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Form **990-PF**

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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 instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2014

Open to Public Inspection

For calendar year 2014, or tax year beginning 01-01-2014 , and ending 12-31-2014

Name of foundation THE STELLAR FOUNDATION		A Employer identification number 20-3808875	
Number and street (or P O box number if mail is not delivered to street address) 2900 HARTLEY ROAD		B Telephone number (see instructions) (904) 260-2900	
City or town, state or province, country, and ZIP or foreign postal code JACKSONVILLE, FL 32257		C If exemption application is pending, check here ☐	
G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change		D 1. Foreign organizations, check here ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ☐	
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ☐	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 9,970		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐	
J Accounting method ☐ Cash ☒ Accrual ☐ 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)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	264,589			
	2 Check ☐ 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)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	264,589	0	0	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0	0	0	0
	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)	41,085	0	0	0
	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)	189	0	0	0
	24 Total operating and administrative expenses. Add lines 13 through 23	41,274	0	0	0
	25 Contributions, gifts, grants paid	221,948			221,948
	26 Total expenses and disbursements. Add lines 24 and 25	263,222	0	0	221,948
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	1,367			
	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	7,894	9,809	9,809
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶ <u>161</u>			
		Less allowance for doubtful accounts ▶ _____	349	161	161
	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 ▶ _____			
Liabilities		Less accumulated depreciation (attach schedule) ▶ _____			
	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)	8,243	9,970	9,970
	17	Accounts payable and accrued expenses		360	
	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 ▶ _____)			
	23	Total liabilities (add lines 17 through 22)	0	360	
Net Assets or Fund Balances		Foundations that follow SFAS 117, check here ▶ ☒ and complete lines 24 through 26 and lines 30 and 31.			
	24	Unrestricted	8,243	9,610	
	25	Temporarily restricted			
	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.			
	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)	8,243	9,610	
	31	Total liabilities and net assets/fund balances (see instructions) . .	8,243	9,970	

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 8,243
2	Enter amount from Part I, line 27a	2 1,367
3	Other increases not included in line 2 (itemize) ▶ _____	3 0
4	Add lines 1, 2, and 3	4 9,610
5	Decreases not included in line 2 (itemize) ▶ _____	5 0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6 9,610

Part IV

Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1a						
(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) F M V as of 12/31/69		(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any			
a						
b						
c						
d						
e						
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }					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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))		
2013	187,670	5,425	34 593548		
2012	180,993	21,846	8 284949		
2011	233,270	59,974	3 889519		
2010					
2009					
2 Total of line 1, column (d).				2	46 768016
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	15 589339
4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5.				4	8,719
5 Multiply line 4 by line 3.				5	135,923
6 Enter 1% of net investment income (1% of Part I, line 27b).				6	0
7 Add lines 5 and 6.				7	135,923
8 Enter qualifying distributions from Part XII, line 4.				8	221,948
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					

Part VI

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

1a Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b		1	0
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	0
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	0
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	0
6 Credits/Payments			
a 2014 estimated tax payments and 2013 overpayment credited to 2014	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 ☐ 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	
11 Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded		11	

Part VII-A

Statements Regarding Activities

1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	Yes	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? 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.	1b		No
c Did the foundation file Form 1120-POL for this year?	1c		No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$ 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? If "Yes," attach a detailed description of the activities.	2		No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.	5		No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV.	7	Yes	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) FL			
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		No
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses. 	10	Yes	

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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
Website address ▶ WWW.THESTELLARFOUNDATION.ORG				
14	The books are in care of ▶ SCOTT V WITT Telephone no ▶ (904) 260-2900 Located at ▶ 2900 HARTLEY ROAD JACKSONVILLE FL ZIP +4 ▶ 32257			
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 ▶	15		
16	At any time during calendar year 2014, 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 instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶				

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?. ☐ Yes ☒ No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ 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)?. ☐ Yes ☒ 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). ☐ Yes ☒ 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 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 2014?. 1c			No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?. ☐ Yes ☒ 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			
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?. ☐ Yes ☒ No			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.</i>). 3b			
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

Part VII-B

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

5a

During the year did the foundation pay or incur any amount to

(1)

Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

Yes

No

(2)

Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

Yes

No

(3)

Provide a grant to an individual for travel, study, or other similar purposes?

