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Form **990-PF**Department of the Treasury

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

2019

For calendar year 2019 or tax year beginning and ending Name of foundation A Employer identification number JAMES E DAVIS FAMILY CHARITIES. 59-6128733 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 4310 PABLO OAKS COURT (904)223-7490City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here JACKSONVILLE, FL 32224 G Check all that apply: Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: If the foundation is in a 60-month termination. (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 19,831,791. (Part I, column (d), must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements for charitable purpose (cash basis only) (b) Net investment (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income ıncome N/A Contributions, gifts, grants, etc., received 2 Check X if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 64,165 64,165. STATEMENT Dividends and interest from securities 432,331. 432,331 STATEMENT 5a Gross rents b Net rental income or (loss) 118,563 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 8,309,093. 118,563 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 27,772. 27,772 STATEMENT 11 Other income 642,831 642,831 Total Add lines 1 through 11 12 0. 0. 0. 13 Other employee salaries and wages 14 Pension plans, employee benefits 0 15 Operating and Administrative Expenses 16a Legal fees UL 27 2020 b Accounting fees Other professional fees 17 STMT 4 6,323. 0 0. 18 19 Depreciation and depletion Оссиралсу Travel, conferences, and meetings 21 Printing and publications 33,268. 16,634 16,634. 23 Other expenses STMT 5 24 Total operating and administrative 39,591. 16,634 expenses Add lines 13 through 23 16,634. 5,502,422. 5,502,422. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements 5,542,013 16,634 5,519,056. Add lines 24 and 25 27 Subtract line 26 from line 12: -4,899,182_• 8 Excess of revenue over expenses and disbursements 626,197 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions

Ď	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
<u> </u>	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	3,170,642.	190,624.	190,624.
	3	Accounts receivable			
		Less: allowance for doubtful accounts ▶	710.		
	4	Pledges receivable >			
		Less: allowance for doubtful accounts ▶		_	
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock STMT 6	19,732,267.	17,635,240.	19,016,433.
	С	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 7	444,105.	622,940.	622,940.
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			
	15	Other assets (describe STATEMENT 8)	2,056.	1,794.	1,794.
		Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, item I)	23,349,780.	18,450,598.	19,831,791.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ç	19	Deferred revenue			
Labilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow FASB ASC 958, check here			
S		and complete lines 24, 25, 29, and 30			
nces	24	Net assets without donor restrictions			
3ala	25	Net assets with donor restrictions			
Net Assets or Fund Bala		Foundations that do not follow FASB ASC 958, check here			
Ē		and complete lines 26 through 30.			
ò	26	Capital stock, trust principal, or current funds	23,349,780.	18,450,598.	
ets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	· · · · · · · · · · · · · · · · · · ·
155	28	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
e e	29	Total net assets or fund balances	23,349,780.	18,450,598.	
Z					
	30	Total liabilities and net assets/fund balances	<u>23,349,780.</u>	<u> 18,450,598.</u>	
P	art	III Analysis of Changes in Net Assets or Fund Ba	alances		
 1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 2	29		
		st agree with end-of-year figure reported on prior year's return)		1	23,349,780.
		r amount from Part I, line 27a		2	-4,899,182.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	18,450,598.
		eases not included in line 2 (itemize)		5_	0.
		net assets or fund halances at end of year (line 4 minus line 5) - Part II co	lumn (h) line 29	6	18.450.598.

