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**Return of Private Foundation** 

Department of the Treasury Internal Revenue Service

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection

OMB No 1545-0052

F	or ca	alendar year 2013 or tax year beginning			and endi		, 20
	Name of foundation WARREN P. AND JOANNE C. POWERS CHARITABLE						fication number
	FOUNDATION, INC.						41
						e B Telephone num	ber (see instructions)
						(9	04) 353-5353
	105	0 TALLEYRAND AVENUE					
_	City o	or town, state or province, country, and ZIP or foreign po	stal code				
						C If exemption appli pending, check he	cation is
	JAC	KSONVILLE, FL 32206				pending, dreak ne	
G	Che	eck all that apply: Initial return	Initial return	of a former pu	ublic char	ity D 1. Foreign organiz	ations, check here
		Final return	Amended re	turn		2. Foreign organiz	ations meeting the
		Address change	Name chang	e			here and attach
H	Che	eck type of organization: X Section 501(	c)(3) exempt private f	oundation		1 '	on status was terminated
1		Section 4947(a)(1) nonexempt charitable trust	Other taxable pr			· ·	(b)(1)(A), check here .
1	Faiı		unting method X C	ash 🌅 Accr	ual	F If the foundation i	s in a 60-month termination
			ther (specify)			under section 507(	b)(1)(B), check here . 🕨
_			column (d) must be on	cash basis.)			<del></del>
Ġ	art	Analysis of Revenue and Expenses (The	(a) Revenue and	(b) Net inves	stment	(c) Adjusted net	(d) Disbursements for charitable
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expenses per	income		income	purposes
_		column (a) (see instructions).)	books				(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule).	93,500.				<del> </del>
	2	Check Lattach Sch. B					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	3	Interest on savings and temporary cash investments	190.		190.		ATCH 1
	4	Dividends and interest from securities	18,898.	1.6	3,898.		ATCH 2
	5 a	Gross rents					
		Net rental income or (loss)	FF 000		<u>(23)</u>	<del>\</del>	
ne	6a h	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 234,831	55,966.	<u> </u>	<b>/</b>	<del>}</del>	
Revenue		assets on line 6a		( ')	2000		
Re	7	Capital gain net income (from Part IV, line 2).	<del></del>	13:	£266.	<del>  [6]</del>	<del> </del>
	8	Net short-term capital gain		121		<del>-101</del>	<del> </del>
	9 10 a	Income modifications · · · · · · · · · · · · · · · · · · ·	<del></del>		<del>/ ~ /</del>	10/	<del> </del>
		and allowances · · · ·		<u> </u>	<del>1</del> <del>1</del>	2 101	
		Less Cost of goods sold .			<del>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</del>		<del> </del>
ļ		Gross profit or (loss) (attach schedule)			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	<del>/(50/</del>	
	11	Other income (attach schedule)	168,554.	7.5	0.54.	<u> </u>	<del>                                     </del>
_	12	Total. Add lines 1 through 11	100,000.		750	<u></u>	
	13	Compensation of officers, directors, trustees, etc					<del></del>
ses	14	Other employee salaries and wages Pension plans, employee benefits	33,500.				<del>                                     </del>
ē	16 a	Legal fees (attach schedule)					<del> </del>
몺	14 15 16 a c 17 18 19 20 21 22 23 24	Accounting fees (attach schedule)ATCH 3	2,600.	1	,300.		
è	'n	Other professional fees (attach schedule).*	11,404.		,404.		
ativ	17	Interest	, , , , ,				<del> </del>
str	12	Taxes (attach schedule) (see instructions)ATCH 5	14,579.		214.		
ij	19	Depreciation (attach schedule) and depletion.				<del> </del>	<del>                                     </del>
팅	20	Occupancy					
d b	21	Travel, conferences, and meetings			<del></del>		
an	22	Printing and publications	<del></del>	<del></del>			<del> </del>
ing	23	Other expenses (attach schedule)					
rati	24	Total operating and administrative expenses.					<del> </del>
be	-7	Add lines 13 through 23	162,083.	12	2,918.		}
	25	Contributions, gifts, grants paid					
	26	Total expenses and disbursements. Add lines 24 and 25	162,083.	12	2,918.		d o
	27	Subtract line 26 from line 12:	<del></del>	<del></del> -		<del></del>	
		Excess of revenue over expenses and disbursements	6,471.				
		Net investment income (if negative, enter -0-)		62	2,136.		
		Adjusted net income (if negative, enter -0-).					<del> </del>

For	rm 99	0-PF (2013) WARREN P. AND JOANNE	<del></del>		9-3156041 Page <b>2</b>
Part		Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	<del> </del>	of year
		amounts only. (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
ı	1	Cash - non-interest-bearing		02.441	02 441
Ì	2	Savings and temporary cash investments	61,360.	83,441.	83,441
	3	Accounts receivable ▶			
ſ		Less. allowance for doubtful accounts ▶			·
- 1	4	Pledges receivable	ì		
- 1		Less. allowance for doubtful accounts ▶			
- 1	5	Grants receivable		<del> </del>	
- 1	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			<u> </u>
J	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶			<u> </u>
ssets	8	Inventories for sale or use			
SS	9	Prepaid expenses and deferred charges			
		investments - U S and state government obligations (attach schedule)			
ĺ	b	Investments - corporate stock (attach schedule) ATCH 6	945,176.	1,022,439.	1,022,439
	. с	Investments - corporate bonds (attach schedule)			
- 1	11	Investments - land, buildings, and equipment basis			
- 1		and equipment basis Less accumulated depreciation (attach schedule)			
- 1	12	Investments - mortgage loans			
ļ	13	Investments - other (attach schedule)			
- 1	14	Land, buildings, and			
		equipment basis Less accumulated depreciation (attach schedule)			
-	15	Other assets (describe			
- 1	16	Total assets (to be completed by all filers - see the			
- }		instructions. Also, see page 1, item I)	1,006,536.	1,105,880.	1,105,880
П	17	Accounts payable and accrued expenses			
	18	Grants payable			
တ္တ	19	Deferred revenue			
≝I.	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
: ات	22	Other liabilities (describe ATCH 7 )	2,300.	2,173.	
- [		,			
- [;	23	Total liabilities (add lines 17 through 22)	2,300.	2,173.	
$\dashv$		Foundations that follow SFAS 117, check here			
<u>"</u>		and complete lines 24 through 26 and lines 30 and 31.			
힁.	24	Unrestricted			
틦	25	Temporarily restricted			
<b>66</b> ) (	26	Permanently restricted			
ᇍ	_0	Foundations that do not follow SFAS 117, • X			
리		check here and complete lines 27 through 31.			
Net Assets or Fund Balances	27	Capital stock, trust principal, or current funds	814,755.	814,755.	
윎	28	Paid-in or capital surplus, or land, bldg , and equipment fund	<del></del>	<del></del>	
SS	29	Retained earnings, accumulated income, endowment, or other funds	189,481.	288,952.	
	30	Total net assets or fund balances (see instructions)	1,004,236.	1,103,707.	
<u>ٽ</u> ارٽ	30 31	Total liabilities and net assets/fund balances (see			
- [		`	1,006,536.	1,105,880.	
D,	rt li	Instructions)			<del></del>
		al net assets or fund balances at beginning of year - Part II,		ist agree with	
					1,004,236
2	CHO.	-of-year figure reported on prior year's return)	· · · · · · · · · · · · · · · · · · ·		6,471
2	CHE	er amount from Part I, line 27a er increases not included in line 2 (itemize) ► ATCH 8	• • • • • • • • • • • • • • • • • • • •	2	93,000
3	Oth	er increases not included in line 2 (itemize) ATCA 6		3	1,103,707
4	Add	lines 1, 2, and 3		4	1,103,101
		reases not included in line 2 (itemize)	5\ D-41 1 "\	5	1,103,707
0	1018	al net assets or fund balances at end of year (line 4 minus li	ie э) - нап II, column (b),	ine 30 6	1,103,101

