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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2017

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public

Information about Form 990 and its instructions is at [www.irs.gov/form990](#)

A For the 2017 calendar year, or tax year beginning 01-01-2017 , and ending 12-31-2017

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

THE WAWA FOUNDATION INC

Doing business as

SAME AS ABOVE

Number and street (or P O box if mail is not delivered to street address)

Room/suite

260 W BALTIMORE PIKE

City or town, state or province, country, and ZIP or foreign postal code

WAWA, PA 19063

F Name and address of principal officer

JARED CULOTTA

260 W BALTIMORE PIKE

WAWA, PA 19063

H(a) Is this a group return for subordinates?

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () ◀(insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶

WWW.THEWAWAFOUNDATION.ORG/

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation

2013

M State of legal domicile

PA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities

THE FOUNDATION WILL MAKE GRANTS TO SECTION 501(C)3 CHARITABLE ORGANIZATIONS WHOSE FOCUS IS HEALTH RELATED ISSUES, COMBATING HUNGER, AND BENEFITTING EVERYDAY HEROES WHICH ARE LOCATED IN THE GEOGRAPHIC AREA WHERE THE FOUNDATION'S FUNDRAISING OCCURS

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)

4 Number of independent voting members of the governing body (Part VI, line 1b)

5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total unrelated business revenue from Part VIII, column (C), line 12

7b Net unrelated business taxable income from Form 990-T, line 34

Revenue

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) ▶0

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses Subtract line 18 from line 12

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances Subtract line 21 from line 20

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer

JARED CULOTTA PRESIDENT

Type or print name and title

2018-08-16

Date

Paid Preparer Use Only

Print/Type preparer's name

JOHN J NIHILL CPA

Preparer's signature

JOHN J NIHILL CPA

Date

2018-08-15

Check ☐ if self-employed

PTIN

P00844252

Firm's name ▶ WIPFLI LLP

Firm's EIN ▶ 39-0758449

Firm's address ▶ 2 WEST BALTIMORE AVE SUITE 210

Phone no (610) 565-3930

MEDIA, PA 19063

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2017)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission:

THE FOUNDATION WILL MAKE GRANTS TO SECTION 501(C)3 CHARITABLE ORGANIZATIONS WHOSE FOCUS IS HEALTH RELATED ISSUES, COMBATING HUNGER, AND BENEFITTING EVERYDAY HEROES WHICH ARE LOCATED IN THE GEOGRAPHIC AREA WHERE THE FOUNDATION'S FUNDRAISING OCCURS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code) (Expenses \$ 6,112,763 including grants of \$ 6,112,763) (Revenue \$)
See Additional Data

4b (Code) (Expenses \$ 1,726,968 including grants of \$ 1,726,968) (Revenue \$)
See Additional Data

4c (Code) (Expenses \$ 2,826,968 including grants of \$ 2,826,968) (Revenue \$)
See Additional Data

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► 10,666,699

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 Yes	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a	No
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	No

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	Yes	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		No
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		No
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		No
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		No
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		No
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		No
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	Yes	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		No
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		No
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	Yes	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	0
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	2a	0
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b	
c	Enter the amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.Check if Schedule O contains a response or note to any line in this Part VI. ☒**Section A. Governing Body and Management**

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		No
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13.	Yes	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official.		No
15b	Other officers or key employees of the organization.		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed▶	AL, AK, AR, AZ, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, ND, NH, NJ, NM, NY, NC, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI, WV
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.	
20	State the name, address, and telephone number of the person who possesses the organization's books and records. ▶THE WAWA FOUNDATION INC 260 W BALTIMORE PIKE WAWA, PA 19063 (610) 358-8000	

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII ☐

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☒ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JARED CULOTTA PRESIDENT	15 00 37 50	X		X				0	0	0
(2) RICHARD WOOD VICE PRESIDENT	2 50 37 50	X		X				0	0	0
(3) TERRENCE HERLING VICE PRESIDENT	3 00 37 50	X		X				0	0	0
(4) MARIA KALOGREDIS WEEDE VICE PRESIDENT & SECRETARY	2 00 37 50	X		X				0	0	0
(5) THOMAS RACHUBINSKI VICE PRESIDENT & TREASURER	4 00 37 50	X		X				0	0	0
(6) LORI BRUCE DIRECTOR	12 00 37 50	X						0	0	0
(7) MARC TREDANARI DIRECTOR	2 00 37 50	X						0	0	0
(8) STEPHANY MOONINGHAM DIRECTOR	0 75 37 50	X						0	0	0
(9) KAREN GENELLO DIRECTOR	2 00 37 50	X						0	0	0
(10) ADAM SCHALL DIRECTOR	2 00 37 50	X						0	0	0
(11) MENDY MERIWETHER DIRECTOR	1 50 37 50	X						0	0	0
(12) STEVEN GAMBLE DIRECTOR	2 00 37 50	X						0	0	0
(13) PATRICIA CAHILL DIRECTOR	1 50 37 50	X						0	0	0
(14) TERRI MICKLIN DIRECTOR	2 00 37 50	X						0	0	0
(15) CHARLENE MARKO-HEIM DIRECTOR	1 75 37 50	X						0	0	0