JAMES E DAVIS FAMILY CHARITIES, INC

59-6128733 Page 2

Form **990-PF** (2019)

Form 990-PF (2019)

923521 12-17-19

Form **990-PF** (2019)

U	Part IV Capital Gains	and Losses for Tax on	_Investment	Income						
	(a) List and describe 2-story brick wa	the kind(s) of property sold (for erehouse; or common stock, 200	example, real esta shs. MLC Co.)	te,	(b) How P - Pi D - D	acquired urchase onation	(c) Date (mo., d	acquired lay, yr.)	(d) Date sold (mo., day, yr.)	
18	S/T M/L TRANSA	CTIONS - SEE AT	TACHED			P	VARI	OUS	VARIOUS	
	L/T M/L TRANSA		TACHED			P	VARI		VARIOUS	
_	BRIXMOR CLASS					P	VARI		06/30/1	9
_	JPMORGAN CLASS	ACTION SETTLEN	1ENT			P	VARI		10/31/1	
_										
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				ain or (loss s (f) minus		
_8	606,791.			600,22					6,56	8.
_t	7,700,933.			7,590,30	7.				110,62	6 .
_				<u> </u>				_	1,34	
_(24.							_	2	<u>4.</u>
_6						<u>-</u>				
	Complete only for assets showing	g gain in column (h) and owned			_	-	(I) Gains (C	ol. (h) gain	minus	
	(i) FMV as of 12/31/69	(j) Adjusted basis		cess of col. (I)		C	i. (K), DUT I Losses	not less tha (from col (n -U-) or 'h))	
_	(1)111111 43 61 12/6 1/65	as of 12/31/69	over	col (j), if any						
_8	1								6,56	
_1	<u> </u>								110,62	
_	<u> </u>				-				1,34	
	<u> </u>		_ -						2	<u>4.</u>
_										
2	Capital gain net income or (net ca	pital loss) { If gain, also ei	nter in Part I, line r -0- in Part I, line	7 7	} 2				118,56	3.
3	Net short-term capital gain or (los	•								
_	If gain, also enter in Part I, line 8,		, (-,-		}					
_	If (loss), enter -0- in Part I, line 8				<u> </u>			<u> N/A</u>		
	Part V Qualification U	nder Section 4940(e) f	or Reduced	Tax on Net	Inves	tment in	come			
(F	or optional use by domestic private	foundations subject to the section	on 4940(a) tax on	net investment in	come.)					
lf	section 4940(d)(2) applies, leave th	ne nart hlank								
''	section 4540(u)(z) applies, leave ti	no part blank.								
	as the foundation liable for the sec			•	ioq5				Yes X	No
_	"Yes," the foundation doesn't qualif									
1	Enter the appropriate amount in	each column for each year; see th	ne instructions be	fore making any er	ntries.				(4)	
	(a) Base period years	(b)	distant interes	Not value of por	(c)	do una annat		Distrib	(d) oution ratio	
_	Calendar year (or tax year beginni			Net value of nor				(col. (b) div	rided by col. (c))	
_	2018		995,147.			65,05			.2248	_
_	2017		532,038.			50,36			.2019	
_	2016	5,1	L <u>27,356.</u>			27,32		_	.2708	
			77,496.			58,81			.0102	
_			L86,695.		7,6	74,67	1.	·	.0243	<u> 26</u>
							İ		=	
	Total of line 1, column (d)						2		.7322	<u>22</u>
3	Average distribution ratio for the		tal on line 2 by 5 (0, or by the numbe	er of year	rs	}	}		
	the foundation has been in exister	nce if less than 5 years					3_		.1464	44
										_
4	Enter the net value of noncharitab	le-use assets for 2019 from Part	X, line 5				4	2	2,461,00	<u>3.</u>
										_
5	Multiply line 4 by line 3						5		3,289,27	<u>9.</u>
6	Enter 1% of net investment incom	ne (1% of Part I, line 27b)					6		6,26	<u>2.</u>
									_	_
7	Add lines 5 and 6						7_		3,295,54	<u>1.</u>
٥							1			
	Enter qualifying distributions from	n Part XII line 4					Ω		5.519 05	6 -
0	Enter qualifying distributions from If line 8 is equal to or greater than		line the and so	late that part us-	a a 10/ ±-	av sata	8		5,519,05	<u>6.</u>