Form 994-PF (2013)					Page 3
Part IV Capital Gains	s and Losses for Tax on Inv	estment Income			
	nd describe the kind(s) of property sold (		(b) How	(c) Date acquired	(d) Date sold
<u>_</u>	brick warehouse; or common stock, 200	shs MLC Co.)	P - Purchase D - Donation	(mo., day, yr)	(mo., day, yr)
1a SEE PART IV SCHI	EDULE				
_b					
_c			<u> </u>		
_d	<del></del>		L		·
_e	<del>,</del>		<u></u>		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
<u>a</u>					
<u>b</u>					
С					
d					
<u>e</u>	<u>                                     </u>	<u>                               </u>	<u> </u>		
Complete only for assets	showing gain in column (h) and owne	d by the foundation on 12/31/69	(1)	Gams (Col. (h) ga	ain mınus
(i) F.M.V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col.	(k), but not less t Losses (from co	
a					
b					
c			<del> </del>		
d					·
е -					
2 Capital gain net income or	(net canital loce)	gain, also enter in Part I, line 7	2		55,966.
2. Not short term capital gain	انا 12 n or (loss) as defined in sections	(loss), enter -0- in Part I, line 7	2		33,900.
	rt I, line 8, column (c) (see insti		}		
			3		0
Part V Qualification	Under Section 4940(e) for Rec	luced Tay on Net Investment I		<del></del>	<u>_</u>
	the section 4942 tax on the distrib		ase period	?	Yes X No
	not qualify under section 4940(e).				
	ount in each column for each year	see the instructions before making	any entre		
(a) Base penod years	(b)	(c)		(d) Distribution ra	tio
Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		col (b) divided by	
2012	216,762.	970,323.			0.223392
2011	139,725.	1,064,792.			0.131223
2010	261,899.	1,063,754.	<u></u>		0.246203
2009	289,104. 270,415.	1,016,977. 841,833.			0.284278
2008	270,415.	841,833.			0.321222
2 Total of line 1, column (d)			2		1.206318
<del>-</del>	for the 5-year base period - divide	the total on line 2 by 5, or by the			
number of years the foun	dation has been in existence if less	than 5 years	3		0.241264
4 Enter the net value of nor	ncharitable-use assets for 2013 fro	m Part Y line 5	4	1.	049,934.
- Litter the het value of Hot	1011 C1 2013 101 2013 101	m Part X, line 5	<del>                                     </del>		
5 Multiply line 4 by line 3			5		253,311.
6 Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		621.
7 Add lines 5 and 6			7		253,932.
	· · · · · · · · · · · · · · · · · · ·				
	ons from Part XII, line 4 eater than line 7, check the box i		8		

Pa	ft VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ction	s)				
,1 a	Exempt operating foundations described in section 4940(d)(2), check here			_i				
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			243.				
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check							
	here and enter 1% of Part I, line 27b							
С	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-)							
3	Add lines 1 and 2		1,2	243.				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		1,2	243.				
6	Credits/Payments.							
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 9,026.							
b	Exempt foreign organizations - tax withheld at source							
C	Tax paid with application for extension of time to file (Form 8868).							
d	Backup withholding erroneously withheld							
7	Total credits and payments Add lines 6a through 6d		9,0	026.				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached							
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			702				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		/,	783.				
11	Enter the amount of line 10 to be: Credited to 2014 estimated tax ► 7,783. Refunded ► 11  It 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		Yes	l Na				
ıa	or intervene in any political campaign?	1a	res	No X				
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the	<u>"</u> "		<del></del>				
	definition)?	1 b		X				
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	"						
	distributed by the foundation in connection with the activities							
С	Did the foundation file Form 1120-POL for this year?	1c		Х				
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year							
	(1) On the foundation >\$(2) On foundation managers >\$							
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	1 1		[				
	foundation managers > \$	1						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X				
	If "Yes," attach a detailed description of the activities							
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	1						
	or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X				
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X				
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5						
	If "Yes," attach the statement required by General Instruction T.	i i						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.	1						
	By language in the governing instrument, or	1 1						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict		x					
_	with the state law remain in the governing instrument?	6	<u>x</u>					
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7						
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) FL,							
L								
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 G2 If "No." attach explanation	8ь	x					
9	of each state as required by General Instruction G? If "No," attach explanation	- 00						
3	4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete							
	Part XIV	9		х				
10								
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		х				
		لتت						

Pa	t VII-A Statements Regarding Activities (continued)			
,11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address  N/A			
14	The books are in care of ► NANCY POWERS  Located at ►1050 TALLEYRAND AVE JACKSONVILLE, FL  Section 4947(a)(1) progressing the firsts filling Form 990 PE in liquid Form 1941. Check here	-535	3	
	Located at ▶1050 TALLEYRAND AVE JACKSONVILLE, FL ZIP+4 ▶ 32206			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filling requirements for Form TD F 90-22.1. If "Yes," enter the name of	!	1	
	the foreign country			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly):		]	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	' İ	i	
	disqualified person?	İ	}	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	1	İ	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	1	]	
	the benefit or use of a disqualified person)? Yes X No	- 1		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	]	İ	
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.) Yes X No	1		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	ļ	ĺ	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here	İ		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		- 1	
	were not corrected before the first day of the tax year beginning in 2013?	1c		_ <u>x</u> _
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1	İ	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).		1	
а	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and	1	]	
	6e, Part XIII) for tax year(s) beginning before 2013? Yes X No			
	If "Yes," list the years	1	]	
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	Ì	1	
	all years listed, answer "No" and attach statement - see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	1	- 1	
	• • • • • • • • • • • • • • • • • • •	ł		
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	1	İ	
	at any time during the year? Yes X No	1	ļ	
b	If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or	Ì		
	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	)	Ì	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	1		
	foundation had excess business holdings in 2013.)	3b	}	
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	$\dashv$	<u> x</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	_ ]		v
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b		<u> </u>