[illegible]

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 0

Section B. Independent Contractors

(A)	(B)	(C)
Name and business address	Description of services	Compensation

Form **990** (2017)

Part VIII **Statement of Revenue**

Check if Schedule O contains a response or note to any line in this Part VIII ☐

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . .	1a				
	b Membership dues . . .	1b				
	c Fundraising events . . .	1c				
	d Related organizations	1d	3,007,000			
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	7,996,707			
	g Noncash contributions included in lines 1a-1f \$ _____					
	h Total. Add lines 1a-1f ▶		11,003,707			
Program Service Revenue	2a _____	Business Code				
	b _____					
	c _____					
	d _____					
	e _____					
	f All other program service revenue					
	g Total. Add lines 2a-2f ▶					
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		2,843		
4 Income from investment of tax-exempt bond proceeds ▶						
5 Royalties ▶						
6a Gross rents		(i) Real (ii) Personal				
b Less rental expenses						
c Rental income or (loss)						
d Net rental income or (loss) ▶						
7a Gross amount from sales of assets other than inventory		(i) Securities (ii) Other				
b Less cost or other basis and sales expenses						
c Gain or (loss)						
d Net gain or (loss) ▶						
8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 a						
b Less direct expenses b						
c Net income or (loss) from fundraising events ▶						
9a Gross income from gaming activities See Part IV, line 19 a						
b Less direct expenses b						
c Net income or (loss) from gaming activities ▶						
10a Gross sales of inventory, less returns and allowances a						
b Less cost of goods sold b						
c Net income or (loss) from sales of inventory ▶						
Miscellaneous Revenue		Business Code				
11a _____						
b _____						
c _____						
d All other revenue						
e Total. Add lines 11a-11d ▶						
12 Total revenue. See Instructions ▶		11,006,550	0	0	2,843	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	10,666,699	10,666,699		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7 Other salaries and wages.				
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).				
9 Other employee benefits.				
10 Payroll taxes.				
11 Fees for services (non-employees):				
a Management.				
b Legal.				
c Accounting.				
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).				
12 Advertising and promotion.				
13 Office expenses.	699		699	
14 Information technology.				
15 Royalties.				
16 Occupancy.				
17 Travel.				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.				
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.				
23 Insurance.				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a				
b				
c				
d				
e All other expenses.				
25 Total functional expenses. Add lines 1 through 24e.	10,667,398	10,666,699	699	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	7,629,625	1	7,812,684
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	27,452
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	10c	
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	7,629,625	16	7,840,136	
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable	80,000	18	0
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	229,853	25	181,212
	26 Total liabilities. Add lines 17 through 25	309,853	26	181,212
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	7,319,772	27	7,658,924
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	7,319,772	33	7,658,924	
34 Total liabilities and net assets/fund balances	7,629,625	34	7,840,136	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	11,006,550
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,667,398
3	Revenue less expenses Subtract line 2 from line 1	3	339,152
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7,319,772
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	7,658,924

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID:
Software Version:
EIN: 46-4021003
Name: THE WAWA FOUNDATION INC

Form 990 (2017)

Form 990, Part III, Line 4a:

IN 2017, THE FOUNDATION PROVIDED \$6,112,763 OF ASSISTANCE TO HEALTH ORGANIZATIONS COMMITTED TO SAVING AND IMPROVING LIVES IN THE COMMUNITIES WAWA SERVES, SPECIFICALLY THOSE DEDICATED TO THE CARE AND TREATMENT OF FAMILIES AND CHILDREN IN WAWA, INC'S AREAS OF OPERATION FOR INFORMATION ON WAWA, INC , SEE SCHEDULE R

Form 990, Part III, Line 4b:

IN 2017 THE FOUNDATION PROVIDED \$1,726,968 OF ASSISTANCE TO ORGANIZATIONS COMMITTED TO HUNGER RELIEF IN THE COMMUNITIES WAWA SERVES,
INCLUDING REGIONAL SUPPLIERS AND LOCAL FOOD BANKS

Form 990, Part III, Line 4c:

IN 2017, THE FOUNDATION PROVIDED \$2,826,968 OF ASSISTANCE TO ORGANIZATIONS COMMITTED TO SUPPORTING ORGANIZATIONS SUCH AS CRISIS RESPONDERS,
MEMBERS OF THE MILITARY AND VETERANS

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

THE WAWA FOUNDATION INC

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Employer identification number

46-4021003

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ))
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university _____
- 10

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 11

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 12

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
- a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
- b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
- c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
- d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f

Enter the number of supported organizations _____
- g

Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170(b)(1)(A)(ix)

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support							
	Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ")		3,875,454	7,739,207	9,342,672	11,003,707	31,961,040
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3		3,875,454	7,739,207	9,342,672	11,003,707	31,961,040
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						13,614,512
6	Public support. Subtract line 5 from line 4						18,346,528

Section B. Total Support								
Calendar year (or fiscal year beginning in) ►		(a)2013	(b)2014	(c)2015	(d)2016	(e)2017	(f)Total	
7	Amounts from line 4		3,875,454	7,739,207	9,342,672	11,003,707	31,961,040	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			334	2,882	2,843	6,059	
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income (Do not include gain or loss from the sale of capital assets (Explain in Part VI.))							
11	Total support. Add lines 7 through 10						31,967,099	
12	Gross receipts from related activities, etc. (see instructions)						12	
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► ☒							