Yes

No

(4)

Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).

Yes

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?

Yes

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.

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?

Yes

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?

Yes

No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

No

If "Yes" to 6b, file Form 8870.

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

Yes

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 Additional Data Table				

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.

0

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.		0

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	
All other program-related investments. See instructions.	
3	
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	8,852
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	8,852
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	8,852
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	133
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	8,719
6	Minimum investment return. Enter 5% of line 5.	6	436

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	436
2a	Tax on investment income for 2014 from Part VI, line 5.	2a	
b	Income tax for 2014 (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	436
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	436
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . .	7	436

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	221,948
b	Program-related investments—total from Part IX-B.	1b	0
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	221,948
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	221,948

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 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				436
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2014				
a From 2009.	174,107			
b From 2010.	242,043			
c From 2011.	230,271			
d From 2012.	179,901			
e From 2013.	187,399			
f Total of lines 3a through e.	1,013,721			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 221,948				
a Applied to 2013, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2014 distributable amount.				436
e Remaining amount distributed out of corpus	221,512			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,235,233			
b Prior years' undistributed income Subtract line 4b from line 2b.		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions). . .	174,107			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	1,061,126			
10 Analysis of line 9				
a Excess from 2010. . . .	242,043			
b Excess from 2011. . . .	230,271			
c Excess from 2012. . . .	179,901			
d Excess from 2013. . . .	187,399			
e Excess from 2014. . . .	221,512			

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 2014, enter the date of the ruling.

b

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

☐ 4942(j)(3) or ☐ 4942(j)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.	Tax year	Prior 3 years			(e) Total
		(a) 2014	(b) 2013	(c) 2012	(d) 2011	
b	85% of line 2a					
c	Qualifying distributions from Part XII, line 4 for each year listed.					
d	Amounts included in line 2c not used directly for active conduct of exempt activities.					
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c.					
3	Complete 3a, b, or c for the alternative test relied upon					
a	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties).					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					

Part XV

Supplementary Information (Complete this part only if the organization 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))

b

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

2

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

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see 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

STELLAR FOUNDATION
2900 HARTLEY ROAD
JACKSONVILLE, FL 32257
(904) 260-2900

b

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

SEE FOUNDATION'S WEBSITE AT WWW.THESTELLARFOUNDATION.ORG

c

Any submission deadlines

SEE FOUNDATION'S WEBSITE AT WWW.THESTELLARFOUNDATION.ORG

d

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

SEE FOUNDATION'S WEBSITE AT WWW.THESTELLARFOUNDATION.ORG

Part XV

Supplementary Information (continued)

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total			3a	221,948
b Approved for future payment				
Total			3b	0

Enter gross amounts unless otherwise indicated

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

Form **990-PF** (2014)