Form	990-PF (2013) WARREN P. AND	JOANNE C. P	OWERS CHARITAI	3LE 59-	3156041	Page <b>6</b>
Pa	t VII-B Statements Regarding Activities f	or Which Form 4	720 May Be Requ	ired (continued)		
,5 a	During the year did the foundation pay or incur any amo	unt to.				
	(1) Carry on propaganda, or otherwise attempt to influe	ence legislation (section	n 4945(e))?	. Yes X N	。	ļ
	(2) Influence the outcome of any specific public ele	ection (see section	4955); or to carry o	n,		
	directly or indirectly, any voter registration drive?			Yes X N	.	ľ
	(3) Provide a grant to an individual for travel, study, or o				, l l	
	(4) Provide a grant to an organization other than a			_		
	section 509(a)(1), (2), or (3), or section 4940(d)(2)?		•		.	
	(5) Provide for any purpose other than religious, c			• — —		
	purposes, or for the prevention of cruelty to children	·	•		.	1
b	If any answer is "Yes" to 5a(1)-(5), did any of the					
_	Regulations section 53 4945 or in a current notice regard		, ,	•		}
	Organizations relying on a current notice regarding disas					
•	If the answer is "Yes" to question 5a(4), does the				ا ات	
·	because it maintained expenditure responsibility for the		•			Į
	If "Yes," attach the statement required by Regulations sec				'	İ
6.2	Did the foundation, during the year, receive any fun	` '	athe to now aromium	•	1 1	- (
va		•		Yes X No		
	on a personal benefit contract?				i 1	x
D	Did the foundation, during the year, pay premiums, dire	city or indirectly, on a	personal benefit contrat	ж	. 6b	- <del></del>
_	If "Yes" to 6b, file Form 8870			Yes X No	1 1	
	At any time during the tax year, was the foundation a pa			• — —		
	If "Yes," did the foundation receive any proceeds or have Information About Officers, Directors				. 7b	
Pa	and Contractors		<b>.</b>		byees,	
1	List all officers, directors, trustees, foundation i					
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expense other allow	
		devoted to position	enter -0-)	and deferred compensation		
7) Tr			100,000.	33,500.		0
AIC	н э	<del> </del>	100,000.	33,300.		
	<del></del>	<del> </del>				
	<del></del>		<del></del>		<del></del>	
2	Compensation of five highest-paid employees "NONE."	(other than thos	e included on line	e 1 - see instructi	ons). If non	e, enter
	NONE.	(b) Title, and average		(d) Contributions to		
(a	Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expense a other allow	account, rances
		devoted to position		compensation		
	NONE					
		<u>                                     </u>				
		1				
Tota	number of other employees paid over \$50,000 .			•		

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 NONE	
2	
All other program-related investments See instructions	
3 NONE	
Total. Add lines 1 through 3	

Form 990-PF(2013)

- 01111	330-11 (2013)		Page o
Par	see instructions.)	-	tions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitab	ole, etc.,	
	purposes:	) ]	
а	Average monthly fair market value of securities	1a	876,269.
b	Average of monthly cash balances	1b	60,720.
C	: Fair market value of all other assets (see instructions)	1c	128,934.
d		1d	1,065,923.
е		1 1	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Continue at the Continue Continue Continue	1	1,065,923.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount		
	instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, I	4	15,989.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, I	line 4 . 5	1,049,934.
6	Minimum investment return. Enter 5% of line 5	6	52,497.
Pari	t-XI- Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private opera and certain foreign organizations check here ▶ ☐ and do not complete this part.)	iting foundations	
1	Minimum investment return from Part X, line 6	1	52,497.
2 а		1,243.	
b			
c	Add be a On and Ob		1,243.
3	Distributable amount before adjustments. Subtract line 2c from line 1.		51,254.
4	Recoveries of amounts treated as qualifying distributions		
5	• • • • • • • • • • • • • • • • • • • •	1 1	51,254.
6			
7	Deduction from distributable amount (see instructions)  Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII		
	line 1		51,254.
		····	
Part	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	la l	
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	le, etc.,	
	purposes	2	
3	purposes Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years v	when calculating v	whether the foundation
	qualifies for the section 4940(e) reduction of tax in those years.		

Form 990-PF (2013)

Form 990-PF (2013)

Page **9** Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) Corpus Years prior to 2012 2012 2013 Distributable amount for 2013 from Part XI, 51,254. Undistributed income, if any, as of the end of 2013 2 Enter amount for 2012 only . . Total for pnor years 20 11 ,20 10 ,20 09 Excess distributions carryover, if any, to 2013. a From 2008 . . . . . . . 228,503. 238,635. From 2009 . . . . . . 211,246. From 2010 . . . . . . From 2011 . . . . . . 89,657 171,853. From 2012 . . . . . . 939,894. Total of lines 3a through e . . . . . . . . . . . . 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) . . . . . Treated as distributions out of corpus (Election required - see instructions) . . . . . . . . . . . . Applied to 2013 distributable amount . . . . . e Remaining amount distributed out of corpus . . 51,254. 51,254. Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a) ) Enter the net total of each column as indicated below: 888,640. a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 Prior years' undistributed income. Subtract line 4b from line 2b 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 4a from line 2a Taxable amount - see f Undistributed income for 2013 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2014 ......... Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions) 177,249 Excess distributions carryover to 2014. 711,391. Subtract lines 7 and 8 from line 6a . . . . . . . Analysis of line 9 238,635. a Excess from 2009 . . . 211,246. b Excess from 2010 . . . 89,657. c Excess from 2011 . . . 171,853. d Excess from 2012 . . . e Excess from 2013

Form 990-PF (2013)

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

SEE ATTACHED STATEMENT
JSA
3E1490 1 000

factors.

Part XV Supplementary Information (continued)						
3 Grants and Contributions Paid During the Year or Approved for Future Payment  Recipient Name and address (home or business)  Recipient Or substantial contribution  Recipient Or substantial contribution  Recipient Or substantial contribution  Recipient Or substantial contribution  Recipient Or substantial contribution  Recipient Or substantial contribution  Recipient Or substantial contribution  Recipient Or substantial contribution  Recipient Or substantial contribution  Recipient Or substantial contribution						
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	recipient	contribution			
a Paid during the year		1				
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b Approved for future payment	· · · · · · · · · · · · · · · · · · ·	· · · · · · ·				
b Approved for lature payment						
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Total	<del></del>					
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Part XVI-A Analysis of Income-Produ	icing Activ	vities			
Enter gross amounts unless otherwise indicated.		ated business income	Excluded by	section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
a					
b					
c					
d		<del></del>	<u> </u>	<del></del>	
e		,	ļ		
			<b> </b> -		
g Fees and contracts from government agencies			ļ	<del></del>	····
2 Membership dues and assessments					
Interest on savings and temporary cash investments     Dividends and interest from securities	_ <del>-</del>		14	19,088.	
5 Net rental income or (loss) from real estate:				, 13,000	
a Debt-financed property			<del></del>		
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	55,966.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue: a					
b		<u></u>			
c					
d					
e				75 054	
12 Subtotal. Add columns (b), (d), and (e)				75,054.	75,054.
Part XVI-B Relationship of Activities  Line No. Explain below how each activity accomplishment of the foundation	for which	income is reported in	column (e	) of Part XVI-A contribu	
JSA					Form <b>990-PF</b> (2013)