Section C. Computation of Public Support Percentage						
14	Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))					14
15	Public support percentage for 2016 Schedule A, Part II, line 14					15
16a	33 1/3% support test—2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐					
b	33 1/3% support test—2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐					
17a	10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐					
b	10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐					
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐					

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ► ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests—2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>	1	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>	3a	
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>	4b	
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>	5a	
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	8	
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>	9a	
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b	
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>	9c	
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>	10a	
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>	10b	

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		
	11a	
	11b	
	11c	

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
	1	
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		
	2	

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
	1	

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
	1	
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
	2	
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
	3	

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a ☐ The organization satisfied the Activities Test. Complete line 2 below.		
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.		
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
	2a	
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
	2b	
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
	3a	
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
	3b	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)			

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes			
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity			
3 Administrative expenses paid to accomplish exempt purposes of supported organizations			
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval required)			
6 Other distributions (describe in Part VI) See instructions			
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions			
9 Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013.			
c From 2014.			
d From 2015.			
e From 2016.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2017 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2018. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2013.			
b Excess from 2014.			
c Excess from 2015.			
d Excess from 2016.			
e Excess from 2017.			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions)

Facts And Circumstances Test

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As Filed Data -

DLN: 93493228003078

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
THE WAWA FOUNDATION INC

Employer identification number
46-4021003

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

1

Total number at end of year

2

Aggregate value of contributions to (during year)

3

Aggregate value of grants from (during year)

4

Aggregate value at end of year

5

Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☐ Yes ☐ No

6

Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☐ Yes ☐ No

Part II

Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

Held at the End of the Year

2a

2b

2c

2d

3

Number of conservation easements on a certified historic structure included in (a)

4

Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

5

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

6

Number of states where property subject to conservation easement is located ►

7

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

8

Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

9

Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$

10

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

11

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

1b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i)

Revenue included on Form 990, Part VIII, line 1

► \$

(ii)

Assets included in Form 990, Part X

► \$

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenue included on Form 990, Part VIII, line 1

► \$

b

Assets included in Form 990, Part X

► \$

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 52283D

Schedule D (Form 990) 2017

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Temporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

(ii) related organizations

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				0

Part VII

Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b.
See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶		

Part VIII

Investments—Program Related.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶		

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	

Part X

Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.
See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
LIABILITIES TO NATIONAL PARTNERS	181,212	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	181,212	

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

☒

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	11,468,899
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	462,339
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	462,339
3	Subtract line 2e from line 1	3	11,006,550
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	11,006,550

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	11,129,737
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	462,339
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	462,339
3	Subtract line 2e from line 1	3	10,667,398
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	10,667,398

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 46-4021003
Name: THE WAWA FOUNDATION INC

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	INCOME TAXES - THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAX UNDER PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE THE FOUNDATION'S TAX FILINGS FOR 2014, 2015, AND 2016 ARE SUBJECT TO EXAMINATION, GENERALLY FOR THREE YEARS AFTER IT WAS FILED

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Schedule I
(Form 990)

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States
Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047
2017
Open to Public
Inspection

Department of the
Treasury
Internal Revenue Service

Name of the organization
THE WAWA FOUNDATION INC

Employer identification number
46-4021003

Part I

General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 156

3 Enter total number of other organizations listed in the line 1 table 0

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2	THE MAKING OF GRANTS IS UNDER THE CONTROL AND DISCRETION OF THE MEMBERS OF THE FOUNDATION'S BOARD THE BOARD SHALL REVIEW ALL REQUEST FOR FUNDS AND SHALL REQUIRE THAT SUCH REQUESTS SPECIFY THE USES TO WHICH THE FUNDS WILL BE SPENT IF THE BOARD APPROVES THE REQUEST, THEY SHALL AUTHORIZE PAYMENT OF SUCH FUNDS TO THE APPROVED GRANTEEES THE BOARD MAY REQUIRE THAT THE GRANTEEES FURNISH A PERIODIC ACCOUNTING TO SHOW THAT THE FUNDS WERE EXPENDED FOR THE PURPOSES APPROVED BY THE BOARD