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ALLISON KORMAN SHELTON	DIRECTOR 10 00	0	0	0
2900 HARTLEY ROAD JACKSONVILLE,FL 32257				
CLINT E PYLE	DIRECTOR 1 00	0	0	0
2900 HARTLEY ROAD JACKSONVILLE,FL 32257				
MICHAEL S SANTARONE	DIRECTOR 1 00	0	0	0
2900 HARTLEY ROAD JACKSONVILLE,FL 32257				
RICHARD M LOVELACE	DIRECTOR 1 00	0	0	0
2900 HARTLEY ROAD JACKSONVILLE,FL 32257				
SCOTT V WITT	DIRECTOR 1 00	0	0	0
2900 HARTLEY ROAD JACKSONVILLE,FL 32257				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
AMERICAN HEART ASSOCIATION 5851 ST AUGUSTINE RD JACKSONVILLE,FL 32207	NONE		GENERAL SUPPORT	1,000
BAPTIST HEALTH FOUNDATION 841 PRUDENTIAL DRIVE STE 1300 JACKSONVILLE,FL 32207	NONE		GENERAL SUPPORT	1,500
BARTRAM TRAIL HIGH SCHOOL 7399 LONGLEAF PINE PARKWAY ST JOHNS,FL 32259	NONE		GENERAL SUPPORT	250
BASEBALL FACTORY 9212 BERGER ROAD STE 200 COLUMBIA,MD 21046	NONE		GENERAL SUPPORT	200
BELL & EVANS CHARITY GOLF EVEN 154 W MAIN STREET FREDERICKSBURG,PA 17026	NONE		GENERAL SUPPORT	15,000
BISHOP JOHN SNYDER HS 5001 SAMARITAN WAY JACKSONVILLE,FL 32210	NONE		GENERAL SUPPORT	250
BOLLES SCHOOL 7400 SAN JOSE BLVD JACKSONVILLE,FL 32217	NONE		GENERAL SUPPORT	1,000
BOY SCOUTS OF AMERICA 521 SOUTH EDGEWOOD DR JACKSONVILLE,FL 32205	NONE		GENERAL SUPPORT	2,500
CATHEDRAL ARTS PROJECT 4063 SALISBURY RD STE 107 JACKSONVILLE,FL 32216	NONE		GENERAL SUPPORT	200
CHILDREN'S MIRACLE NETWORK 580 W 8TH ST TOWER ONE JACKSONVILLE,FL 32209	NONE		GENERAL SUPPORT	380
CITIZENS ECONOMIC DEVELOPMENT PO BOX 1346 REIDSVILLE,FL 27323	NONE		GENERAL SUPPORT	250
CLAY COUNTY SOCCER CLUB 4387 LAKESHORE DRIVE FLEMING ISLAND,FL 32003	NONE		GENERAL SUPPORT	500
CLAY COUNTY SOCCER CLUB 4387 LAKESHORE DRIVE FLEMING ISLAND,FL 32003	NONE		GENERAL SUPPORT	500
COMMUNITY CONNECTIONS PO BOX 41086 JACKSONVILLE,FL 32203	NONE		GENERAL SUPPORT	1,250
COMMUNITY FOUNDATION INC THE 245 RIVERSIDE AVENUE JACKSONVILLE,FL 32202	NONE		GENERAL SUPPORT	1,750
Total  3a				221,948

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
COMMUNITY HOSPICE 4266 SUNBEAM ROAD JACKSONVILLE,FL 32257	NONE		GENERAL SUPPORT	500
CULTURAL COUNCIL OF GREATER JA 300 W WATER ST JACKSONVILLE,FL 32202	NONE		GENERAL SUPPORT	500
CUMMER MUSEUM 829 RIVERSIDE AVE JACKSONVILLE,FL 32204	NONE		GENERAL SUPPORT	500
CYSTIC FIBROSIS FOUNDATION 8382 BAYMEADOWS RD JACKSONVILLE,FL 32256	NONE		GENERAL SUPPORT	1,500
DANIEL FOUNDATION 4203 SOUTHPOINT BLVD JACKSONVILLE,FL 32216	NONE		GENERAL SUPPORT	1,600
DOUGLAS ANDERSON BOOSTERS INC 2445 SAN DIEGO ROAD JACKSONVILLE,FL 32207	NONE		GENERAL SUPPORT	1,000
DREAMS COME TRUE 6803 SOUTHPOINT PARKWAY JACKSONVILLE,FL 32216	NONE		GENERAL SUPPORT	5,000
FCA GOLF PO BOX 664 PONTE VEDRA BEACH,FL 32004	NONE		GENERAL SUPPORT	500
FIRST COAST BUSINESS HALL OF FAME 1211 N WEST SHORE BLVD STE 305 TAMPA,FL 33607	NONE		GENERAL SUPPORT	500
FIRST COAST NUTCRACKER BALLET 300 W WATER ST JACKSONVILLE,FL 32202	NONE		GENERAL SUPPORT	1,500
JACKSONVILLE CHILDREN'S CHORUS 225 E DUVAL STREET JACKSONVILLE,FL 32202	NONE		GENERAL SUPPORT	500
FLEMING ISLAND HIGH SCHOOL 2233 VILLAGE SQUARE PARKWAY ORANGE PARK,FL 32003	NONE		GENERAL SUPPORT	250
FLETCHER HIGH SCHOOL BAND BOOS 700 SEAGATE AVE JACKSONVILLE,FL 32266	NONE		GENERAL SUPPORT	750
FLORIDA STATE COLLEGE FOUNDATI 501 W STATE ST JACKSONVILLE,FL 32202	NONE		GENERAL SUPPORT	5,000
FRIENDS OF FLORIDA THEATER 128 E FORSYTH ST JACKSONVILLE,FL 32202	NONE		GENERAL SUPPORT	1,000
Total  3a				221,948