Part VII Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions)	Form 990-PF (2019) JAMES E DAVIS FAMILY CHARITI	ES, INC	59-612			Page 4
Date of ruling or determination letter: Domestic foundations that meet the section 4940(a) requirements in Part V, check here ► ☑ and enter 1% of Part I, line 27b.			<u> 1948 - see</u>	ınstrı	ICTIO	ns)
b Domestic foundations that meet the section 4940(e) requirements in Part IV, check here			1 1			
of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 3 Add lines 1 and 2 3 Scheme 1 Subtract income Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0- 5 Circdist*Pyements: 2 019 estimated tax payments and 2018 overpayment credeted to 2019 5 Exempt foreign organizations - tax withheld at source 6 Tax pand with application for extension of time to file (Form 8888) 6 C Circdist*Pyemoris: 2 1019 estimated tax payments. Add lines 5a through 5d 6 Exempt foreign organizations - tax withheld at source 6 Total credits and payments. Add lines 5a through 5d 7 Total credits and payments. Add lines 5a through 5d 8 Enter any penalty for underpayment of estimated tax. Check here in a form 1 form 2220 is attached 8 C C C C C C C C C C C C C C C C C C C						
a All other domestic foundations enter 2% of the 27b. Exempt foreign organizations, enter 4% of Part I, Inte 12, coil. (b) 2 C Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 3 display (comestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 4 0. 3 6, 262. 4 0. 5 Tax based on investment income. Subtract line 4 from line 3. It zero or liss, senter -0- 5 5, 2652. 5 12x based on investment income. Subtract line 4 from line 3. It zero or liss, senter -0- 5 5, 2652. 5 5, 2652. 5 5, 2652. 5 12x based on investment tincome. Subtract line 4 from line 3. It zero or liss, senter -0- 5 5 5, 2652. 5 5, 2652. 5 12x based on investment tincome. Subtract line 4 from line 3. It zero or liss, senter -0- 5 5 5, 2652. 5 5, 2652. 5 5, 2652. 5 12x based on investment tincome. Subtract line 4 from 182	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► X and enter 1%	1		<u>6,2</u>	<u>62.</u>
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3.11 zero or less, enter -0- 5 Credits/Payments: a 2019 setimated tax payments and 2018 overpayment credited to 2019 6 Exempt foreign organizations: -tax withheld at source 6 D. Credits/Payments. 5 Exempt foreign organizations: -tax withheld at source 6 D. Credits/Payments and taxable foundation for extension of time to file (form 8869) 6 D. Credits of Baskuu withhold inger organizations: -tax withheld at source 6 D. Credits/Payments and taxable diseases and payments. Add lines 6 at more than line 7, celter amount owed 7 Total credits and payments. Add lines 6 at more than line 7, celter amount owed 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due If the total of lines 5 and 8 is more than line 7, celter amount owed 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount owed 10 Verpayment If line 7 is more than the total of lines 5 and 8, enter the amount owed 10 Verpayment If line 7 is more than the total of lines 5 and 8, enter the amount owed 10 Verpayment If line 7 is more than the lotal of lines 5 and 8, enter the amount owed 10 Verpayment If line 7 is more than the total of lines 5 and 8, enter the amount owed 11 Depart Viria	of Part I, line 27b					
3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 5 Tax based on investment income Subtract line 4 from line 3.11 zero or less, enter -0- 6 CredistPayments; a 2019 estimated tax payments and 2018 overpayment credited to 2019 6 Exempt foreign organizations - tax withheld at source 6 Cray paid with application for extension of time to the (Form 8868) 6 Exits any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 7 Total credits and payments, Add lines 6 at through 6d 8 Entire any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 Entire any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount over 10 Overpayment Ill line 7 is more than the total of lines 5 and 8, note the amount overpaid 11 Enter the amount of line 10 to be. Credited to 2020 estimated tax ► 1, 7.9.4. Refunded ► 11 9 Tay 4. Refunded ► 11 10 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene m any political campaign? 