposal is conducted by a team at the applicable [Dawn location](#). Your request will either be declined, approved, or in need of additional information. You will be contacted via phone, email or US mail within two months of the receipt of your application with the outcome.

Should you have any questions, concerns, or need additional information, please contact Sarah Richmond at the Dawn Food Products Home Office in Jackson, Michigan at 800-248-1144.

If you believe your request is a good match for the Dawn Foods Foundation, please complete the application below and mail it to the appropriate [Dawn location](#).

[Adobe Acrobat Reader](#) must be installed on your system to view and print these files.



[Grant Application](#)



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Common Grant Application Format

Please provide the following information in this order. Use these headings, subheadings and numbers provided in your own word processing format, leaving flexibility for length of responses.

A. Narrative

1. Executive Summary

- Explain briefly, in one page or less, why your organization is requesting this grant, what outcomes are desired and how the grant will be spent.

2. Purpose of Grant

- State the need or problem that the grant will address; describe the target population and the benefit they will receive
- Describe the project goals, measurable objectives, action plans and state whether this is a new or ongoing part of the organization
- Define the timetable for implementation
- List other partners in the project and describe their roles
- Acknowledge similar, existing projects or agencies, if any, and explain how your agency or proposal differs and efforts being made to work cooperatively
- Describe the qualifications of key staff/volunteers that will ensure the success of the program. Define any specific staff training needs for this project
- Describe the long term strategies for funding of this project

3. Evaluation

- How will success of the project/program be defined and measured
- How will evaluation results be used and disseminated, and, if appropriate, how will the project be replicated
- Describe how the constituents will be involved in the evaluation

4. Budget Narrative/Justification

- Use the Grant Budget Format that follows
- On a separate sheet, explain how each budget item relates to the project and how the budgeted amount was calculated
- List amounts requested of other foundations, corporations and other funding sources for the support of this proposal
- If we are unable to meet your full request, please indicate priority items in the proposed budget

5. Organization Information

- Provide a brief summary of the organization's history
- State the organization's mission and goals
- Describe current programs, activities and accomplishments
- Provide an organizational chart including board, staff and volunteer involvement

B. Attachments

1. Copy of current IRS determination letter indicating 501 (C) (3) tax exempt status
2. Board of Directors with affiliations
3. Finances
 - Current operating budget, including expenses and revenue
 - Most recent financial statement (independently audited, if available; if not then attach Form 990)
4. Letters of Support – 2 to 3, verifying need for project and collaboration with other organizations (optional)
5. Annual Report, if available



Grant Application Cover Sheet

Date of Application: _____

Legal name of organization applying: _____
(Should be same as IRS determination letter and as noted on IRS Form 990)

EIN #: _____

Year Founded: _____

Current Operation Budget: _____

Executive Director: _____

Phone #: _____

Email address: _____

Contact Person/Title/Phone #: _____
(if different from Executive Director)

Address(administrative offices): _____

City, State, Zip: _____

Fax Number: _____ Email address: _____

List any previous support from the Dawn Foods Foundation in last 2 years:

Project Name: _____

Purpose of Grant (one sentence): _____

Desired Project Outcome/Measurables: _____

Dates of Project: _____ Amount Requested: _____

Total Project Cost: _____

Will you accept partial funding? _____

Geographic Area/Population Served: _____

Signature, Chair, Board of Directors

Print Name

Date

Signature, Executive Director

Print Name

Date



Grant Budget Form

Below is a listing of standard budget items. Please provide the project budget in this format and in this order.

- A. Organizational fiscal year: _____
- B. Time period this budget covers: _____
- C. For a capital request, substitute your format for listing expenses. These will likely include: architectural fees, land/building purchase, construction costs, and campaign expenses.
- D. Expenses: include a description and the total amount for each of the following budget categories, in this order:

| | <u>Amount requested from Dawn Foods Foundation</u> | <u>Total Project Expenses</u> |
|-------------------------------|--|-----------------------------------|
| Salaries | \$ _____ | \$ _____ |
| Payroll Taxes | \$ _____ | \$ _____ |
| Fringe Benefits | \$ _____ | \$ _____ |
| Consultant/Professional Fees | \$ _____ | \$ _____ |
| Insurance | \$ _____ | \$ _____ |
| Travel | \$ _____ | \$ _____ |
| Equipment | \$ _____ | \$ _____ |
| Supplies | \$ _____ | \$ _____ |
| Printing/Copying | \$ _____ | \$ _____ |
| Telephone/Fax | \$ _____ | \$ _____ |
| Postage/Delivery | \$ _____ | \$ _____ |
| Rent | \$ _____ | \$ _____ |
| Utilities | \$ _____ | \$ _____ |
| Maintenance | \$ _____ | \$ _____ |
| Evaluation | \$ _____ | \$ _____ |
| Marketing | \$ _____ | \$ _____ |
| Other (please specify) | \$ _____ | \$ _____ |
| Total Amount Requested | \$ _____ | \$ _____ |

