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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.

2014

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No 1545-0052

	Fo	or ca	lendar year 2014 or tax year beginning		, 2014,	, and ending	l	, 20
			of foundation				A Employer Identif	cation number
		THE	ATKINS FOUNDATION INC.				20-423505	8
	$\neg$	Numb	er and street (or P O box number if mail is not delivered	i to street address)		Room/suite	B Telephone numb	er (see instructions)
							(81	3) 282-7275
		403	0 W. BOY SCOUT BLVD.	•		STE 700		•
	_		r town, state or province, country, and ZIP or foreign pos	stal code				
			• • • • • • • • • • • • • • • • • • •				C If exemption applica	ition is
		ፓን M	PA, FL 33607				pending, check here	
			ck all that apply Initial return	Initial return	of a former n	ublic charity		$\sim$
	G	Cile	Final return	Amended ret	-	done charty	D 1 Torongariazar	
			<b></b>	—			2 Foreign organiza 85% test, check h	
	_	04	Address change	Name change			computation .	▶□
	Н	$\overline{}$	ck type of organization X Section 501(				E If private foundation	status was terminated
	$\perp$		ection 4947(a)(1) nonexempt charitable trust	Other taxable pr			under section 507(b	)(1)(A), check here . P
	ı			unting method X Ca		rual	- E	in a 60-month termination
				ther (specify)		<del>-</del>	under section 507(b	)(1)(B), check here .
	_	Ĺ	<u> </u>	column (d) must be on cas	sh basis )	<del></del>		185.1
	P	art	Analysis of Revenue and Expenses (The	(a) Revenue and	(b) Net inve	estment	(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	incom		income	purposes
	٦		column (a) (see instructions) )	books				(cash basis only)
		1	Contributions, gifts, grants, etc , received (attach schedule)	110,482.				
		2	Check If the foundation is not required to attach Sch B					
		3	Interest on savings and temporary cash investments.	1,904.		1,904.		ATCH 1
120		4	Dividends and interest from securities					
2015	-	5a	Gross rents					1
			Net rental income or (loss)				's 's	=
€7	<u>o</u>		Net gain or (loss) from sale of assets not on line 10				t led all a	-Q!
<b>3</b>	enn		Gross sales price for all			1		131
2	eve	7	assets on line 6a Capital gain net income (from Part IV, line 2)			M	1AY 2 1 2015	1.51
MAY	~	8	Net short-term capital gain		l	3		1751
		9	Income modifications		l			
ĬĽ.			Gross sales less returns				<u> </u>	
Z	- 1		and allowances Less Cost of goods sold .					
SCANNED	- 1	ľ	Gross profit or (loss) (attach schedule)					
び		11	Other income (attach schedule)					
S		12	Total. Add lines 1 through 11	112,386.		1,904.		
	⊣			0				
	Š	13	Compensation of officers, directors, trustees, etc					
	<u>8</u>	14	Other employee salaries and wages	<del> </del>				
	ě	15	Pension plans, employee benefits			<del></del>		
	X	16 a	Legal fees (attach schedule)	2,200.		37.		2,163
	9	b	Accounting fees (attach schedule)ATCH 2	2,200.				2/200
	칄	С	Other professional fees (attach schedule)					
	Ħ	17	Interest		<u></u>			· · · · · · · · · · · · · · · · · · ·
	ij	14 15 16a b c 17 18 19 20 21	Taxes (attach schedule) (see instructions)					
	Έ	19	Depreciation (attach schedule) and depletion.				<u> </u>	
	A	20	Occupancy					
	ğ	21	Travel, conferences, and meetings					
	ā	22	Printing and publications	0.100		1 501		510
	E	23 24 25	Other expenses (attach schedule) ATCH .3	2,100.		1,581.	·	519
	ati	24	Total operating and administrative expenses.					
	je		Add lines 13 through 23	4,300.		1,618.		2,682
	Õ	25	Contributions, gifts, grants paid	118,000.			<del></del>	118,000
		26	Total expenses and disbursements Add lines 24 and 25	122,300.		1,618.		120,682
		27	Subtract line 26 from line 12					
		a	Excess of revenue over expenses and disbursements	-9,914.				
		b	Net investment income (if negative, enter -0-)			286.		
		Ι.	A 11		I			