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
GREYHOUNDS AS PETS PO BOX 959 ORANGE PARK,FL 32067	NONE		GENERAL SUPPORT	1,500
HOPE HAVEN CHILDRENS CLINIC 4600 BEACH BLVD JACKSONVILLE,FL 32207	NONE		GENERAL SUPPORT	1,000
IN THE PINK 175 ROSCOE BLVD PONTE VEDRA BEACH,FL 32082	NONE		GENERAL SUPPORT	5,500
JACKSONVILLE CHILDREN'S CHORUS 225 E DUVAL STREET JACKSONVILLE,FL 32202	NONE		GENERAL SUPPORT	250
JACKSONVILLE COUNTRY DAY SCHOO 10063 BAYMEADOWS RD JACKSONVILLE,FL 32256	NONE		GENERAL SUPPORT	5,000
JACKSONVILLE HUMANE SOCIETY 8464 BEACH BLVD JACKSONVILLE,FL 32216	NONE		GENERAL SUPPORT	1,000
JACKSONVILLE SYMPHONY ORCHESTR 300 W WATER ST SUITE 200 JACKSONVILLE,FL 32202	NONE		GENERAL SUPPORT	2,500
JACKSONVILLE YOUTH SOCCER CLUB PO BOX 57065 JACKSONVILLE,FL 32241	NONE		GENERAL SUPPORT	25,000
JEWISH COMMUNITY ALLIANCE 8505 SAN JOSE BLVD JACKSONVILLE,FL 32217	NONE		GENERAL SUPPORT	700
JEWISH COMMUNITY ALLIANCE 8505 SAN JOSE BLVD JACKSONVILLE,FL 32217	NONE		GENERAL SUPPORT	10,000
JT TOWNSEND FOUNDATION 8152 SEVEN MILE DR PONTE VEDRA BEACH,FL 32082	NONE		GENERAL SUPPORT	1,500
JULINGTON CREEK BASEBALL 450-106 STATE RD 13N 231 JACKSONVILLE,FL 32259	NONE		GENERAL SUPPORT	500
JUNIOR ACHIEVEMENT 4049 WOODCOCK DRIVE JACKSONVILLE,FL 32207	NONE		GENERAL SUPPORT	1,500
JUNIOR LEAGUE OF JACKSONVILLE 2165 PARK ST JACKSONVILLE,FL 32204	NONE		GENERAL SUPPORT	300
JUVENILE DIABETES FOUNDATION 9700 PHILIPS HWY STE 106 JACKSONVILLE,FL 32256	NONE		GENERAL SUPPORT	500
Total  3a				221,948