Additional Data

Software ID:
Software Version:
EIN: 46-4021003
Name: THE WAWA FOUNDATION INC

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
180 TURNING LIVES AROUND 1 BETHANY ROAD BUILDING 3 SUITE 42 HAZLET, NJ 07730	22-2130220	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
ALEX'S LEMONADE STAND FOUNDATION 111 PRESIDENTIAL BLVD BALA CYNWYD, PA 19004	56-2496146	501(C) 3	51,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALL FAITHS FOOD BANK 8171 BLAIKIE COURT SARASOTA, FL 34240	65-0115814	501(C) 3	8,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
AMERICAN CANCER SOCIETY RELAY FOR LIFE 3363 WEST COMMERCIAL BLVD FORT LAUDERDALE, FL 33309	13-1788491	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CANCER SOCIETY INC 1626 LOCUST ST PHILADELPHIA, PA 19103	13-1788491	501(C) 3	97,500				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
AMERICAN DIABETES ASSOCIATION 1160 US 22 EAST SUITE 103 BRIDGEWATER, NJ 08807	13-1623888	501(C) 3	7,650				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN HEART ASSOCIATION 4217 PARK PLACE COURT GLEN ALLEN, VA 23060	13-5613797	501(C) 3	36,500				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
AMERICAN RED CROSS 2221 CHESTNUT ST PHILADELPHIA, PA 19103	53-0196605	501(C) 3	1,238,688				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICA'S GROW-A-ROW 150 PITTSTOWN ROAD PITTSTOWN, NJ 08867	26-2569598	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
AMI FOUNDATION 72 W JIMMIE LEEDS RD STE 1100 GALLOWAY, NJ 082059426	11-3676863	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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AMYOTROPHIC LATERAL SCLEROSIS ASSOCIATION 321 NORRISTOWN RD STE 260 AMBLER, PA 190022755	23-2387205	501(C) 3	6,250				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
ATLANTIC CITY RESCUE MISSION 2009 BACHARACH BLVD PO BOX 5358 ATLANTIC CITY, NJ 084015358	22-6076337	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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AUTISM SPEAKS 1990 K ST NW SECOND FLOOR WASHINGTON, FL 20006	20-2329938	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
BANCROFT 1255 CALDWELL ROAD CHERRY HILL, NJ 08034	21-0672770	501(C) 3	225,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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BE PROUD FOUNDATION 600 N JACKSON ST STE 9 MEDIA, PA 19063	23-2712821	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
BEEBE MEDICAL FOUNDATION 902 SAVANNAH RD LEWES, DE 19958	51-0319455	501(C) 3	6,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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BIG BROTHERS BIG SISTERS INDEPENDENCE REGION 123 SOUTH BROAD STREET SUITE 1050 PHILADELPHIA, PA 19109	23-1352034	501(C) 3	72,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
BIG BROTHERS BIG SISTERS OF BUCKS COUNTY INC 2875 YORK ROAD JAMISON, PA 18929	23-2461056	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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BIG BROTHERS BIG SISTERS OF CUMBERLAND AND SALEM COUNTIES 1944 EAST LANDIS AVENUE VINELAND, NJ 08362	22-2506724	501(C) 3	7,500				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
BOYS & GIRLS CLUBS OF BROWARD COUNTY 877 NW 61ST STREET FORT LAUDERDALE, FL 333092022	59-1108790	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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BOYS & GIRLS CLUBS OF CECIL COUNTY 107 RAILROAD AVENUE SUITE 341 ELKTON, MD 21921	52-2190263	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
BOYS & GIRLS CLUBS OF PHILADELPHIA 1518 WALNUT ST STE 712 PHILADELPHIA, PA 19102	23-1966756	501(C) 3	15,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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BRINGING HOPE HOME 641 SWEDSFORD RD MALVERN, PA 19355	26-1222985	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
BROAD STREET MINISTRY (BSM) 315 S BROAD ST PHILADELPHIA, PA 19107	20-2760310	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CAMP BARNES PO BOX 430 DOVER, DE 199030430	51-0062049	501(C) 3	20,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
CAMP DREAMCATCHER INC 148 WEST STATE STREET SUITE 104 KENNETT SQUARE, PA 19348	23-2980323	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CAPITAL AREA FOOD BANK 4900 PUERTO RICO AVE NE WASHINGTON, DC 200172313	52-1167581	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
CATHOLIC CHARITIES INC 2601 W 4TH STREET WILMINGTON, DE 19805	51-0065685	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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CELEBRATION CHURCH AND OUTREACH MINISTRY 5501 MIDLOTHIAN TURNPIKE RICHMOND, VA 23225	54-1991151	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
CENTRAL JERSEY BLOOD CENTER INC 494 SYCAMORE AVENUE SHREWSBURY, NJ 07702	22-1769155	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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CHESTER COUNTY FOOD BANK 650 PENNSYLVANIA DRIVE EXTON, PA 19341	27-0887311	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
CHILDREN & FAMILIES FIRST 2005 BAYNARD BLVD WILMINGTON, DE 19802	51-0065731	501(C) 3	12,500				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CHILDREN'S HOSPITAL FOUNDATION 2924 BROOK ROAD RICHMOND, VA 23220	51-0220692	501(C) 3	100,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
CHILDREN'S MIRACLE NETWORK 205 WEST 700 SOUTH SALT LAKE CITY, UT 84101	87-0387205	501(C) 3	474,968				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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CHOSEN 300 MINISTRIES INC 3959 LANCASTER AVE PHILADELPHIA, PA 19104	23-2858946	501(C) 3	6,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
CITY TEAM 634 SPROUL STREET CHESTER, PA 19013	94-1501265	501(C) 3	7,500				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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CITY YEAR PHILADELPHIA 211 NORTH 13TH STREET SUITE 100 PHILADELPHIA, PA 19107	22-2882549	501(C) 3	150,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