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		Delenes Obsets	Attached schedules and amounts in the	Beginning of year	End o	f year
۲	art II	Balance Sneets	description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
٦	1	Cash - non-interest-beari	ng	125,309.	115,510.	115,510.
-			cash investments	459,171.	457,057.	457,057.
	3	Accounts receivable				
]			btful accounts ▶			
	4	Pledges receivable ▶_				
1		Less allowance for dou	btful accounts ▶			
			officers, directors, trustees, and other			
			tach schedule) (see instructions)			
		•	eceivable (attach schedule)			
			btful accounts ▶			
Ś			se			
ssets			eferred charges			
			e government obligations (attach schedule)			
1			stock (attach schedule)			
			bonds (attach schedule)			
	11	Investments - land, building:	s, <b>&gt;</b>			· · ·
		and equipment basis Less accumulated deprecia	ation			
						***
			loans			
	14	Land, buildings, and				
		equipment basis Less accumulated deprecia	ation			
		(attach schedule)	ation			
- 1	15	Other assets (describe	>)		··-	
			completed by all filers - see the	584,480.	572,567.	572,567.
$\dashv$			age 1, item I)	304,400.	372,307.	372,307
			accrued expenses			
ſ				i	-	
Liabilities						
쵳			ors, trustees, and other disqualified persons			
Þ.			otes payable (attach schedule)		<del></del>	
7	22	Other liabilities (describe	∍ ▶)		<del></del>	
4			es 17 through 22)	0	U	
ı			low SFAS 117, check here . ▶ 🔲			
g		and complete lines	24 through 26 and lines 30 and 31.			
Š	24	Unrestricted				
a	25	Temporarily restricted .				
			· · · · · · · · · · · · · · · · · · ·			
Net Assets or Fund Balance		Foundations that do	not follow SFAS 117, ▶ X			
Ä		check here and com	plete lines 27 through 31.			
S	27	Capital stock, trust prine	cipal, or current funds			
set	28	Paid-in or capital surplus, or	r land, bldg , and equipment fund	3,000.	3,000.	
As	29	Retained earnings, accumi	ulated income, endowment, or other funds	581,480.	569,567.	
텕	30	Total net assets or fund	balances (see instructions)	584,480.	572,567.	
	31	Total liabilities and	net assets/fund balances (see			
				584,480.	572,567.	
			nges in Net Assets or Fund Bala		······································	
1			palances at beginning of year - Part			
	end-	-of-year figure reporte	ed on prior year's return),		<u>1</u>	584,480
2		er amount from Part I,			2	-9,914
3	Othe	er increases not includ	ded in line 2 (itemize) ▶		3	
4		lines 1, 2, and 3				574,566
5	Dec	reases not included in				1,999
6			palances at end of year (line 4 minus	line 5) - Part II, column (l	b), line 30 6	572,567
_						Form 990-PF (2014)