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
K9S FOR WARRIORS 260 S ROCOE BLVD PONTE VEDRA BEACH,FL 32082	NONE		GENERAL SUPPORT	2,000
KIWANIS CLUB OF HISTORIC ST AU PO BOX 3063 SAINT AUGUSTINE,FL 32085	NONE		GENERAL SUPPORT	300
LEADERSHIP FLORIDA PO BOX 11309 TALLAHASSEE,FL 32302	NONE		GENERAL SUPPORT	275
LEADERSHIP JACKSONVILLE 4049 WOODCOCK DRIVE JACKSONVILLE,FL 32207	NONE		GENERAL SUPPORT	1,500
NEASE TOUCHDOWN CLUB 52 TUSCAN WAY SAINT AUGUSTINE,FL 32092	NONE		GENERAL SUPPORT	250
NONPROFIT CENTER 1301 RIVERPLACE BOULEVARD JACKSONVILLE,FL 32207	NONE		GENERAL SUPPORT	1,500
ONE LOVE FOUNDATION 1122 KENLIWORT DR SUIT 307 BALTIMORE,MD 21204	NONE		GENERAL SUPPORT	1,000
ONEJAX 1 UNF DR BUILDING 53 SUITE 2100 JACKSONVILLE,FL 32224	NONE		GENERAL SUPPORT	2,500
POLICE ATHLETIC LEAGUE OF JACK PO BOX 351060 JACKSONVILLE,FL 32235	NONE		GENERAL SUPPORT	1,500
PRGHBC 2908 HEFFRON ST STEVENS POINT,WI 54481	NONE		GENERAL SUPPORT	200
PROTECT PO BOX 27599 KNOXVILLE,TN 37927	NONE		GENERAL SUPPORT	20,000
PV YOUNG LIFE 4727 E BELL RD 45-425 PHOENIX,AZ 85032	NONE		GENERAL SUPPORT	3,500
RIVER GARDEN AUXILIARY 11401 ST AUGUSTINE RD JACKSONVILLE,FL 32258	NONE		GENERAL SUPPORT	500
RIVER GARDEN FOUNDATION 11401 ST AUGUSTINE RD JACKSONVILLE,FL 32258	NONE		GENERAL SUPPORT	2,500
ROTARY CLUB OF ST JOHNS FOUNDA 220 COUNTY RD 210 W JACKSONVILLE,FL 32259	NONE		GENERAL SUPPORT	500
Total  3a				221,948

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
SALVATION ARMY THE 328 N OCEAN STREET JACKSONVILLE,FL 32202	NONE		GENERAL SUPPORT	500
SAN JOSE EPISCOPAL 7423 SAN JOSE BLVD JACKSONVILLE,FL 32217	NONE		GENERAL SUPPORT	500
SCHREIBER FOODS PO BOX 19010 GREEN BAY,WI 54307	NONE		GENERAL SUPPORT	4,000
SEASIDE COMMUNITY CHARTER SCHO PO BOX 330535 ATLANTIC BEACH,FL 32233	NONE		GENERAL SUPPORT	2,000
SOS MINISTRIES PO BOX 481 WHEATON,IL 60187	NONE		GENERAL SUPPORT	2,000
SOUTH JACKSONVILLE ROTARY PO BOX 47546 JACKSONVILLE,FL 32247	NONE		GENERAL SUPPORT	500
ST JOHNS COUNTY EDUCATION FOUN 40 ORANGE ST SAINT AUGUSTINE,FL 32084	NONE		GENERAL SUPPORT	1,667
ST JOHNS COUNTY EDUCATION FOUN 40 ORANGE ST SAINT AUGUSTINE,FL 32084	NONE		GENERAL SUPPORT	3,750
ST FRANCIS ANIMAL HOSPITAL 2107 MANGO PL JACKSONVILLE,FL 32207	NONE		GENERAL SUPPORT	250
JACKSONVILLE CHAMBER FOUNDATION 3 INDEPENDENT DRIVE JACKSONVILLE,FL 32202	NONE		GENERAL SUPPORT	1,000
ST LUKES LUTHERAN CHURCH & 2021 WSTATE RD 426 OVIEDO,FL 32765	NONE		GENERAL SUPPORT	1,000
SULZBACHER CENTER THE 611 E ADAMS ST JACKSONVILLE,FL 32202	NONE		GENERAL SUPPORT	155
SULZBACHER CENTER THE 611 E ADAMS ST JACKSONVILLE,FL 32202	NONE		GENERAL SUPPORT	1,000
SULZBACHER CENTER THE 611 E ADAMS ST JACKSONVILLE,FL 32202	NONE		GENERAL SUPPORT	3,572
SULZBACHER CENTER THE 611 E ADAMS ST JACKSONVILLE,FL 32202	NONE		GENERAL SUPPORT	20,000
Total  3a				221,948