COMFORT ZONE CAMP INC 6606 WEST BROAD ST SUITE 401 RICHMOND, VA 23230	54-1916517	501(C) 3	22,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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COMMUNITY FOODBANK OF NEW JERSEY (CFBNJ) 31 EVANS TERMINAL HILLSIDE, NJ 07205	22-2423882	501(C) 3	752,643				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
COMMUNITY FOODBANKS INC AKA CHESTERFIELD FOOD BANK 12211 IRON BRIDGE ROAD CHESTER, VA 23831	27-1286258	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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COMMUNITY TREATMENT SOLUTIONS 236 W ROUTE 38 SUITE 210 MOORESTOWN, NJ 08057	22-3042664	501(C) 3	15,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
CRISTO REY PHILADELPHIA HIGH SCHOOL 5218 N BROAD ST PHILADELPHIA, PA 19141	27-3106321	501(C) 3	30,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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CYPRESS GARDENS WATER SKI TEAM INC 185 S TERRACE DR EAGLE LAKE, FL 338393338	39-2079179	501(C) 3	7,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
DEBORAH F SAGER MEMORIAL FUND (PART OF INSPIRA FOUNDATION) 2950 COLLEGE DR SUITE IF VINELAND, NJ 08360	22-3746758	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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DEBORAH HOSPITAL FOUNDATION 212 TRENTON ROAD BROWNS MILLS, NJ 08015	22-2049500	501(C) 3	50,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
DEVEREUX FOUNDATION 444 DEVEREUX DRIVE VILLANOVA, PA 19085	23-1390618	501(C) 3	75,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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DOMESTIC ABUSE PROJECT OF DELAWARE COUNTY INC 14 W SECOND ST MEDIA, PA 190632802	23-2053144	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
DOWN SYNDROME ASSOCIATION OF NORTHERN VIRGINIA 10467 WHITE GRANITE DRIVE SUITE 320 OAKTON, VA 22124	68-0605947	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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DRESS FOR SUCCESS MERCER COUNTY 3131 PRINCETON PIKE BUILDING 4 SUITE 209 LAWRENCEVILLE, NJ 08648	37-1536476	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
DREXEL UNIVERSITY 3141 CHESTNUT STREET PHILADELPHIA, PA 19104	23-1352630	501(C) 3	25,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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EDEN AUTISM SERVICES FOUNDATION 2 MERWICK ROAD PRINCETON, NJ 08540	22-4215005	501(C) 3	250,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
ELIJAH'S PROMISE 211 LIVINGSTON AVENUE NEW BRUNSWICK, NJ 08901	22-3055539	501(C) 3	7,500				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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EMILY'S ENTOURAGE 111 COLWYN LANE BALA CYNWYD, PA 19004	45-3768161	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
FEEDING NORTHEAST FLORIDA 1116 EDGEWOOD AVENUE NORTH JACKSONVILLE, FL 32254	46-5014769	501(C) 3	15,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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FEEDING SOUTH FLORIDA 2501 SW 32ND TERRACE PEMBROKE PARK, FL 33023	59-2097520	501(C) 3	45,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
FEEDING TAMPA BAY 4702 TRANSPORT DR BLDG 6 TAMPA, FL 336055940	59-2116576	501(C) 3	47,200				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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FORE THE LOVE 50 LAKEWOOD CAUSEWAY WINTER HAVEN, FL 33884	59-3649871	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
GOOD GRIEF INC 38 ELM STREET MORRISTOWN, NJ 07960	20-0514996	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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GOOD WORKS INC 544 E LINCOLN HIGHWAY PO BOX 1441 COATESVILLE, PA 19320	23-2513834	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
GOODWILL RESCUE MISSION INC 79 UNIVERSITY AVE NEWARK, NJ 071022108	22-1487207	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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GREATER JACKSONVILLE AREA USO COUNCIL INC PO BOX 108 BUILDING 1050 NAVAL AIR STATION JACKSONVILLE, FL 32212	59-1052424	501(C) 3	16,500				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
GREENER PARTNERS 2950 POTSHOP RD WORCESTER, PA 19490	26-2212927	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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HACKENSACK UNIVERSITY MEDICAL CENTER FOUNDATION 160 ESSEX STREET SUITE 101 LODI, NJ 07644	22-2339534	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
HARRY CHAPIN FOOD BANK OF SOUTHWEST FLORIDA 3760 FOWLER STREET FORT MYERS, FL 33901	59-2332120	501(C) 3	19,500				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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HEARTS UNITED AGAINST CANCER INC 210 ORCHARD LANE GLASSBORO, NJ 08028	47-1465264	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
HOME OF THE SPARROW 969 E SWEDESFORD ROAD EXTON, PA 19341	23-2775004	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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HOSPITAL HOSPITALITY HOUSE OF RICHMOND INC DBA THE DOORWAYS 612 E MARSHALL ST RICHMOND, VA 232191846	54-1240348	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
IGA NEPHROPATHY FOUNDATION OF AMERICA INC PO BOX 1322 WALL, NJ 07719	20-1155709	501(C) 3	9,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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JDRF 26 BROADWAY 14TH FLOOR NY, NY 10004	23-1907729	501(C) 3	658,339				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
JERSEY SHORE DREAM CENTER 1301 CORLIES AVE SUITE 1E NEPTUNE CITY, NJ 07753	45-4840107	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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JERSEY SHORE UNIVERSITY MEDICAL CENTER FOUNDATION 1340 CAMPUS PKWY BUILDING C UNIT 4 NEPTUNE, NJ 077536827	22-2342452	501(C) 3	80,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
JEWISH FAMILY & CHILDREN'S SERVICE AN AGENCY OF JEWISH FEDERATION OF SOUTH 1301 SPRINGDALE RD SUITE 150 CHERRY HILL, NJ 080032763	21-0634489	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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JOHNS HOPKINS ALL CHILDREN'S HOSPITAL FOUNDATION 500 7TH AVENUE ST PETERSBURG, FL 337014634	59-2481738	501(C) 3	25,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