_			•
п	~~	-	4

Pa	art IV Capital Gains (a) List and 2-story b	(b) How acquired P - Purchase D - Donation		(d) Date sold (mo , day, yr )		
 1a						
b						
<u>c</u>						
d						
<u>e</u>					<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>					<del></del>	
<u></u>					<del> </del>	
<u>d</u>						
<u>e</u>	Complete only for exacts	showing gain in column (h) and owner	d by the foundation on 12/31/69			
	Complete only for assets				Gains (Col (h) g (k), but not less t	
	(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		Losses (from co	
<u>a</u>						
<u>b</u>					_	
_ <u>c</u>						
<u>d</u>	-					<del></del>
<u>e</u>		. 16	many along output in Port I line 7			
2	Capital gain net income	or (not conital loce)	gain, also enter in Part I, line 7	2		
•	Not short torm conital as	•	(loss), enter -0- in Part I, line 7	-		
3		ain or (loss) as defined in sections ' art I, line 8, column (c) (see inst				
	•					
D,		Inder Section 4940(a) for Rec	duced Tax on Net Investment I	ncome		
Wa			utable amount of any year in the b Do not complete this part.	ase perio	d?	Yes X No
1	Enter the appropriate an	nount in each column for each yea	r, see the instructions before makin	g any en	tries.	
_	(a)	(b)	(c)		(d) Distribution ra	etio.
C£	Base period years alendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		(col (b) divided by	col (c))
	2013	189,867.	551,147.			0.344494
	2012	297,015.	609,547.			0.487272
	2011	361,912.	766,227.			0.472330
	2010	349,703.	866,581.			0.403543
	2009	420,741.	878,456.	ļ <u>, , </u>		0.478955
2	Total of line 1, column (c	d)		2		2.186594
3	<del>-</del>	o for the 5-year base period - divid ndation has been in existence if les		3	- · · · · · · · · · · · · · · · · · · ·	0.437319
4	Enter the net value of no	ncharitable-use assets for 2014 fro	om Part X, line 5	4		568,861.
5	Multiply line 4 by line 3			5		248,774.
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6	·	3.
7	Add lines 5 and 6			7		248,777.
8	Enter qualifying distributi	ons from Part XII, line 4		8		120,682.
	If line 8 is equal to or g Part VI instructions	reater than line 7, check the box	in Part VI, line 1b, and complete	tnat part	using a 1% ta	x rate See the

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see it	nstru	ction	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here			
	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			6.
	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-) 2			
3	Add lines 1 and 2			6.
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			6.
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014   6a   11 .			
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			<u> 11.</u>
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			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			5.
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ 5 . Refunded ▶ 11			
	t VII-A Statements Regarding Activities	1		Γ
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			,,
	Instructions for the definition)?	1b		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			٠,
	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers > \$	_		١.,
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	.		1
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		X
	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		<del>  ^</del>
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	_	х	
	conflict with the state law remain in the governing instrument?	6 7	<u>x</u>	<del> </del>
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	<del>'</del>		
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	8b	х	İ
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	00		
9	ts 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,"	Δ		x
	complete Part XIV	9		<del>  ^</del>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	40		X
	names and addresses	10	0-PF	
	FL			(4014)

Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Χ
12`	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	i		
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address   WWW.ATKINSGLOBAL.COM/EN-GB/NORTH-AMERICA		<b></b> .	
14	The books are in care of ▶ATKINS NORTH AMERICA, INC. Telephone no ▶ 813-282	-727	5	
	Located at ▶4030 W. BOY SCOUT BLVD. #700 TAMPA, FL ZIP+4 ▶ 33607			<del>, , , , , , , , , , , , , , , , , , , </del>
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 2014, 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		<u> </u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If			
	"Yes," enter the name of the foreign country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 <i>a</i>	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			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
Ī	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)			
t	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	4 6-		
	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	1c		х
	were not corrected before the first day of the tax year beginning in 2014?	16	<del>- i</del>	
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))  At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and			
č	6e. Part XIII) for tax year(s) beginning before 2014? Yes X No			
	the state of the s			
,	of "Yes," list the years ▶,,,,,,,			
•	(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		
	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	• • • • • • • • • • • • • • • • • • •			
3.5	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year? Yes X No			
ì	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? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2014 )	3b		
4 a	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	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		<u> </u>
		00	n_DE	(2014)