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene m any political campaign? 13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene m any political campaign. 14 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene m any political campaign. 15 During the tax year, did the foundation attempt to midical description of the activities. 16 During the tax year, did the foundation and the activities. 17 During the tax year, did the foundation and the activities. 18 During the tax year, did the foundation and the activities. 29 During the foundation have	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter	4% of Part I, line 12, col. (b) 丿				
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5 Tax based on Investment Income Subtract line 4 from line 3. If zero or less, enter-0-6 C OrdishPayments. 2 019 estimated tax payments and 2018 overpayment credited to 2019 6 0 0. 6 0 0. 6 0 0. 6 0 0. 6 0 0. 7 0 0. 6 0 0. 7 0 0. 8 0.0 0. 8 Enter any penalty for underpayment of estimated tax. Check here if from 2220 is attached 7 1 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if from 2220 is attached 9 1 Tax due if the total of lines 5 and 8 is more than line 7, enter amount owed 10 0 verpayment [line 7 is more than line 7, enter amount owed 11 Enter the amount of line 10 to be. Credited to 2020 estimated tax ▶ 1, 7.9.4. Retunded ▶ 10. 11. First the amount of line 10 to be. Credited to 2020 estimated tax ▶ 1, 7.9.4. Retunded ▶ 11. 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition if the answer is "Yes" to a or 1b., attach a detailed description of the activities. 1 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition in any political campaign? 1 Did the foundation his political campaign and a detailed description of the activities. 2 Did the foundation his political campaign any activities that have not previously the political expenditure tax imposed on foundation managers. ▶ 2. 2 Enter the reimbu sement (if any) paid by the foundation during the year? 1) Unkno	3 Add lines 1 and 2		3		6,2	62.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-6 6 Credito/Payments: a 20 i9 estimated tax payments and 2018 overpayment credited to 2019 6 Exempt foreign organizations - tax withheld at source 7 Tax paid with application for extension of this to the (Form 8868) 6 Exp. 0 - 9 Total credits and payments. Add lines 6a through 6d 8 Exiter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owned 10 Overpayment. If line 7 is more than the total of lines 5 and 8 is more than line 7, enter amount owned 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owner 11 Entir the amount of line 10 to be Credited to 2020 estimated tax. ▶ 1, 794. Refunded 11 1, 794. 11 Entir the amount of line 10 to be Credited to 2020 estimated tax. ▶ 1, 794. Refunded 11 1, 794. 12 Fart VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campagin? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition. If the answer is "Set to 1 a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did it foundation file form 1120-POL for this year? (1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 . e Enter the rembursement (if any) tax do political expenditures (section 4955) imposed during the year. (1) On the foundation have an optimized expenditure (section 4955) imposed during the year. (1) On the foundation and any chrotices that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. 3 Has the foundation have an optimized expenditure tax imposed on foundation manage	4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	; others, enter -0-)	4			0.
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FL b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co	mplete Part II, col. (c), and Part XV		-7	X	├─
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year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X				_8b	X	<u> </u>
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	•		calendar		:	
						X C
	10 Did any persons become substantial contributors during the tax year? If "Yes," attach a school	edule listing their names and addresses			<u></u>	<u>X</u>