KENNEDY KRIEGER INSTITUTE 707 N BROADWAY BALTIMORE, MD 21205	52-1524965	501(C) 3	26,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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KIDSBRIDGE INC 999 LOWER FERRY RD EWING, NJ 08628	22-3438541	501(C) 3	7,500				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
LEUKEMIA & LYMPHOMA SOCIETY 3 INTERNATIONAL DRIVE SUITE 200 RYE BROOK, NY 10573	13-5644916	501(C) 3	551,379				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEUKEMIA & LYMPHOMA SOCIETY 100 NORTH 20TH STREET SUITE 405 PHILADELPHIA, PA 19103	13-5644916	501(C) 3	150,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
LIFE CONCEPTS INC DBA QUEST INC 500 E COLONIAL DR ORLANDO, FL 328034504	59-2013160	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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LORI'S HANDS INC 550 SOUTH COLLEGE AVESUITE 110 NEWARK, DE 19713	45-3984559	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
LOURDES HEALTH SYSTEM FOUNDATION INC 1600 HADDON AVE CAMDEN, NJ 08103	22-2351960	501(C) 3	7,500				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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LUNGEVITY FOUNDATION 228 S WABASH AVENUE SUITE 700 CHICAGO, IL 60606	36-4433410	501(C) 3	20,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
MAKE-A-WISH FOUNDATION OF NEW JERSEY 1347 PERRINEVILLE ROAD MONROE TOWNSHIP, NJ 08831	22-2488495	501(C) 3	50,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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MANNA (METROPOLITAN AREA NEIGHBORHOOD NUTRITION ALLIANCE) 2323 RANSTEAD STREET PHILADELPHIA, PA 19130	23-2586142	501(C) 3	25,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
MANNA ON MAIN STREET 606 E MAIN STREET SUITE 1001 LANSDALE, PA 19446	23-2287252	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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MARCH OF DIMES 435 DEVON PARK DRIVE SUITE 300 WAYNE, PA 19087	13-1846366	501(C) 3	75,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
MDA 8501 LASALLE ROAD SUITE 106 TOWSON, MD 21286	13-1665552	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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MEALS ON WHEELS OF NORTHAMPTON COUNTY INC 4240 FRITCH DR BETHLEHEM, PA 18020	23-1861779	501(C) 3	7,500				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
MICHAEL GALLAGHER OUTING FOR CHOP 3401 CIVIC CENTER BLVD PHILADELPHIA, PA 191044319	23-1352166	501(C) 3	7,500				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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MISSION KIDS CHILD ADVOCACY CENTER 502 W GERMANTOWN PIKE SUITE 101 EAST NORRITON, PA 19403	14-1975929	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
MITZVAH CIRCLE FOUNDATION 1561 GEHMAN ROAD HARLEYSVILLE, PA 19438	26-3705891	501(C) 3	7,500				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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MONTGOMERY CHILD ADVOCACY PROJECT 409 CHERRY STREET NORRISTOWN, PA 19401	20-1460574	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
MUSCULAR DYSTROPHY ASSOCIATION 6196 LAKE GRAY BLVD JACKSONVILLE, FL 32244	13-1665552	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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NATIONAL ADOPTION CENTER 1500 WALNUT STREET SUITE 701 PHILADELPHIA, PA 19102	23-1966667	501(C) 3	25,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
NATIONAL KIDNEY FOUNDATION 1500 WALNUT ST SUITE 301 PHILADELPHIA, PA 19102	13-1673104	501(C) 3	20,250				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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NEW JERSEY COALITION FOR BATTERED WOMEN (DBA NEW JERSEY COALITION TO END DO 1670 WHITEHORSE HAMILTON SQUARE ROAD TRENTON, NJ 086903541	22-2370010	501(C) 3	75,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
OPERATION HOMEFRONT INC PO BOX 2102 DOYLESTOWN, PA 18901	32-0033325	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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OPERATION WARM INC 6 DICKINSON DRIVE SUITE 314 CHADDS FORD, PA 19317	38-3663310	501(C) 3	30,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
OPERATION YELLOW RIBBON OF SOUTH JERSEY PO BOX 43 MARLTON, NJ 08053	46-0918641	501(C) 3	52,500				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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ORLANDO HEALTH FOUNDATION INC 3160 SOUTHGATE COMMERCE BLVD SUITE 50 ORLANDO, FL 32806	59-2244943	501(C) 3	100,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
PALS PROGRAMS 4965 GRUNDY WAY DOYLESTOWN, PA 189026103	35-2334489	501(C) 3	25,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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PEACE VALLEY HOLISTIC CENTER 224 OLD LIMEKILN RD CHALFONT, PA 189141710	27-0586165	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
PENN STATE HEALTH CHILDREN'S HOSPITAL 500 UNIVERSITY DRIVE HERSHEY, PA 170332036	25-1854772	501(C) 3	15,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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PENNSYLVANIA COALITION AGAINST DOMESTIC VIOLENCE 3605 VARTAN WAY SUITE 101 HARRISBURG, PA 17110	23-2052886	501(C) 3	50,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
PHILABUNDANCE 3616 S GALLOWAY ST PHILADELPHIA, PA 19148	23-2290505	501(C) 3	75,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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POLICE ATHLETIC LEAGUE OF PHILADELPHIA 3068 BELGRADE STREET PHILADELPHIA, PA 19134	23-1507837	501(C) 3	112,160				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
POLICE ATHLETIC LEAGUE OF WILMINGTON INC 3707 N MARKET ST WILMINGTON, DE 19802	51-0388537	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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PUBLIC CITIZENS FOR CHILDREN AND YOUTH 1709 BENJAMIN FRANKLIN PARKWAY 6TH FLOOR PHILADELPHIA, PA 191031294	23-2137461	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