Form s	90-PF (2014) INE AIKINS FOO				1233030	rage U
Par	t VII-B Statements Regarding Activities	for Which Form	4720 May Be Req	uired (continued)		
5a	During the year did the foundation pay or incur any amo	unt to			1 1	
	(1) Carry on propaganda, or otherwise attempt to influe	ence legislation (sectio	n 4945(e))?	. Yes X No	<b>,</b>	
•	(2) Influence the outcome of any specific public ele	ection (see section 4	1955), or to carry or			
	directly or indirectly, any voter registration drive?				·	
	(3) Provide a grant to an individual for travel, study, or o	ther similar purposes?		Yes X No	•	
	(4) Provide a grant to an organization other than a	charitable, etc., org	anization described ii			
	section 4945(d)(4)(A)? (see instructions)				·	
	(5) Provide for any purpose other than religious, ch	naritable, scientific, l	iterary, or educationa			
	purposes, or for the prevention of cruelty to children	or animals?		. Yes X No	·	
b	If any answer is "Yes" to 5a(1)-(5), did any of the					
	Regulations section 53 4945 or in a current notice regar	ding disaster assistan	ce (see instructions)?		<u>5b</u>	
	Organizations relying on a current notice regarding disas	ster assistance check	here			
С	If the answer is "Yes" to question 5a(4), does the		•	1 1 1 1	li	
	because it maintained expenditure responsibility for the	grant?		YesNo	<b>'</b>	
	If "Yes," attach the statement required by Regulations se-	ction 53 4945-5(d)				
6a	Did the foundation, during the year, receive any fur	nds, directly or indir	ectly, to pay premiur			
	on a personal benefit contract?			. Yes X No	1 1	
b	Did the foundation, during the year, pay premiums, dire	ectly or indirectly, on a	personal benefit contra	ct?	. 6b	X
	If "Yes" to 6b, file Form 8870				1 1	
7a	, , , , ,				· I I	
	If "Yes," did the foundation receive any proceeds or har					
Pai	t VIII Information About Officers, Directo and Contractors	rs, Trustees, Fou	indation Managers	s, Hignly Pald Emp	oloyees,	
1	List all officers, directors, trustees, foundation r	nanagers and their		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 other allo	e account, owances
ATC:			0	q		0
			-			
2	Compensation of five highest-paid employees "NONE."	(other than thos	e included on line	e 1 - see instructi	ons). If no	ne, enter
		(b) Title, and average	(a) O	(d) Contributions to employee benefit	(e) Expense	e account,
(a)	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred compensation	other allo	
				Compensation		
	NONE					
			<del></del>			
				-		
Total	number of other employees paid over \$50,000					
· Otal	number of other employees paid over 400,000.			· · · · · · · · · · · · · · · · · · ·	99n	-PF (2014)

Form 990-PF (2014) Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 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 **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 Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc Summary of Program-Related Investments (see instructions) Amount Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments See instructions 3 NONE

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Total. Add lines 1 through 3

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Part	Minimum Investment Return (All domestic foundations must complete this part Foreit see instructions )	gn founda	tions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes.		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	577,524.
	Fair market value of all other assets (see instructions)	1c	<u></u>
d	Total (add lines 1a, b, and c)	1d	577,524.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	]	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	577,524.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	8,663.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	568,861.
6	Minimum investment return. Enter 5% of line 5	6	28,443.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations check here  and do not complete this part)	idations	
1	Minimum investment return from Part X, line 6	1	28,443.
2a	Tax on investment income for 2014 from Part VI, line 5		
_ b		1	
c	Add lines 2a and 2b	2c	6.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	28,437.
4	Recoveries of amounts treated as qualifying distributions	1 1	
5	Add lines 3 and 4	5	28,437.
6	Deduction from distributable amount (see instructions).	6	<u>.                                      </u>
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
•	line 1	7	28,437.
Pari	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	1a	120,682.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
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	120,682.
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		120,682.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when c qualifies for the section 4940(e) reduction of tax in those years	alculating	whether the foundation

Page 9

Form 990-PF (2014)