Par	t XVII	Information R Exempt Orga		ransfers To and	d Transacti	ions and	Relation	ships With Non	chari	table	)
1	Did th	e organization direc	tly or indirectly	engage in any of	f the following	with an	v other orga	anization described		Yes	No
	in sec	tion 501(c) of the Co									
а	-	fers from the reportir	na foundation t	o a noncharitable	exempt organ	uzation of					
		ish							1a(1)		Х
		her assets							1a(2)		Х
		transactions.									
	(1) Sa	les of assets to a no	ncharitable exe	empt organization					1b(1)		Х
	(2) Pu	rchases of assets fro	om a noncharit	able exempt organ	ızatıon				1b(2)		Х
	(3) Re	ental of facilities, equ	ipment, or othe	r assets					1b(3)		Х
	(4) Re	eimbursement arrang	ements						1b(4)		X
	(5) Lo	ans or loan guarante	es						1b(5)		Х
	(6) Pe	rformance of service	es or members	hip or fundraising :	solicitations .				1b(6)		X
C	Sharin	ig of facilities, equipr	nent, mailing li	sts, other assets, c	or paid employ	ees			1c		_ <u>x</u>
d	If the	answer to any of the	ne above is "Y	es," complete the	following so	hedule. C	olumn (b)	should always show	the t	faır m	arket
		of the goods, other									
		in any transaction oi									
(a) Lii	ne no	(b) Amount involved	(c) Name of	noncharitable exempt o	organization		ription of trans	fers, transactions, and shar	ing arrai	ngemer	nts
		N/A	ļ. —	<del></del>		N/A					
			<del>}</del>	<del></del>							
		<del></del>	<del></del> -			<del></del>		<del></del>			
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	$\neg \neg$	<del></del>									
			Ì -	<del>_</del>							
4	descrit	foundation directly oped in section 501(c)	of the Code (c		•		•		Ye	s X	] No
a	i res	," complete the follow (a) Name of organization		(h) Type o	f organization	т-		(c) Description of relations	hin		
		(a) Harris of organization		(0) 1)				to be some to the sales	····p		
			··· <del></del>		··		<del></del>				
				<del></del>							
		· <del></del>									
	Under	penalties of penury, I decla	are that I have exam	ined this return, including	accompanying sol	nedules and s	tatements, and	to the best of my knowledg	e and b	elief, it	ıs true,
Sian		t, and complete Declaration of	preparer (other than	taxpayer) is based on all info	ormation of which p	. '	· ` `				
Sign 		Names -		الحليل	4	Execu	five Dir	eda May the IRS	discuss		
Here	Sigi	nature of officer or trustee		Date		Title	<u></u>	(see instruction	`	Yes	No
		Print/Type preparer's na		Preparer's signate	16e //		Date	Check If F	PTIN		
Paid		JAMIE M JOLLE			lle		10/30	/ .	P002:	9374	4
Prep	arer		INZ & COM	PANY, LLP.			1. / 30/	Firm's EIN > 20-3			<u> </u>
-	Only			ON PARKWAY,	SUITE 20	6		rimsein P20 3			
	J,	<u> </u>	CKSONVILLE			322	56	Phone no 904-6	52-2	230	
		<del></del>		<del></del>				7 110110 110	m 990		(2013)

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

Department of the Treasury Internal Revenue Service

**Schedule of Contributors** 

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

Name of the organization		Employer identification number					
WARREN P. AND JOANNE C							
FOUNDATION, INC.	59-3156041						
Organization type (check one).							
Filers of:	Section:						
Form 990 or 990-EZ	501(c)( ) (enter number) organization						
ĺ	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation					
[	527 political organization						
Form 990-PF [	X 501(c)(3) exempt private foundation						
[	4947(a)(1) nonexempt charitable trust treated as a private foundat	ion					
[	501(c)(3) taxable private foundation						
	red by the <b>General Rule</b> or a <b>Special Rule.</b> ), or (10) organization can check boxes for both the General Rule and a S	pecial Rule. See					
	g Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 ocontributor. Complete Parts I and II	r more (in money or					
Special Rules							
under sections 509(a)(1	organization filing Form 990 or 990-EZ that met the 33 1/3 % support to and 170(b)(1)(A)(vi) and received from any one contributor, during the 0 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form	year, a contribution of					
during the year, total cor	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.							
990-EZ, or 990-PF), but it must an	ot covered by the General Rule and/or the Special Rules does not file So swer "No" on Part IV, line 2, of its Form 990, or check the box on line H tify that it does not meet the filing requirements of Schedule B (Form 990	of its Form 990-EZ or on its					

JSA

3E1251 1 000 81117I 765G 10/29/2014 8:36:04 AM

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization WARREN P. AND JOANNE C. POWERS CHARITABLE Employer identification number 59-3156041 FOUNDATION, INC.

Part I	Contributors (see instructions). Use duplicate copies of	Part I if additional space is nee	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	UNIT INTERNATIONAL  644 CESERY BLVD., SUITE 200  JACKSONVILLE, FL 32211	\$60,000. 	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2-	WARREN & JOANNE POWERS  1050 TALLEYRAND AVENUE  JACKSONVILLE, FL 32206	\$33,500.	Person  Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		   \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		   \$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization WARREN P. AND JOANNE C. POWERS CHARITABLE FOUNDATION, INC.

Employer identification number 59-3156041

Part II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is nee	eded.
(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
		\$	

Name of or	ganization WARREN P. AND JOANNE	C. POWERS CHAR	TTABLE	Employer identification number
•	FOUNDATION, INC.			59-3156041
Part III	Exclusively religious, charitable, etc that total more than \$1,000 for the	., individual contrib	outions to section	501(c)(7), (8), or (10) organizations
	For organizations completing Part III, contributions of \$1,000 or less for the	enter the total of exc	clusively religious.	charitable, etc
	Use duplicate copies of Part III if addit			
(a) No. from Part I	(b) Purpose of gift	(c) Use		(d) Description of how gift is held
Parti		<del></del>		
		(e) Transi	fer of gift	
			_	
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship 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) Transf	er of gift	
i	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee
			- <b></b>	
(a) No. from Part i	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, an	d ZIP + 4	Relation	nship of transferor to transferee
(a) No.	<u> </u>			
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	or of aift	
		(e) iransi	er or gut	
1	Transferee's name, address, an	nd ZIP + 4	Relation	nship of transferor to transferee
ŀ	rianoloree o name, address, an			omp or dansieror to dansieree

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

			INS AND LOSSES FOR TAX ON INVEST		114 A F 2 1 1	P	Date	Date sold		
			Description						acquired	Date solu
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)			
		TOTAL CAPIT	AL GAIN DIS	TRIBUTIONS	i		10,816.			
99,277.		CHARLES SCH	WAB #9700 -	SEE STMT A	ATCHD		VARIOUS -2,473.	VARIOUS		
64,177.		CHARLES SCH	WAB #9700 -	SEE STMT A	ATCHD		VARIOUS 23,623.	VARIOUS		
780.		200 SHS SUP 605.	ERVALU INC				07/12/2012 175.	01/31/201		
1,656.		425 SHS SUP 3,109.	ERVALU INC				VARIOUS -1,453.	01/31/201		
3,490.		3 SHS JUPITI 2,051.	ER TELECOMM	UNS ORDF	i		06/26/2006 1,439.	02/12/201		
469.		25 SHS STAR: 469.	Z LIBERTY C	AP ASER A			05/11/2006	03/01/201		
2,279.		100 SHS HUDS 1,483.	SON PAC PPT	YS INC			12/20/2010 796.	03/08/201		
4,321.		75 SHS TESON 1,864.	RO CORPORAT	ION			VARIOUS 2,457.	03/12/201		
1,963.		60 SHS NAVIS	STAR INTL CO	ORP NEW			11/12/2012 762.	04/10/201		
1,739.		25 SHS LIBER 382.	RTY GLOBAL :	INC			09/06/2005 1,357.	05/29/201		
1,082.		17 SHS TORCE	IMARK CORPOI	RATION			06/22/2009 676.	06/03/201		
592.		19 SHS CST E 410.	BRANDS INC				VARIOUS 182.	06/05/201		
							,			