11

	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
40	If "Yes," attach statement. See instructions	12	-	<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
4.4	Website address N/A Tababas as N/A	222	7.4	00
14	The books are in care of \blacktriangleright S A OKO Located at \blacktriangleright 4310 PABLO OAKS COURT, JACKSONVILLE, FL ZIP+4 \blacktriangleright 32	223	- / 4	90
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	44	_	\Box
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country >			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		- 1	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		l	
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No	1	Ì	
	• • •			
	(6) Agree to pay money or property to a government official? (Exception, Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
h	of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	[[
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	16		
	Organizations relying on a current notice regarding disaster assistance, check here			
С	E Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2019?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines]	,	
	6d and 6e) for tax year(s) beginning before 2019?		1	
	If "Yes," list the years \blacktriangleright			
þ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	0.	,	
_	statement - see instructions.) N/A If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	2b		
U	• • • • • • • • • • • • • • • • • • • •			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
- Ou	during the year?	1 1		
b	of "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after			
-	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,			
	Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		<u> </u>
	For	m 990	-PF((2019)

orm 990-PF (2019) JAMES E DAVIS FAMILY CHA	ARITIES, INC		59-61287	33	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4/20 May Be	Required (contin	ued)	lV-	- N-
.5a During the year, did the foundation pay or incur any amount to:	4045/->>0	<u> </u>	[]	Ye	s No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section)			es X No		
(2) Influence the outcome of any specific public election (see section 4955); any voter registration drive?	or to carry on, unectly or muli		es X No		
(3) Provide a grant to an individual for travel, study, or other similar purpose:	c?		es X No		ļ
(4) Provide a grant to an organization other than a charitable, etc., organization		١٠ ـــــا	:s (2) NO		
4945(d)(4)(A)? See instructions			es 🗓 No	İ	
(5) Provide for any purpose other than religious, charitable, scientific, literary	v. or educational purposes, or		,0 ,122		
the prevention of cruelty to children or animals?	,		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify ur	der the exceptions described				
section 53.4945 or in a current notice regarding disaster assistance? See inst		Ū	N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check	here		▶□□		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption	from the tax because it mainta	nned			
expenditure responsibility for the grant?	Ŋ	1/A 🔲 Ye	es No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		_		
a personal benefit contract?		Ye	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		-	6b	<u> </u>
If "Yes" to 6b, file Form 8870.	1. 11	<u></u>	es X No		
7a At any time during the tax year, was the foundation a party to a prohibited tax		Y6		7b	
 b If "Yes," did the foundation receive any proceeds or have any net income attrib 8 Is the foundation subject to the section 4960 tax on payment(s) of more than 		A.F.	M/A	70	-
excess parachute payment(s) during the year?	# 1,000,000 in remaineration o		es X No	1	
Part VIII Information About Officers, Directors, Trust					
r dit viii information About Officers, Directors, Trus	tees, Foundation Ma				
Paid Employees, and Contractors				<u> </u>	
Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and	their compensation.	anagers, Highly	/	1	
Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and	their compensation. (b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) E	xpense nt, other
Paid Employees, and Contractors	their compensation. (b) Title, and average	anagers, High!	(d) Contributions to employee benefit plans	(e) E accou allov	xpense nt, other vances
Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and	their compensation. (b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) E accou allov	xpense nt, other wances
Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and (a) Name and address	their compensation. (b) Title, and average hours per week devoted	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) E accou allov	vances
Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and	their compensation. (b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) E accou allov	xpense nt, other vances
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Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and (a) Name and address SEE STATEMENT 9	their compensation. (b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter-0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) E accou	vances
Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and (a) Name and address	their compensation. (b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter-0-)	(d) Contributions to employee benefit plans and deferred compensation	allo	0 .
Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and (a) Name and address SEE STATEMENT 9	their compensation. (b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter-0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) E	vances
Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and (a) Name and address SEE STATEMENT 9 2 Compensation of five highest-paid employees (other than those in	their compensation. (b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation O .	(e) E	vances O •
Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and (a) Name and address SEE STATEMENT 9 2 Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	their compensation. (b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation O .	(e) E	vances O •
Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and (a) Name and address SEE STATEMENT 9 2 Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	their compensation. (b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation O .	(e) E	vances O •
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Form **990-PF** (2019)

Total number of other employees paid over \$50,000

Form 990-PF (2019) JAMES E DAVIS FAMILY CHARITIES, IN		<u>6128733Page7</u>
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NO	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	<u></u>	
		_
		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities	 -	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced	nformation such as the , etc.	Expenses
1N/A		
		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		<u></u>
Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2.	Amount
1_ N/A		
2		
		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.
Total. Add lines 1 tillough 5		

0 . Form **990-PF** (2019)