Part XIII Undistributed Income (see instructions) (b) (d) (a) 2014 Corpus Years prior to 2013 2013 Distributable amount for 2014 from Part XI. 28,437. Undistributed income, if any, as of the end of 2014 a Enter amount for 2013 only . . . b Total for pnor years 20 12 ,20 11 ,20 10 Excess distributions carryover, if any, to 2014 a From 2009 379.382 **b** From 2010 . . . . . . 306,473. c From 2011 ..... 323,686. **d** From 2012 . . . . . . 266,606. 162,321. 1,438,468 f Total of lines 3a through e . . . . . . . . . . Qualifying distributions for 2014 from Part XII. 120,682. line 4 ▶ \$ a Applied to 2013, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions). . . . . . c Treated as distributions out of corpus (Election 28,437. d Applied to 2014 distributable amount ..... 92,245 e Remaining amount distributed out of corpus . . Excess distributions carryover applied to 2014 (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: 1,530,713 a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . . . . . d Subtract line 6c from line 6b Taxable amount - see instructions
Undistributed income for 2013 Subtract line
4a from line 2a Taxable amount - see f Undistributed income for 2014 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015 ....... 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) . . . . . . . . . . . Excess distributions carryover from 2009 not 379,382 applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2015. 1,151,331. Subtract lines 7 and 8 from line 6a . . . . . . . 10 Analysis of line 9 306,473. a Excess from 2010 . . . 323,686. b Excess from 2011 . . . 266,606. c Excess from 2012 . . . 162,321. d Excess from 2013 . . . 92,245. e Excess from 2014 . . .

Pa	rt XIV Private Op	erating Foundations	(see instructions a	nd Part VII-A, questi	on 9)	NOT APPLICABLE
1 a	If the foundation has foundation, and the ruling	-			ating -	
þ	Check box to indicate v				section 4942(j	)(3) or 4942(j)(5)
2.	Enter the leaner of the od	Tax year		Prior 3 years		(a) Tatal
24	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(e) Total
b	85% of line 2a					
c	Qualifying distributions from Part XII, line 4 for each year listed					
đ	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	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 invest- ment 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)	\				
	(4) Gross investment income					
Pa				t only if the found	lation had \$5,000	or more in assets
1	at any time Information Regardin	during the year - s g Foundation Manage				
а	List any managers of before the close of any	the foundation who it tax year (but only if th	nave contributed more sey have contributed n	e than 2% of the tota nore than \$5,000) (S	al contributions receives section 507(d)(2))	ved by the foundation
_	N/A	the foundation who	400/	£ 4h4		. laura nautan af tha
D	List any managers of ownership of a partner					y large portion of the
	N/A					
2	Information Regardin	g Contribution, Grant	, Gift, Loan, Scholarsh	nip, etc., Programs:		
	Check here ► X if t unsolicited requests for other conditions, comp	or funds If the found	ation makes gifts, gra	to preselected char ants, etc (see instruc	itable organizations it tions) to individuals o	and does not accept or organizations under
a	The name, address, a			the person to whom ap	plications should be ad	dressed
b	The form in which app	lications should be sul	omitted and information	on and materials they	should include	
c	Any submission deadli	ines		<u></u> .		
d	Any restrictions or li factors	mitations on awards,	such as by geogra	aphical areas, charita	ble fields, kinds of	institutions, or other

Page 11

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)	or substantial contributor	recipient	contribution						
a Paid during the year									
				•					
ATCH 6									
		-							
				,					
	+								
Total	<u></u>	<del></del>		118,000					
<b>b</b> Approved for future payment									
				]					
		].							
•									
				1					
				1					
Total			▶ 3b	1					