AMERICAN CANCER SOCIETY - RELAY FOR LIFE NEW JERSEY 2310 NJ-34 SUITE 1D MANASQUAN, NJ 08736	13-1788491	501(C) 3	11,600				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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ROBERT IRVINE FOUNDATION 1227 N FRANKLIN STREET TAMPA, FL 33602	46-5420676	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
ROC SOLID FOUNDATION 3333 STATION HOUSE RD CHESAPEAKE, VA 23321	26-4082283	501(C) 3	25,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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ROCKY RUN YMCA 1299 WEST BALTIMORE PIKE MEDIA, PA 19063	23-1243965	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
RYAN'S CASE FOR SMILES 295 E SWEDESFORD ROAD 396 WAYNE, PA 19087	86-1173750	501(C) 3	22,500				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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RYAN'S QUEST PO BOX 2544 HAMILTON, NJ 08690	26-1890529	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
SAINT JOSEPH'S UNIVERSITY 5600 CITY AVENUE PHILADELPHIA, PA 19131	23-1352674	501(C) 3	100,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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SANDY ROLLMAN OVARIAN CANCER FOUNDATION INC 2010 WEST CHESTER PIKE SUITE 410 HAVERTOWN, PA 19083	23-3068732	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
SECOND HARVEST FOOD BANK OF CENTRAL FLORIDA 2008 BRENGLE AVENUE ORLANDO, FL 32808	59-2142315	501(C) 3	45,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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SENIOR COMMUNITY SERVICES 600 SWARTHMORE AVENUE FOLSOM, PA 19033	23-2036247	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
SERVIAM GIRLS ACADEMY 14 HALCYON DRIVE NEW CASTLE, DE 19720	26-0792594	501(C) 3	20,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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SOLDIERSTRONG 1127 HIGH RIDGE ROAD 124 STAMFORD, CT 06905	46-2142225	501(C) 3	14,500				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
SPECIAL OLYMPICS OF DELAWARE 619 S COLLEGE AVENUE NEWARK, DE 19716	23-7162877	501(C) 3	31,613				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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SPECIAL OLYMPICS OF FLORIDA 1915 DON WICKHAM DRIVE CLERMONT, FL 34711	23-7181560	501(C) 3	59,754				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
SPECIAL OLYMPICS OF NEW JERSEY 1 EUNICE KENNEDY SHRIVER WAY LAWRENCEVILLE, NJ 08648	23-7448729	501(C) 3	210,868				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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SPECIAL OLYMPICS OF PENNSYLVANIA 2570 BLVD OF THE GENERALSSUITE 124 NORRISTOWN, PA 19403	23-2078543	501(C) 3	201,650				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
SPECIAL OLYMPICS VIRGINIA INC 3212 SKIPWITH ROAD SUITE 100 RICHMOND, VA 23294	54-1013637	501(C) 3	62,330				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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ST VINCENT DE PAUL OF BALTIMORE 2305 N CHARLES STSUITE 300 BALTIMORE, MD 212185297	52-0597056	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
STATE OF FLORIDA POLICE ATHLETICACTIVITIES LEAGUE 566 BARTON BLVD 8 ROCKLEDGE, FL 32955	59-2588363	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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STATE THEATRE REGIONAL ARTS CENTER AT NEW BRUNSWICK INC 40 LIVINGSTON AVENUE NEW BRUNSWICK, NJ 08901	16-1616384	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
SUSAN G KOMEN PHILADELPHIA 125 S 9TH STREET PHILADELPHIA, PA 19107	75-2949264	501(C) 3	79,500				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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TAILS OF VALOR PAWS OF HONO 201 N MAIN ST COOPERSBURG, PA 180361529	81-1221443	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
THE ANDREW MCDONOUGH B FOUNDATION 101 ROCKLAND CIRCLE WILMINGTON, DE 19803	42-1741037	501(C) 3	25,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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THE CHILDREN'S HOME OF EASTON 2000 S 25TH ST EASTON, PA 18042	24-0806100	501(C) 3	7,500				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
THE CHILDREN'S HOSPITAL OF PHILADELPHIA - VOLUNTEER CENTER PO BOX 40930 PHILADELPHIA, PA 19107	23-2237932	501(C) 3	500,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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THE FAMILY CRISIS CENTER OF BALTIMORE COUNTY INC PO BOX 3909 DUNDALK, MD 21222	52-1793894	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
THE FOOD BANK OF DELAWARE 14 GARFIELD WAY NEWARK, DE 19713	51-0258984	501(C) 3	100,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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THE HEADSTRONG FOUNDATION 232 GREEN AVENUE HOLMES, PA 190431505	26-0283021	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
THE JAMES HOUSE INTERVENTIONPREVENTION SERVICES INC 6610 COMMONS DR STE C PRINCE GEORGE, VA 23875	54-1774908	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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THE LANCASTER COUNTY COUNCIL OF CHURCHES 812 N QUEEN ST LANCASTER, PA 176032740	23-1429852	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
THE LIGHTHOUSE INC 152 WEST LEHIGH PHILADELPHIA, PA 19133	23-0809250	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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THE NEMOURS FOUNDATION 1600 ROCKLAND ROAD SHANDS HOUSE WILMINGTON, DE 19803	59-0634433	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
THE SALVATION ARMY 440 WEST NYACK RD PO BOX C-635 WEST NYACK, NY 109941739	13-5562351	501(C) 3	60,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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THE SALVATION ARMY 575 EAST STATE STREET TRENTON, NJ 08609	13-5562351	501(C) 3	12,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
THOMAS JEFFERSON UNIVERSITY JEFFERSON HEALTH 125 S 9TH STREET SUITE 600 PHILADELPHIA, PA 19107	23-1352651	501(C) 3	50,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