- E. Revenue: include a description and the total amount for each of the following budget categories, in this order; please indicate which sources of revenue are committed and which are pending.

| | <u>Committed</u> | <u>Pending</u> |
|-----------------------------------|------------------|-----------------|
| 1. Grants/Contracts/Contributions | \$ _____ | \$ _____ |
| Local Government | \$ _____ | \$ _____ |
| Foundations (itemize) | \$ _____ | \$ _____ |
| State Government | \$ _____ | \$ _____ |
| Federal Government | \$ _____ | \$ _____ |
| Corporations (itemize) | \$ _____ | \$ _____ |
| Other (specify) | \$ _____ | \$ _____ |
| 2. Earned Income | | |
| Events | \$ _____ | \$ _____ |
| Publications and Products | \$ _____ | \$ _____ |
| 3. Membership Income | \$ _____ | \$ _____ |
| 4. In-Kind Support | \$ _____ | \$ _____ |
| 5. Other (specify) | \$ _____ | \$ _____ |
| Total Revenue | \$ _____ | \$ _____ |

Dawn Foods Foundation
26-14181941

Part XV(3) - Grants and Contributions paid during the year:

| Recipient Name | Address | Status | Amount |
|------------------------------------|----------------|---------------|---------------------------|
| Dibble Elem School | Jackson, MI | 501(c)(3) | \$1,000.00 |
| Jackson YMCA | Jackson, MI | 501(c)(3) | \$5,000.00 |
| Project Access/Lifeways | Jackson, MI | 501(c)(3) | \$2,000.00 |
| Western Schools Backpack/So Ctl FB | Jackson, MI | 501(c)(3) | \$3,000.00 |
| County of York CERT Prog. | York, PA | 501(c)(3) | \$1,000.00 |
| Family Child Resources | York, PA | 501(c)(3) | \$5,000.00 |
| JDRF | Jackson, MI | 501(c)(3) | \$1,000.00 |
| Stockbridge Comm Schools | Jackson, MI | 501(c)(3) | \$5,000.00 |
| Comm. Ventures Corp EiE | Jackson, MI | 501(c)(3) | \$600.00 |
| Jackson County ISD/Chllg Day | Jackson, MI | 501(c)(3) | \$500.00 |
| JCF, Imagination Library | Jackson, MI | 501(c)(3) | \$1,500.00 |
| JPS Promise Bowl | Jackson, MI | 501(c)(3) | \$1,000.00 |
| Jr. Achievement | Jackson, MI | 501(c)(3) | \$3,000.00 |
| Jacksons Audubon Society | Jackson, MI | 501(c)(3) | \$229.75 |
| Beecher PTO | Manteno, IL | 501(c)(3) | \$2,394.00 |
| S. June Smith Center | York, PA | 501(c)(3) | \$3,000.00 |
| York Literacy Council | York, PA | 501(c)(3) | \$5,000.00 |
| Natl Museum of Education | York, PA | 501(c)(3) | \$3,100.00 |
| Ella Sharp Museum - Amer Imp | Jackson, MI | 501(c)(3) | \$2,500.00 |
| Mich. Shakespeare Fest. | Jackson, MI | 501(c)(3) | \$3,000.00 |
| Jackson School of the Arts | Jackson, MI | 501(c)(3) | \$3,000.00 |
| Ella Sharp Museum - Art a Loan | Jackson, MI | 501(c)(3) | \$150.00 |
| Jackson Chorale | Jackson, MI | 501(c)(3) | \$1,000.00 |
| Kiwanis Flowering Tree Proj | Jackson, MI | 501(c)(3) | \$2,000.00 |
| Lyndon Rec Assoc | Louisville, KY | 501(c)(3) | \$5,000.00 |
| Springettsbury Twp; concert series | York, PA | 501(c)(3) | \$5,000.00 |
| United Way of Jackson | Jackson, MI | 501(c)(3) | \$500.00 |
| Nonprofit Network | Jackson, MI | 501(c)(3) | \$1,000.00 |
| Total | | | <u><u>\$66,473.75</u></u> |