JSA 4E1491 1 000

Part XVI	A Analysis of Income-Produ	cing Activ	vities			- · · · · ·	
	amounts unless otherwise indicated	Unrelated business income		Excluded by	section 512, 513, or 514	4 (e)	
1 Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)	
						,	
c							
d							
e							
f						<del> </del>	
-	and contracts from government agencies					<del></del>	
	ship dues and assessments			1.4	1 004		
	n savings and temporary cash investments			14	1,904.		
	Is and interest from securities					<u> </u>	
	-financed property						
	debt-financed property						
	I income or (loss) from personal property						
	vestment income						
	oss) from sales of assets other than inventory						
	me or (loss) from special events						
10 Gross pi	rofit or (loss) from sales of inventory						
11 Other re	venue a						
b							
· ·							
6	Add columns (b) (d) and (a)		· · · · · · · · · · · · · · · · · · ·		1,904.		
	Add columns (b), (d), and (e)   dd line 12, columns (b), (d), and (e)				,	1,904.	
	neet in line 13 instructions to verify calci					2,7011	
Part XVI-			complishment of Ex	empt Purp	oses		
Line No.	Explain below how each activit	y for which	n income is reported it	n column (e	a) of Part Y\/LA contrib	uted importantly to the	
▼	accomplishment of the foundation	-					
N/A	N/A						
-			· · · · · · · · · · · · · · · · · · ·	<del></del>			
			<del></del> -				
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. 0	330-11 (20	/14/	**********	I OUIIDITITE	2110.			120000	;	<u> </u>
Par	t XVII	Information Regarding	g Transf	ers To and T	ransactions	and Relationships V	Vith	Nonchar	itable	9
		Exempt Organization	ıs							
	Did Mar				- 6-11				V	١.

		p. +.9.										
		_		engage in any of the	_	-	_				Yes	No
			ode (other thai	n section 501(c)(3) orga	anizations	s) or in se	ction 527, r	elatıng	to political			
	-	ations?										
a T	ransfe	ers from the reporting	ng foundation t	to a noncharitable exem	pt organi	zation of.						
										1a(1)		<u> </u>
										1a(2)		X
		ransactions									1	
				empt organization						1b(1)		X
				table exempt organization						1b(2)		X
				er assets						1b(3)		X
										1b(4)		X
												X
				ship or fundraising solicit								X
				ists, other assets, or paid							<u></u>	
				es," complete the follo								
				vices given by the repo ngement, show in colur								
				f noncharitable exempt organiz					actions, and share			
(a) Line	9 10	(b) Amount involved N/A	(c) Name o	i nonchantable exempt organiz	ation	N/A	iption of transi	ers, trans	actions, and sna	ing ana	nigerne	IIIS
		N/A				N/A		_				
	+	<del></del>										
			<u> </u>									
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		<del></del>	+	<u> </u>		• • •						
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	_			****								
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			<u> </u>									
			<u> </u>									
		•	_	affiliated with, or related					1	_		٦
d	lescrib	ed in section 501(c	c) of the Code (	other than section 501(	c)(3)) or i	ın section	527?		l	Y	es X	J No
<u>b</u> lf	"Yes,	" complete the follo	owing schedule									
		(a) Name of organization	on	(b) Type of orga	nization			c) Descr	iption of relations	hip		_
	Under	penalties of perjury, I dec	clare that I have exa	mined this return, including accor n taxpayer) is based on all informati	mpanying sch	hedules and s	tatements, and 1	o the bes	t of my knowledg	e and t	oelief, it	ıs true
Sign	Contact	A 9 +	XI -		ا ر				May the IRS	decue	e thie	retum
_		L. Cink &	anu or	15 MAY 20	115	SECR	57AK9		1 '	eparer_		below
Here	Sign	ature of officer or trustee	, /	Date		Title	-		(see instruction	s)? X	Yes	Na
			•									
	<u> </u>	Print/Type preparer's na	ame	Preparer's signature			Date		Check if F	PTIN		
Paid		ALLISON P SHI	PLEY	Mison Kok	riller		05/11/201	5_ s	self-employed	P002	8973	0
Prepa	arer			OUSECOOPERS LIE	1			Firm's E	IN ▶13-40	0083	24	
Use (	Only			AVENUE, SUITE 30	00							
	- •	1	IAMI, FL			331	31-3429	Phone r	no 305-3°	75-7	400	
											0-PF	(2014
											-	

### Schedule B

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

### **Schedule of Contributors**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ 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

**Employer identification number** Name of the organization THE ATKINS FOUNDATION INC.

20-4235058 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation 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 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 33 1/3 % 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 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 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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) (2014)

Employer identification number 20-4235058

Part I	Contributors (see instructions). Use duplicate copies of Pa	art I if additional space is nee	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	ATKINS NORTH AMERICA, INC 4030 WEST BOY SCOUT BOULEVARD, STE 700 TAMPA, FL 33067	\$109,982.	Person X X X X X 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 ATKINS FOUNDATION INC.