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	18,929,470.
	Average of monthly cash balances	1b	3,873,579.
	Fair market value of all other assets	1c	
đ	Total (add lines 1a, b, and c)	1d	22,803,049.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	22,803,049.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	342,046.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	22,461,003.
6_	Minimum investment return Enter 5% of line 5	6	1,123,050.
P	pistributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	d certain	
	foreign organizations, check here 🕨 🔛 and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	1,123,050.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	6,262.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,116,788.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,116,788.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,116,788.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	5,519,056.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	1	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	<u>5,519,056.</u>
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	6,262.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	5,512,794.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies f	or the section

Form **990-PF** (2019)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
Distributable amount for 2019 from Part XI,				1,116,788.
Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only			0.	
b Total for prior years:		0		
Excess distributions carryover, if any, to 2019:		0.		
a From 2014				
b From 2015				
c From 2016 4, 188, 346.				
d From 2017 4,954,066.]			
e From 2018 4,687,918.				
f Total of lines 3a through e	13,830,330.			
Qualifying distributions for 2019 from				
Part XII, line 4: ► \$ 5,519,056.	,			
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			·
d Applied to 2019 distributable amount				1,116,788.
e Remaining amount distributed out of corpus	4,402,268.			
Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	0.	_		0.
Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	18,232,598.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable		- 0.		
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line			· · · · · · · · · · · · · · · · · · ·	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				0.
Amounts treated as distributions out of			·	
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			_
Excess distributions carryover from 2014				
not applied on line 5 or line 7	0.			
Excess distributions carryover to 2020			-	
Subtract lines 7 and 8 from line 6a	18,232,598.			
Analysis of line 9:				
a Excess from 2015]			
b Excess from 2016 4,188,346.	.]			
c Excess from 2017 4,954,066.]			
d Excess from 2018 4,687,918.]			
e Excess from 2019 4,402,268.	<u></u>			5 000 DT (0040)

	DAVIS FAMI				.28733 Page 10
Part XIV Private Operating F			II-A, question 9)	N/A	·
1 a If the foundation has received a ruling o			1		
foundation, and the ruling is effective fo			▶ ∟		
b Check box to indicate whether the found		g foundation described		4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	1,0010	<u> </u>
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4, for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of	1				
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the afternative test relied upon:					
a "Assets" alternative test - enter:		`			
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return			1		}
shown in Part X, line 6, for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross				1	
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					",
Part XV Supplementary Info			if the foundation	had \$5,000 or m	ore in assets
at any time during t	 -	uctions.)			
1 Information Regarding Foundation	_		4 . b . d	farradation bufaratha als	
a List any managers of the foundation wh year (but only if they have contributed in			tributions received by the	noundation before the cit	ise of any tax
NONE	, , , , , , , , , , , , , , , , , , ,				
b List any managers of the foundation wh	o own 10% or more of th	e stock of a cornoration	(or an equally large ports	on of the ownership of a r	partnership or
other entity) of which the foundation has			(or an equally large porti	on or the ownership or a p	ar thorship of
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan	Scholarship, etc., P	rograms		
Check here ► X if the foundation o				not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc.,					
a The name, address, and telephone num	ber or email address of th	e person to whom appli	cations should be addres	sed:	
b The form in which applications should b	e submitted and informat	ion and materials they s	hould include:		
		<u> </u>			
c Any submission deadlines:		_			
d Any restrictions or limitations on awards	s, such as by geographica	al areas, charitable fields	, kinds of institutions, or	other factors:	

3 Grants and Contributions Paid During the	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	711100111
a Paid during the year				
SEE ATTACHED LIST	NONE	PUBLIC	UNSPECIFIED	
	 			5,502,422
· · · · · · · · · · · · · · · · · · ·				
Total			▶ 3a	5,502,422
b Approved for future payment				
NONE				
Total	1		▶ 3b	0

Enter gross amounts unless otherwise indicated.	Unrelated business income			y section 512, 513, or 514	(e)
•	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
a		-			
b					
c					
d		· ·			
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments		_			
3 Interest on savings and temporary cash					
investments			14	64,165. 432,331.	
4 Dividends and interest from securities			14	432,331.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income	523000	27,772.			
8 Gain or (loss) from sales of assets other					
than inventory			18	118,563.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	_				
b					
c		·			
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		27,772.	<u> </u>	615,059.	0
13 Total Add line 12, columns (b), (d), and (e)				13	642,831
(See worksheet in line 13 instructions to verify calculations	.)				
Part XVI-B Relationship of Activities	s to the Accomi	olishment of Ex	cempt Pi	ırposes	

Line No ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).					