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

Kind of F		INS AND LO	_	ription	114 4 FO [ ]	P or	Date	Date sold
Gross sale price less	Depreciation allowed/	Cost or other	FMV as of	Adj basis as of	Excess of FMV over	P	acquired Gain or	
expenses of sale 2,798.	allowable	basis 325 SHS GRAI 1,033.	12/31/69 PHIC PACKAG	1 12/31/69 SING HLDG	adj basis		(loss) 06/29/2010 1,765.	07/15/2013
1,377.		10 SHS LIBER	RTY MEDIA C	CORP			05/11/2006 1,202.	07/16/2013
2,851.		80 SHS MICRO 2,251.	DSOFT CORP				05/19/2010 600.	07/17/2013
1,766.		125 SHS CNO 918.	FINANCIAL	GROUP INC			08/02/2011 848.	07/24/2013
1,059.		75 SHS CNO E 551.	FINANCIAL G	ROUP INC			08/02/2011 508.	07/26/2013
1,748.		25 SHS TORCE 596.	MARK CORPO	RATION			06/22/2009 1,152.	07/26/2013
1,749.	,	25 SHS TORCE 596.	MARK CORPO	RATION			06/22/2009 1,153.	07/29/2013
1,194.	· 	25 SHS MERCH 857.	& CO INC	NEW			11/16/2010 337.	07/30/2013
2,155.		15 SHS LIBER 263.	RTY MEDIA C	ORP			05/11/2006 1,892.	08/12/2013
527.		1,300 SHS HC 1,458.	OOPER HOLME	S INC			VARIOUS -931.	09/06/2013
1,986.		16 SHS ROCK- 778.	TENN CO CL	Α			08/30/2010 1,208.	09/16/2013
1,912.		50 SHS NAVIS	STAR INTL C	ORP NEW			11/12/2012 911.	10/04/2013

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

T.		INS AND LOSSES FOR TAX ON INVEST		INVESTI	IPI — — —		
1	Kind of Property		Description			Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj. basis as of 12/31/69	Excess of FMV over adj basis	Gain or (loss)	
2,504.		27 SHS L-3 ( 1,954.	COMMUNICATI	ONS HLDGS		VARIOUS 550.	10/01/2013
2,132.		23 SHS L-3 ( 1,309.	COMMUNICATI	ONS HLDGS		09/22/2011 823.	10/08/2013
4,231.		127 SHS SAFI 2,304.	EWAY INC			VARIOUS 1,927.	10/10/2013
3,864.		210 SHS PARE 2,355.	(WAY PROPER	TIES INC RE	TI	VARIOUS 1,509.	10/18/2013
3,503.		320 SHS XERO 2,532.	OX CORP			VARIOUS 971.	10/22/2013
1,567.		75 SHS HUDSO 1,120.	ON PAC PPTY	S INC REIT		VARIOUS	10/24/2013
17.		58 SHS CROWN 29.	POINT ENE	RGY INC		05/31/2012	11/08/2013
1,510.		75 SHS HUDSO 1,128.	ON PAC PPTY	S REIT		VARIOUS 382.	11/14/2013
1,740.		40 SHS ARCHE 1,373.	CR-DANIELS-	MIDLND CO		VARIOUS 367.	12/19/2013
TOTAL GAIN(I	oss)					55,966.	
			•				
							!
		<u> </u>					

ATTACHMENT

59-3156041

- INTEREST ON TEMPORARY CASH INVESTMENTS PART I FORM 990PF,

NET INVESTMENT INCOME 190. EXPENSES PER BOOKS REVENUE AND DESCRIPTION INTEREST

190.

TOTAL

190. 190.

### ATTACHMENT 2

1 SECHRITIES	
FROM	
INTEREST	
AND	
DIVIDENDS	
1	
PART	
990PF,	
F.C.K.M	

NET INVESTMENT INCOME	18,898.
REVENUE AND EXPENSES PER BOOKS	18,898.
DESCRIPTION	DIVIDEND

18,898.

18,898.

TOTAL

ΑM
8:36:04
0/29/2014
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171 7
311

ENT 3		CHARITABLE PURPOSES		
ATTACHMENT 3		ADJUSTED NET INCOME		
		NET INVESTMENT INCOME	1,300.	1,300.
	II	REVENUE AND EXPENSES PER BOOKS	2,600.	2,600.
	FORM 990PF, PART I - ACCOUNTING FEES			TOTALS
	FORM 990PF, PART I	DESCRIPTION	ACCOUNTING FEES	

•	4
BINGN	277
1000	
E	775

S.H.H.H.
PROFESSIONAL,
OTHER
і Н
PART
990PF,
FORM 9

NET	INVESTMENT	10,840.
REVENUE AND	EXPENSES PER BOOKS	10,840.
	DESCRIPTION	PORTFOLIO MANAGEMNET MISC PORTFOLIO FEES

TOTALS

ATTACHMENT 5

- TAXES FORM 990PF, PART I

EXPENSES PER BOOKS REVENUE AND

NET INVESTMENT INCOME

FEDERAL EXCISE TAX FOREIGN TAX PAYROLL TAXES

DESCRIPTION

214.

6,707. 214. 7,658.

TOTALS

14,579.

STOCK
RATE
- CORPO
PART II
990PF,
FORM

	VARIOUS
	1
NC	STOCK
DESCRIPTION	CORPORATE

NING	VALUE
BEGIN	BOOK

TOTALS

ATTACHMENT 6

		ATTACHMENT	7
FORM 990PF, PART II - OTHER LIABILITIES			
DESCRIPTION		BEGINNING BOOK VALUE	ENDING BOOK VALUE
PAYROLL LIABILITIES		2,300.	2,173.
	TOTALS	2,300.	2,173.

ATTACHMENT 8

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

UNREALIZED GAIN

93,000.

TOTAL

93,000.

- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES FORM 990PF, PART VIII

ATTACHMENT

59-3156041

CONTRIBUTIONS BENEFIT PLANS TO EMPLOYEE COMPENSATION TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION 1.00 1.00 SECRETARY EXECUTIVE DIRECTOR DIRECTOR 8141 EAST KAISER BOULEVARD ANAHEIM HILLS, CA 92808 1050 TALLEYRAND AVENUE JACKSONVILLE, FL 32206 JACKSONVILLE, FL 32206 1050 TALLEYRAND AVENUE 1050 TALLEYRAND AVENUE JACKSONVILLE, FL 32206 PATRICK D. POWERS WARREN P. POWERS JOANNE C. POWERS NAME AND ADDRESS NANCY POWERS SUITE 300

33,500. 100,000.

100,000.

EXECUTIVE DIRECTOR

1050 TALLEYRAND AVENUE JACKSONVILLE, FL 32206

JANE COLLINS

GRAND TOTALS

### **SCHEDULE D** (Form 1041)

Department of the Treasury Internal Revenue Service

### **Capital Gains and Losses**

► Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

Information about Schedule D and its separate instructions is at www.irs.gov/form1041.

2013

OMB No 1545-0092

Name of estate or trust

WARREN P. AND JOANNE C. POWERS CHARITABLE

Employer identification number

59-3156041

FOUNDATION, INC. Note: Form 5227 filers need to complete only Parts I and II.