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TREASURE COAST FOOD BANK 401 ANGLE ROAD FORT PIERCE, FL 34947	65-0123281	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
TURNING POINTS 701 17TH AVENUE WEST BRADENTON, FL 34205	59-3340921	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITE FOR HER (HELPING TO EMPOWER AND RESTORE) 127 EAST CHESTNUT STREET WEST CHESTER, PA 19380	26-4444438	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
USO 2111 WILSON BLVD SUITE 1200 ARLINGTON, VA 22201	13-1610451	501(C) 3	673,719				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USO OF CENTRAL FLORIDA 4100 GEORGE J BEAN PKWY SUITE 2441 TAMPA, FL 33607	37-1664582	501(C) 3	38,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
USO OF METROPOLITAN WASHINGTON-BALTIMORE PO BOX 1710 FORT MYER, VA 22211	53-0204665	501(C) 3	20,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VARIETY CLUB CAMP AND DEVELOPMENTAL CENTER 2950 POTSHOP ROAD PO BOX 609 WORCESTER, PA 19490	23-1556195	501(C) 3	150,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
VETERANS MULTI-SERVICE CENTER 213 N 4TH STREET PHILADELPHIA, PA 19106	23-2764079	501(C) 3	7,500				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEST END COMMUNITY AMBULANCE ASSOCIATION PO BOX 200 964 GILBERT ROAD EFFORT, PA 18330	23-2532377	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
WEST PHILADELPHIA ALLIANCE FOR CHILDREN 5070 PARKSIDE AVENUE SUITE 1414 PHILADELPHIA, PA 19131	20-1574860	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA CAMP OCKANICKON INC 1303 STOKES RD MEDFORD, NJ 08055	21-0635054	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
SPECIAL OLYMPICS OF MARYLAND 3701 COMMERCE DRIVE SUITE 103 BALTIMORE, MD 21227	23-7089144	501(C) 3	26,113				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIG BROTHERS BIG SISTERS OF MERCER COUNTY 535 EAST FRANKLIN STREET TRENTON, NJ 08610	06-1653897	501(C) 3	5,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES
GILDA'S CLUB SOUTH JERSEY 700 NEW ROAD LINWOOD, NJ 08221	04-3639550	501(C) 3	10,000				TO SUPPORT THE FOUNDATION PROGRAM INITIATIVES

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization
THE WAWA FOUNDATION INC

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Employer identification number

46-4021003

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	ALL OFFICERS & DIRECTORS ARE EITHER EMPLOYEES AND/OR DIRECTORS OF WAWA, INC AND/OR ITS RELATED ENTITIES

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 WAS PROVIDED TO EACH VOTING MEMBER OF THE GOVERNING BODY AND APPROVED PRIOR TO FILING

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	DIRECTORS ARE REQUIRED TO DISCLOSE CONFLICTS OF INTEREST AND SIGN A CONFLICT OF INTEREST POLICY ANNUALLY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493228003078

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
THE WAWA FOUNDATION INC

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Employer identification number

46-4021003

Part I Identification of Disregarded Entities

Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No
(1) WAWA INC 260 WEST BALTIMORE PIKE MEDIA, PA 19063 21-0515330	CONVENIENCE STORE	NJ	N/A	S					No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii)annuities, (iii) royalties, or(iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

Yes

No

No

No

Yes

No

No

No

No

No

No

No

No

No

No

Yes

Yes

No

Yes

No

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Schedule R (Form 990) 2017

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)