Form 990 Part)		Information Re	egarding Trans		CHARITIES, nd Transactions a			128733 haritable		ige 13
		Exempt Organ	<u>izati</u> ons							
1 Did	the org	anization directly or indir	rectly engage in any o	of the followin	g with any other organizatio	in described in se	ction 501(c)		Yes	No
(oth	er than	section 501(c)(3) organ	nizations) or in section	n 527, relating	to political organizations?					
•		rom the reporting founda	•							ŀ
	Cash				,			1a(1)		Х
	Other	accate						1a(2)		Х
		sactions:						16/2/		
-			ble account armonimet					15/11		Х
٠,		of assets to a noncharital						1b(1)	ļ	
		ases of assets from a no		rganization				1b(2)	i	X
• •		of facilities, equipment,						1b(3)	1	X
(4)	Reimb	oursement arrangements						1b(4)		X
(5)	Loans	or loan guarantees						1b(5)		X
(6)	Perfor	mance of services or me	embership or fundrais	sing solicitatio	ns			1b(6)		X
c Sha	ring of	facilities, equipment, ma	uling lists, other asset	ts, or paid em	ployees			1c		X
d If th	ie answ	er to any of the above is	"Yes," complete the f	ollowing sche	dule. Column (b) should alv	ways show the fai	r market value of the god	ods, other as	sets,	
		given by the reporting for the value of the goods,			ed less than fair market valu	ie in any transact	on or sharing arrangeme	ent, show in		
(a) Line n		(b) Amount involved			exempt organization	(d) Descript	tion of transfers, transactions	and sharing a	rangeme	ents
(4) = 110 11		(B) / Allibant mivolvos	(6) 1141115 61	N/A						
	+			N/A						
	-	·		<u> </u>						
					 	 				
								.		
		<u> </u>								
-										
		***************************************			******					
	+	· · · · · · · · · · · · · · · · · · ·		<u> </u>		- -				-
										
	-									
ın s	ection	ndation directly or indirectly or indirectly or indirectlo 501(c) (other than section implete the following sch	on 501(c)(3)) or in se		or more tax-exempt organi	zations described	I	Yes	[X] No
(a) Name of organization					(b) Type of organization		(c) Description of relat	tionship		
-		N/A		-						
-		_								
	-					1				
	Under	penalties of perjury, I declare	that I have examined this	s return, includin	g accompanying schedules and	statements, and to	the best of my knowledge	May the IRS	discuss	this
Sign	and be	lief, it is true correct, and cor	return with the	ne prepa	rer					
Here		6/29/2000 Vice President								No
	Sinn	Signature of officer or trustee Date Title								
	l Sign	Print/Type preparer's na		Preparer's s		Date	Check If P	TIN		
		ι τιπο τχρο μιοματοί 3 Ια			.g		self- employed			
Paid							3011 0111410300			
				<u> </u>		<u> </u>	<u> </u>	·		
Preparent		Firm's name					Firm's EIN ►			

Phone no.