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
SYAA 6801 ALTAMA ROAD JACKSONVILLE,FL 32216	NONE		GENERAL SUPPORT	350
THE FRIENDS OF HENDRICKS 7400 SAN JOSE BLVD JACKSONVILLE,FL 32217	NONE		GENERAL SUPPORT	500
UF SCHOOL OF BLDG CONST PO BOX 115703 GAINESVILLE,FL 32611	NONE		GENERAL SUPPORT	5,000
UNF CONSTRUCTION MANAGEMENT DE 1 UNF DR 50/2500 JACKSONVILLE,FL 32224	NONE		GENERAL SUPPORT	1,500
UNF FOUNDATION 1 UNF DR 50/2500 JACKSONVILLE,FL 32224	NONE		GENERAL SUPPORT	2,000
UNF FOUNDATION INC 1 UNF DR 50/2500 JACKSONVILLE,FL 32224	NONE		GENERAL SUPPORT	199
UNF FOUNDATION INC 1 UNF DR 50/2500 JACKSONVILLE,FL 32224	NONE		GENERAL SUPPORT	1,000
UNF FOUNDATION INC 1 UNF DR 50/2500 JACKSONVILLE,FL 32224	NONE		GENERAL SUPPORT	500
UNF SPONSORSHIP 1 UNF DR 50/2500 JACKSONVILLE,FL 32224	NONE		GENERAL SUPPORT	1,000
COMMUNITY HOSPICE 4266 SUNBEAM ROAD JACKSONVILLE,FL 32257	NONE		GENERAL SUPPORT	500
UNITED WAY 4710 N PAN AM EXPRESSWAY STE 140 SAN ANTONIO,TX 78218	NONE		GENERAL SUPPORT	2,000
UNITED WAY 4710 N PAN AM EXPRESSWAY STE 140 SAN ANTONIO,TX 78218	NONE		GENERAL SUPPORT	2,000
UNIVERSITY OF FLORIDA FOUNDATI PO BOX 115703 GAINESVILLE,FL 32611	NONE		GENERAL SUPPORT	10,000
VALLEY RIDGE ACADEMY 105 GREEN LEAF DR PONTE VEDRA BEACH,FL 32081	NONE		GENERAL SUPPORT	5,000
WOLFSON CHILDREN'S HOSPITAL PO BOX 5964 TAMPA,FL 32247	NONE		GENERAL SUPPORT	2,000
Total  3a				221,948

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WOLFSON CHILDREN'S HOSPITAL PO BOX 5964 TAMPA, FL 32247	NONE		GENERAL SUPPORT	4,600
Total  3a				221,948

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 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 2014
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Name of the organization THE STELLAR FOUNDATION	Employer identification number 20-3808875
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Organization type (check one)

Filers of: Form 990 or 990-EZ Form 990-PF	Section: ☐ 501(c)() (enter number) organization ☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation ☐ 527 political organization ☒ 501(c)(3) exempt private foundation ☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation
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Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled 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 totaling \$5,000 or more during the year. ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer “No” on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Employer identification number
20-3808875

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THE STELLAR GROUP 2900 HARTLEY RD JACKSONVILLE, FL 32257 	\$ 258,769	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)
(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 THE STELLAR FOUNDATION	Employer identification number 20-3808875
---	---

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

Name of organization THE STELLAR FOUNDATION	Employer identification number 20-3808875
--	--

Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. 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	
_____		_____	
_____		_____	
_____		_____	
(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	
_____		_____	
_____		_____	
_____		_____	

TY 2014 Other Expenses Schedule

Name: THE STELLAR FOUNDATION

EIN: 20-3808875

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
REPAIRS & MAINTENANCE	200	0	0	0
FREIGHT	-11	0	0	0

TY 2014 Other Professional Fees Schedule**Name:** THE STELLAR FOUNDATION**EIN:** 20-3808875

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OTHER PROFESSIONAL FEES	40,273	0	0	0
BANK FEES	812	0	0	0

TY 2014 Substantial Contributors Schedule

Name: THE STELLAR FOUNDATION

EIN: 20-3808875

Name	Address
THE STELLAR GROUP	2900 HARTLEY RD JACKSONVILLE, FL 32257