Pa	rt   Short-Term Capital Gains and Losses - Ass	ets Held One Yea	r or Less			
the	instructions for how to figure the amounts to enter on lines below form may be easier to complete if you round off cents	(d) Proceeds	(e) Cost	(g) Adjustment to gain or loss	from	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with
	hole dollars	(sales price)	(or other basis)	Form(s) 8949, F		column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					
	Totals for all transactions reported on Form(s) 8949 with Box A checked					
	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked	103,932.	104,557.			-625.
4	Short-term capital gain or (loss) from Forms 4684, 62	252, 6781, and 8824			4	
5 6	Net short-term gain or (loss) from partnerships, S corp Short-term capital loss carryover. Enter the amour Carryover Worksheet				5	( )
7	Net short-term capital gain or (loss). Combine line line 17, column (3) on the back				7	-625.
Pai	Long-Term Capital Gains and Losses - Ass	ets Held More Tha	n One Year			
he l	instructions for how to figure the amounts to enter on ines below	(d) Proceeds	(e) Cost	(g) Adjustments to gain or loss t	rom	(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents hole dollars.	(sales pnce)	(or other basis)	Form(s) 8949, P line 2, column		combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b					
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked	64,177.	40,554.			23,623.
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					_
10	Totals for all transactions reported on Form(s) 8949 with Box F checked	55,906.	33,754.			22,152.
11	Long-term capital gain or (loss) from Forms 2439, 466	84, 6252, 6781, and	8824		11	
12	Net long-term gain or (loss) from partnerships, S corp	orations, and other e	states or trusts		12	
13	Capital gain distributions	• • • • • • • • • • • • • • • • • • • •			13	10,816.
14	Gain from Form 4797, Part I				14	
15	Long-term capital loss carryover. Enter the amount Carryover Worksheet		·		15	( )
16	Net long-term capital gain or (loss). Combine lines line 18a, column (3) on the back				16	56,591.

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Schedule D (Form 1041) 2013

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Figure the tax on the amount on line 27 Use the 2013 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)....

Figure the tax on the amount on line 21 Use the 2013 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)....

Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule

### Form 8949

### Sales and Other Dispositions of Capital Assets

▶Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.

OMB No 1545-0074

Department of the Treasury Internal Revenue Service Name(s) shown on return

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Sequence No

WARREN P. AND JOANNE C. POWERS CHARITABLE

Social security number or taxpayer identification number 59-3156041

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box A, B, or C below, determine whether you'received any statement(s) and, if so, the transactions for which basis was reported to the IRS Brokers are required to report basis to the IRS for most stock you bought in 2011 or later

Short-Term. Transactions involving capital assets you held one year or less are short-term. For long-term transactions, see page 2.

Note. You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss. 1 f you enter an amount in column (g), (e) Cost or other enter a code in column (f) (d) (c) Gain or (loss). (a) See the separate instructions. Description of property Date sold or Proceeds basis See the Subtract column (e) Date acoured disposed (sales once) (Example 100 sh. XYZ Co) Note below and rom column (d) and (Mo, day, yr) (Mo, day, yr) (see instructions) (f) Code(s) from combine the result see Column (e) Amount of with column (a) instructions adjustment instructions CHARLES SCHWAB #9700 VARIOUS VARIOUS SEE STMT ATCHD 99,277. 101,750 -2,473. 07/12/2012 01/31/2013 200 SHS SUPERVALU INC 780. 605 175. 60 SHS NAVISTAR INTL 11/12/2012 04/10/2013 CORP NEW 1,963. 1,201 762. 50 SHS NAVISTAR INTL 11/12/2012 10/04/2013 CORP NEW 1,912. 1,001 911.

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if 103,932. 104,557 Box B above is checked), or line 3 (if Box C above is checked)▶ -625.

Note. If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Name(s) shown on return. (Name and SSN or taxpayer identification no not required if shown on other side )

WARREN P. AND JOANNE C. POWERS CHARITABLE

Social security number or taxpayer identification number

59-3156041

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Part II Long-Term. Transactions involving capital assets you held more than one year are long term. For short-term transactions, see page 1.

**Note.** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

X	(D) Long-term	transactions reported on Form(s)	) 1099-B showing basis was reported to the IRS (see Note above)
	(E) Long-term	transactions reported on Form(s)	1099-B showing basis was not reported to the IRS

(F) Long-term transactions not reported to you on Form 1099-B

(F) Long-term transactions i	not reported t	o you on For	m 1099-B				
(a)  Description of property (Example, 100 sh XYZ Co)	(b) Date acquired (Mo , day, yr)	(c) Date sold or disposed	(d) Proceeds (sales price)	(e) Cost or other basis See the Note below and	If you enter an a enter a co	any, to gain or loss. amount in column (g), de in column (f) rate instructions.	(h) Gain or (loss). Subtract column (e) from column (d) and
	( , day, y. )	(Mo, day, yr)	(see instructions)	see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
CHARLES SCHWAB #9700 -							
SEE STMT ATCHD	VARIOUS	VARIOUS	64,177.	40,554.	}		23,623.
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2 Totals. Add the amounts in colu (subtract negative amounts) E	ımns (a), (e), ( nter each tota	(g), and (n)		1			
include on your Schedule D, line	e 8b (if Box D	above is			[		
checked), line 9 (if Box E above (if Box F above is checked) ▶	is checked),	or line 10	64,177	40,554.			23,623.
(" DOY I GDOAG 19 CHECKER)			<u>_</u>	<u> </u>	<u> </u>		

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Name(s) shown on return (Name and SSN or taxpayer identification no not required if shown on other side )

WARREN P. AND JOANNE C. POWERS CHARITABLE

Social security number or taxpayer identification number

59-3156041

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**Note.** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS

X (F) Long-term transactions not reported to you on Form 1099-B

1 (a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo , day, yr)	(c) Date sold or disposed (Mo , day, yr )	(d) Proceeds (sales pnce) (see instructions)	(e) Cost or other basis See the Note below and see Column (e) in the separate	If you enter an enter a co	any, to gain or loss. amount in column (g), de in column (f) arate instructions.	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
				instructions	instructions	Amount of adjustment	,,,
425 SHS SUPERVALU INC	VARIOUS	01/31/2013	1,656.	3,109.			-1,453
3 SHS JUPITER TELECOMMUNS ORDF	06/26/2006	02/12/2013	3,490.	2,051.			1,439
25 SHS STARZ LIBERTY CAP ASER A	05/11/2006	03/01/2013	469.	469.			
100 SHS HUDSON PAC PPTYS INC	12/20/2010	03/08/2013	2,279.	1,483.			796
75 SHS TESORO CORPORATION	VARIOUS	03/12/2013	4,321.	1,864.			2,457
25 SHS LIBERTY GLOBAL INC	09/06/2005	05/29/2013	1,739.	382.			1,357
17 SHS TORCHMARK CORPORATION	06/22/2009	06/03/2013	1,082.	406.			676.
19 SHS CST BRANDS INC	VARIOUS	06/05/2013	592.	410.			182
325 SHS GRAPHIC PACKAGING HLDG	06/29/2010	07/15/2013	2,798.	1,033.			1,765
10 SHS LIBERTY MEDIA CORP	05/11/2006	07/16/2013	1,377.	175.			1,202
80 SHS MICROSOFT CORP	05/19/2010	07/17/2013	2,851.	2,251.			600
125 SHS CNO FINANCIAL GROUP INC	08/02/2011	07/24/2013	1,766.	918.			848.
75 SHS CNO FINANCIAL GROUP INC	08/02/2011	07/26/2013	1,059.	551.			508
25 SHS TORCHMARK CORPORATION	06/22/2009	07/26/2013	1,748.	596.			1,152.
2 Totals. Add the amounts in colu (subtract negative amounts). E include on your Schedule D, lin- checked), line 9 (if Box E above (if Box F above is checked) ▶	nter each tota e 8b (if Box D	I here and above is	55,906.	33,754.			22,152.