Employer identification number

20-4235058

Part II	Noncash Property (see instructions). Use duplicate copies of F	Part II if additional space is ne	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
<b>-</b>		- - - - - \$	

Employer identification number

20-4235058

	following line entry. For organizations contributions of \$1,000 or less for the Use duplicate copies of Part III if additional additional copies of the second copies of Part III if additional copies	e year. (Enter this in	formation once S	
(a) No. from Part I	(b) Purpose of gift	(c) Use		(d) Description of how gift is held
		(e) Transf	er of gift	<u> </u>
	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	
	Transferee's name, address, at		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	
	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
		<b>_</b>		
	, , , , , , , , , , , , , , , , , , ,	(e) Transf	er of gift	
	Transferee's name, address, at	nd ZIP + 4	Relatio	nship of transferor to transferee

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

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

	NET	INVESTMENT	INCOME	4. 1,904.
REVENUE	AND	EXPENSES	PER BOOKS	1,904
			DESCRIPTION	SHORT TERM INVESTMENT INTEREST

1,904.

TOTAL

ATTACHMENT 1 PAGE 18

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### PART I - ACCOUNTING FEES FORM 990PF,

CHARITABLE PURPOSES	2,163.	2,163.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	37.	37.
REVENUE AND EXPENSES PER BOOKS	2,200.	2,200.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

ATTACHMENT

### FORM 990PF, PART I - OTHER EXPENSES

NET	INVESTMENT	INCOME 1 581	1	1,581.
REVENUE AND	EXPENSES	PER BOOKS	519.	2,100.
				TOTALS
		DESCRIPTION RANK FEES	POSTAGE	

CHARITABLE	PURPOSES	519.

519.

ATTACHMENT 4

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

DESCRIPTION

AMOUNT

PY ADJUSTMENT

1,999.

TOTAL

1,999.

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS,	CERS, DIRECTORS, AND TRUSTEES		ATTACHMENT	MENT 5	
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES	
JOHN BUCKLEY 4030 W. BOY SCOUT BLVD. TAMPA, FL 33607	DIRECTOR 2.00	0	0	0	
ERIC MCLAURIN 4030 W. BOY SCOUT BLVD. TAMPA, FL 33607	DIRECTOR 2.00	0	0	0	
C. ERNEST EDGAR 4030 W. BOY SCOUT BLVD. TAMPA, FL 33607	SECRETARY 2.00	0	0	0	
JUDITH ALDROVANDI 4030 W. BOY SCOUT BLVD. TAMPA, FL 33607	CONTROLLER 2.00	0	0	0	
CAROL L. CRAFT 4030 W. BOY SCOUT BLVD. TAMPA, FL 33607	ADMINISTRATOR 2.00	0	0	0	
MAUREEN NAYOWITH 4030 W. BOY SCOUT BLVD. TAMPA, FL 33607	DIRECTOR 2.00	0	0	0	

ATTACHMENT 5 (CONT'D)

TITLE AND AVERAGE HOURS PER

WEEK DEVOTED TO POSITION

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

ATTACHMENT 5 PAGE 23

•			
EXPENSE ACCT AND OTHER ALLOWANCES	0	0	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	0	0	0
COMPENSATION	0	0	0