Firm's address

FORM 990-PF INTERE	ST ON SAVING	S AND T	EMPORA	RY (CASH I	NVESTMENTS	SI	ATEMENT	1
SOURCE						(B) INVESTMENT INCOME		(C) ADJUSTED NET INCOME	
DDI, INC MERRILL LYNCH (NOM)			48. 64,117.		48. 64,117.				
TOTAL TO PART I, LI	64,165.			64,165.				<u> </u>	
FORM 990-PF	DIVIDENDS	AND INT	EREST	FROI	M SECU	JRITIES	ST	'ATEMENT	2
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	S	REV	(A) VENUE BOOKS	(B) NET INVES MENT INCO		(C) ADJUST NET INC	
DDI, INC MERRILL LYNCH	35,745. 396,586.		0.		35,745				
(NOM) TO PART I, LINE 4	432,331.	0.		396,586 432,331					
FORM 990-PF		OTHER	INCOM	íE	<u> </u>		ST	PATEMENT	3
			REV	A) ENUI		(B) NET INVEST-		(C) ADJUSTE	
GUARDIAN CAPITAL PA TRUEBRIDGE DIRECT F				,934. ,838.	15,934. 11,838.		NET INCO	<u></u>	
TOTAL TO FORM 990-PF, PART I, LI			27,772. 27,772.						

FORM 990-PF	TAX	ES		STATEMENT 4			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(C) ADJUSTED NET INCOM			
EXCISE TAX ANNUAL REPORT	6,262. 61.		0.		0.		
TO FORM 990-PF, PG 1, LN 18	6,323.		0.		0.		
FORM 990-PF	OTHER E	XPENSES			STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(C) ADJUSTED NET INCOM			
ADMINISTRATIVE FEES ML INVESTMENT FEES PASSTHROUGH - PARTNERSHIPS	5,000. 20,216. 8,052.	10,	,500. ,108. ,026.		2,500. 10,108. 4,026.		
TO FORM 990-PF, PG 1, LN 23	33,268.	16,634			16,634.		
FORM 990-PF	CORPORAT	E STOCK			STATEMENT 6		
DESCRIPTION			вос	OK VALUE	FAIR MARKET VALUE		
MARKETABLE SECURITIES DDI, INC			17	7,235,254.	18,516,122. 500,311.		
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		17,635,240.		19,016,433.		
FORM 990-PF	OTHER INV	ESTMENTS	· · ·	<u> </u>	STATEMENT 7		
DESCRIPTION		LUATION ETHOD	вос	OK VALUE	FAIR MARKET VALUE		
GUARDIAN CAPITAL PARTNERS FUI LP TRUEBRIDGE DIRECT FUND LP		COST		428,783. 194,157.	428,783. 194,157.		
TOTAL TO FORM 990-PF, PART I				622,940.	622,940.		
							

FORM 990-PF	OTHER ASSETS		STATE	EMENT 8		
DESCRIPTION	BEGINNING OF YR BOOK VALUE		FAIR MARKET VALUE			
FEDERAL TAX OVERPAYMENT	2,056.	2,056. 1,794.				
TO FORM 990-PF, PART II, LINE 15	2,056.	1,79	4.	1,794.		
	T OF OFFICERS, I FOUNDATION MANA		STATE	EMENT 9		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-	EMPLOYEE BEN PLAN CONTRIB			
A DANO DAVIS 4310 PABLO OAKS COURT JACKSONVILLE, FL 32224	PRES, DIR 0.00	0.	0.	0.		
ROBERT H. PRITCHARD 4310 PABLO OAKS COURT JACKSONVILLE, FL 32224	VICE PRES 0.00	0.	0.	0.		
H D FRANCIS 4310 PABLO OAKS COURT JACKSONVILLE, FL 32224	VP & AST SEC 0.00	0.	0.	0.		
DOROTHY D SMITH 1016 FT MASON DR EUSTIS, FL 32726	DIRECTOR 0.00	0.	0.	0.		
JED V. DAVIS 4310 PABLO OAKS COURT JACKSONVILLE, FL 32224	VP, DIR 0.00	0.	0.	0.		
SCOTT A OKO 4310 PABLO OAKS COURT JACKSONVILLE, FL 32224	VICE PRES 0.00	0.	0.	0.		
JUDY B. MORGAN 4310 PABLO OAKS COURT JACKSONVILLE, FL 32224	SECRETARY 0.00	0.	0.	0.		
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	0.	0.	0.		