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Name(s) shown on return (Name and SSN or taxpayer identification no not required if shown on other side)

Social security number or taxpayer identification number 59-3156041

WARREN P. AND JOANNE C. POWERS CHARITABLE

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Long-Term. Transactions involving capital assets you held more than one year are long term. For short-term Part II transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS

(F) Long-term transactions not reported to you on Form 1099-B

(a)  Description of property  (Example 100 sh XYZ Co)	(b) Date acquired (Mo , day, yr)	(c) Date sold or disposed	(d) Proceeds (sales pnce)	(e) Cost or other basis See the Note below and	If you enter an a enter a co	any, to gain or loss. amount in column (g), de in column (f) irate instructions.	Gain or (loss). Subtract column (e) from column (d) and
(Example 100 Sil X12 CO)	(WO, day, yi)	(Mo , day, yr )	(see instructions)	see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
25 SHS TORCHMARK CORPORATION	06/22/2009	07/29/2013	1,749.	596.			1,153
25 SHS MERCK & CO INC NEW	11/16/2010	07/30/2013	1,194.	857.			337
15 SHS LIBERTY MEDIA CORP	05/11/2006	08/12/2013	2,155.	263.			1,892
1,300 SHS HOOPER HOLME INC	VARIOUS	09/06/2013	527.	1,458.			-931
16 SHS ROCK-TENN CO CL A	08/30/2010	09/16/2013	1,986.	778.			1,208
27 SHS L-3 COMMUNICATI NS HLDGS	VARIOUS	10/01/2013	2,504.	1,954.			550
23 SHS L-3 COMMUNICATI NS HLDGS	09/22/2011	10/08/2013	2,132.	1,309.			823
127 SHS SAFEWAY INC	VARIOUS	10/10/2013	4,231.	2,304.			1,927
210 SHS PARKWAY PROPERTIES INC REIT	VARIOUS	10/18/2013	3,864.	2,355.		<u> </u>	1,509
320 SHS XEROX CORP	VARIOUS	10/22/2013	3,503.	2,532.			971
75 SHS HUDSON PAC PPTY INC REIT	VARIOUS	10/24/2013	1,567.	1,120.			447
58 SHS CROWN POINT ENERGY INC	05/31/2012	11/08/2013	17.	29.			-12
75 SHS HUDSON PAC PPTY REIT	VARIOUS	11/14/2013	1,510.	1,128.			382
40 SHS ARCHER-DANIELS- IDLND CO	VARIOUS	12/19/2013	1,740.	1,373.			367
2 Totals. Add the amounts in colu (subtract negative amounts) Erinclude on your Schedule D, line checked), line 9 (if Box E above (if Box F above is checked) ▶	nter each tota e 8b (if Box D is checked),	here and above is or line 10					

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Schwab One® Account of WARREN P & JOANNE C POWERS CHA

Account Number 9148-9700

Report Period January 1 - December 31, 2013

### 2013 Year-End Schwab Gain/Loss Report

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Realized Gain or (Loss)					Accour	Accounting Method: High Cost
Short-Term	Quantity/Par	Acquired/ Opened	Sold/ Closed	Total Proceeds	Cost Basis	Realized Gain or (Loss)
BLACKROCK US OPPORTUNITIES PORT INST CL: BMCIX	302.9470	12/18/12	06/28/13	\$12,573.59	\$11,033.00	\$1,540.59
Security Subtotal				\$12,573.59	\$11,033.00	\$1,540.59
CALAMOS GROWTH AND INCM FD CL I: CGIIX	1,566.9070	08/09/12	04/02/13	\$50,341.78	\$50,049.95	\$291.83
Security Subtotal				\$50,341.78	\$50,049.95	\$291.83
CENTURYLINK INC: CTL	71.0000	12/18/12	02/15/13	\$2,327.28	\$2,853.00	(\$525.72)
Security Subtotal				\$2,327.28	\$2,853.00	(\$525.72)
DODGE & COX INTL STOCK FUND: DODFX	227.4670	12/18/12	11/26/13	\$9,670.62	\$8,024.00	\$1,646.62
Security Subtotal				\$9,670.62	\$8,024.00	\$1,646.62
ISHARES GOLD TRUST: IAU	200.0000	01/24/13	11/26/13	\$2,408.28	\$3,249.75	(\$841.47)
ISHARES GOLD TRUST: IAU	200.0000	01/24/13	11/26/13	\$2,408.29	\$3,249.87	(\$841.58)
ISHARES GOLD TRUST: IAU	200.0000	01/24/13	11/26/13	\$2,408.29	\$3,249.87	(\$841.58)
ISHARES GOLD TRUST: IAU	264.0000	01/24/13	11/26/13	\$3,178.94	\$4,289.84	(\$1,110.90)
Security Subtotal				\$10,403.80	\$14,039.33	(\$3,635.53)

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Schwab One® Account of WARREN P & JOANNE C POWERS CHA

Account Number Jai 9148-9700 20

Report Period January 1 - December 31, 2013

# 2013 Year-End Schwab Gain/Loss Report

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					Account	Accounting Method: High Cost
Short-Term (continued)	Quantity/Par	Acquired/ Opened	Sold/ Closed	Total Proceeds	Cost Basis	Realized
MARKET VECTORS ETF TRUSTGOLD MINERS FUND: GDX	147.0000	09/17/12 01/24/13	01/24/13	\$6,372.47	\$7,901.29	(\$1,528.82)
Security Subtotal				\$6,372.47	\$7,901.29	(\$1,528.82)
SPDR GOLD TRUST SPDR GOLD SHARES: GLD	47.0000	02/10/12 01/24/13	01/24/13	\$7,587.02	\$7,849.54	(\$262.52)
Security Subtotal				\$7,587.02	\$7.849.54	(\$262 52)
Total Short-Term				\$99,276.56	\$101,750.11	(\$2,473.55)

Long-Term	Quantity/Par	Acquired/ Opened	Sold/ Closed	Total Proceeds	Cost Basis	Realized Gain or (Loss)
ANNALY CAPITAL MGMT REIT: NLY	285.0000	08/19/10	08/19/10 06/12/13	\$3,727.16	\$5 007 17	(\$1.200.04)
Security Subtotal				\$3,727.16	\$5,007.17	(\$1,280.01)
BLACKROCK US OPPORTUNITIES PORT INST CL: BMCIX	T 1,094,5000	02/13/09	02/13/09 06/28/13	\$45,426.41	\$25,793.16	\$19,633.25
Security Subtotal				\$45,426.41	\$25,793.16	\$19,633.25
DODGE & COX INTL STOCK FUND: DODFX	242.9620	02/10/09	02/10/09 11/26/13	\$10,329.38	\$4,739.00	\$5,590.38
Security Subtotal				\$10,329.38	\$4,739.00	\$5,590.38