GRAND TOTALS

2.00

RICHARD W. GALLOWAY 4030 W. BOY SCOUT BLVD. TAMPA, FL 33607

DIRECTOR

2.00

4030 W. BOY SCOUT BLVD. TAMPA, FL 33607

VICTOR P. POTEAT

NAME AND ADDRESS

DIRECTOR

ATTACHMENT 6

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	FURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ACE MENTOR PROGRAM 4030 W BOY SCOUT BLVD TAMPA, FL 06901	NONE EOF	FOR YOUTH MENTOR PROGRAM	5,000
FLORIDA EDUCATION FOUNDATION 325 WEST GAINES STREET, ROOM 1524 TALLAHASSEE, FL 32302	NONE PC	FOR THE SUNSHINE STATE STEM SCHOLARS	10,000
FSU FOUNDATION, INC 2525 POTTSDAMER ST #B-223A TALLAHASSEE, FL 32302	NONE PC	FOR MINORITY SCHOLARSHIP PROGRAMS	2,000
GEORGIA ROBOTICS ALLIANCE 2152 COLLINS DR NW ATLANTA, GA 30318	NONE PC	FOR THE YOUTH ROBOTICS COMPETITION	10,000
VOLUNTEERS OF AMERICA, FLORIDA 405 CENTRAL AVENUE, SUITE 100 ST PETERSBURG, FL 33701	NONE PC	FOR THE YOUTH ROBOTICS COMPETITION	4,000
NEVADA PROFESSIONAL ENGINEERS FOUNDATION, INC 5304 OAKBURY CT LAS VEGAS, NV 89130	NONE PC	FOR THE NPSE STEM OUTREACH PROGRAM	5, 000

ATTACHMENT 6 (CONT'D)

## FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
HENDERSON COMMUNITY FOUNDATION 2756 N GREEN VALLEY PKWY, STE 268 HENDERSON, NV 89014	NONE PC	FOR THE APPLE CHILDREN'S LITERACY PROGRAM	7,000
UNIVERSITY OF MARYLAND COLLEGE PARK FOUNDATION 4603 CALVERT ROAD COLLEGE PARK, MD 20740	NONE PC	FOR THE QUEST SUMMER PROGRAM	5,000
SDSU MESA ENGINEERING PROGRAM 5500 CAMPANILE DRIVE SAN DIEGO, CA 92812	NONE PC	FOR THE LEADERSHIP SUMMIT 2015	7,500
TEAM GET SMART 3556 AT COLUMBIA HIGH SCHOOL 469 SE FIGHTING TIGER DR LAKE CITY, FL 32025	NONE ,	FOR THE YOUTH ROBOTICS COMPETITION	7,500
TRANSPORTATION ENGINEERS OF THE FUTURE PROGRAM 225 NORTH AVE ADMIN BLDG ATLANTA, GA 30332	NONE PC	FOR THE TRANSPORTATION ENGINEERS OF THE FUTURE PROGRAM	5,000
SOCIETY OF HISPANIC PROFESSIONAL ENGINEERS, INC 13181 CROSSROADS PKWY N STE 450 CITY INDUSTRY, CA 91746	NONE PC	FOR EDUCATION PROGRAMS	5,000

ATTACHMENT 6 (CONT'D)

## FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

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20-4235058

ATTACHMENT 6 (CONT'D)

# FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR.

AMOUNT	4,000.		8,000.		3,500		2,000	
PURPOSE OF GRANT OR CONTRIBUTION	FOR THE SOUTHWEST MIDDLE SCHOOL STEAM ACADEMY		FOR THE PBSJ/ATKINS SCHOLARSHIP		FOR THE MURRIETA VALLEY HIGH SCHOOL ROBOTICS CLUB		FOR MINORITY SCHOLARSHIP PROGRAMS	
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE	PC	NONE	PC	NONE	PC	NONE	PC
RECIPIENT NAME AND ADDRESS	SOUTHWEST MIDDLE SCHOOL	271 IRIS AVENUE SAN DIEGO, CA 92154	FIU FOUNDATION	11200 SW 8TH STREET, MARC 5TH FLR MIAMI, FL 33199	MURRIETA VALLEY HIGH SCHOOL	42200 NIGHTHAWK WAY MURRIETA, CA 92562	UNIVERSITY OF SOUTH FLORIDA	4202 E FOWLER AVE TAMPA, FL 33620

TOTAL CONTRIBUTIONS PAID

118,000

ATTACHMENT 6 PAGE 27

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