Schwab One® Account of WARREN P & JOANNE C POWERS CHA THE THE PARTY OF THE PROPERTY OF THE PARTY O

Report Pe Account Number January 9148-9700 2013

Report Period January 1 - December 31,

## 2013 Year-End Schwab Gain/Loss Report

### Realized Gain or (Loss) (continued)

Accounting Method: High Cost (\$256.98)(\$64.25)Realized Gain or (Loss) \$23,622.39 (\$321.23)Cost Basis \$4,011.86 \$40,554.16 \$1,002.97 \$5,014.83 \$938.72 Total Proceeds \$3,754.88 \$4,693.60 \$64,176.55 Sold/ Closed 08/19/10 08/15/13 08/15/13 Acquired/ Opened 08/19/10 25.0000 100.000 Quantity/Par U S PFD STK: PFF U S PFD STK: PFF Long-Term (continued) ISHARES U S PFD ETF ISHARES U S PFD ETF Security Subtotal Total Long-Term

\$21,148.84 Schwab has provided realized gain/loss information wherever possible for most investments. Cost basis data may be incomplete or unavailable for some of your holdings. See Terms and \$142,304.27 \$163,453.11 Conditions. Option Customers: Realized gain/loss of underlying securities is adjusted to reflect the premiums of assigned or exercised options. Total Realized Gain or (Loss)

Page 4 of 6

### FEDERAL FOOTNOTES

FORM 990-PF, PART XV, LINE 2D

PURPOSES AND RESTRICTIONS. THE PURPOSES OF THE CORPORATION AND RESTRICTIONS ON ITS OPERATIONS ARE AS FOLLOWS:

- (A) THIS CORPORATION IS ORGANIZED AND OPERATED FOR THE PURPOSE OF SUPPORTING THE PROPAGATION, MORAL DEVELOPMENT AND HUMANITARIAN MINISTRIES OF THE ROMAN CATHOLIC CHURCH AND TO ASSIST HUMANITARIAN SERVICES TO THE PHYSICALLY, MENTALLY OR ECONOMICALLY DISADVANTAGED CONSISTENT WITH THE REQUIREMENTS FOR QUALIFICATION AS AN EXEMPT ORGANIZATION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE OF 1986, AS AMENDED (OR THE CORRESPONDING PROVISION OF ANY FUTURE UNITED STATES INTERNAL REVENUE LAW, HEREINAFTER "CODE").
- (B) THE CORPORATION SHALL RESTRICT ITS OPERATIONS TO THE PROMOTION OF RELIGIOUS, CHARITABLE, EDUCATIONAL AND HUMANITARIAN PURPOSES AS DESCRIBED ABOVE WITHIN THE MEANING OF SECTION 501 (C)(3) OF THE CODE. NOTWITHSTANDING ANY PROVISION OF THESE ARTICLES OF INCORPORATION TO THE CONTRARY, THE CORPORATION SHALL TAKE NO ACTION INCONSISTENT WITH THE PROVISION OF THE FLORIDA NOT FOR PROFIT CORPORATION ACT.
- (C) NO PART OF THE NET EARNINGS OF THE CORPORATION SHALL INURE TO THE BENEFIT OF, OR BE DISTRIBUTABLE TO ITS MEMBERS, DIRECTORS, OFFICERS, OR OTHER PRIVATE PERSONS, EXCEPT THAT THE CORPORATION SHALL BE AUTHORIZED AND EMPOWERED TO PAY REASONABLE COMPENSATION FOR SERVICES RENDERED AND TO MAKE PAYMENTS AND DISTRIBUTIONS IN FURTHERANCE OF THE PURPOSES SET FORTH THEREIN.
- (D) TO DO ANY AND ALL THINGS AND EXERCISE ANY AND ALL POWERS, RIGHTS AND PRIVILEGES PROVIDED HEREIN AND IN THE BYLAWS CONSISTENT WITH ITS PURPOSES AND WITH THE PROVISIONS OF SECTION 501 (C)(3) OF THE CODE AND THE FLORIDA NOT FOR PROFIT CORPORATION ACT.

Form 8868 (Re	ev 1-2014)				Page 2		
	filing for an Additional (Not Automatic) 3-M	onth Exter	sion, complete only Part I	II and check this box			
1	complete Part II if you have already been gra						
• If you are	filing for an Automatic 3-Month Extension,	complete d	only Part I (on page 1)				
Part II	Additional (Not Automatic) 3-Month E	xtension o	of Time. Only file the original	ginal (no copies needed).			
		nter filer's identifying number, se	e instructions				
	Name of exempt organization or other filer, see in	structions.	<del></del>	Employer identification number (E	EIN) or		
Type or	WARREN P. AND JOANNE C. POWE	RS CHAR	ITABLE				
print	FOUNDATION, INC.			59-3156041			
File by the	Number, street, and room or suite no. If a P.O. bo	x, see instru	ctions.	Social security number (SSN)			
due date for	1050 TALLEYRAND AVENUE			<u> </u>			
filing your return See	City, town or post office, state, and ZIP code. For	a foreign ad	dress, see instructions				
instructions	JACKSONVILLE, FL 32206						
Enter the Re	eturn code for the return that this application	is for (file a	a separate application for ea	ach return)	. 04		
Application	n	Return	Application		Return		
ls For		Code	Is For		Code		
Form 990 d	or Form 990-EZ	01			T		
Form 990-BL 02 Form 4720 (individual) 03			Form 1041-A		08		
Form 4720 (Individual)			Form 4720 (other than in	idividual)	09		
Form 990-PF			Form 5227		10		
Form 990-T (sec. 401(a) or 408(a) trust)			Form 6069	11			
Form 990-T (trust other than above) 06 Form 8870							
STOP! Do n	ot complete Part II if you were not already	granted ar	automatic 3-month exter	nsion on a previously filed For	m 8868.		
• The book	s are in the care of NANCY POWERS, 10	050 TALI	LEYRAND AVE JACKSO	NVILLE, FL 32206			
Telephon	e No ▶ 904 353-5353		ax No. ▶		_		
	anization does not have an office or place of I				▶ 🔲		
• If this is for	or a Group Return, enter the organization's for	ur digit Gro	oup Exemption Number (GE	N)	nis is		
for the whol	e group, check this box ▶ 🔙 . If	f it is for pa	art of the group, check this	box ▶ and att	tach a		
list with the	names and EINs of all members the extension	n is for					
4 I reque	est an additional 3-month extension of time ur	ntil		1/15 , 20 14 .	<del></del>		
5 For ca	lendar year <u>2013</u> , or other tax year beginn	ng	, 20, an	nd ending,	20		
6 If the ta	ax year entered in line 5 is for less than 12 m	onths, chec	k reason Initial re	turn Final return			
	change in accounting period		<del></del>	<del></del>			
7 State i	n detail why you need the extension ADDIT	IONAL T	IME IS NEEDED IN O	ORDER TO FILE A			
COMPI	LETE AND ACCURATE RETURN.						
8a If this	application is for Forms 990-BL, 990-PF, 99	90-T, 4720	or 6069, enter the tent	tative tax, less any			
nonrefundable credits. See instructions.							
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and							
estimated tax payments made Include any prior year overpayment allowed as a credit and any							
amoun	t paid previously with Form 8868			8b \$	9,026.		
c Balanc	e Due. Subtract line 8b from line 8a Include	your paym	ent with this form, if requir	ed, by using EFTPS			
(Electr	onic Federal Tax Payment System) See instruc	ctions		8c \$	0		
	Signature and Verifica	tion mu	st be completed for P				
•	ies of perjury, I declare that I have examined the delief, it is true, correct, and complete, and that I	nis form, inc	cluding accompanying sched	<u>-</u>	best of my		
Signature >			Title >	Date ►			
				Form <b>8868</b>	(Rev 1-2014)		