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Form **990-PF**
Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

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

OMB No. 1545-0052

2020

Open to Public Inspection

For calendar year 2020, or tax year beginning 01-01-2020 , and ending 12-31-2020

Name of foundation
REPUBLIC NATIONAL DISTRIBUTING COMPANY FOUNDATION INC

A Employer identification number
45-3842838

Number and street (or P.O. box number if mail is not delivered to street address)
ONE NATIONAL DRIVE

Room/suite

B Telephone number (see instructions)
(404) 472-2245

City or town, state or province, country, and ZIP or foreign postal code
ATLANTA, GA 30336

C If exemption application is pending, check here ▶ ☐

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here..... ▶ ☐
2. Foreign organizations meeting the 85% test, check here and attach computation ... ▶ ☐

H Check type of organization: ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ..... ▶ ☐

I Fair market value of all assets at end of year (from Part II, col. (c), *line 16)* ▶$ 180,209

J Accounting method: ☑ Cash ☐ Accrual ☐ Other (specify) _____
(Part I, column (d) must be on cash basis.)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ..... ▶ ☐

Part I **Analysis of Revenue and Expenses** *(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)*

			(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1	Contributions, gifts, grants, etc., received (attach schedule)	1,900,000			
	2	Check ▶ ☐ if the foundation is **not** required to attach Sch. B				
	3	Interest on savings and temporary cash investments	217	217		
	4	Dividends and interest from securities				
	5a	Gross rents				
	b	Net rental income or (loss) _____				
	6a	Net gain or (loss) from sale of assets not on line 10				
	b	Gross sales price for all assets on line 6a _____				
	7	Capital gain net income (from Part IV, line 2)		0		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less: Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)				
	12	**Total.** Add lines 1 through 11	1,900,217	217		
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc.	0	0		0
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
	16a	Legal fees (attach schedule)				
	b	Accounting fees (attach schedule)				
	c	Other professional fees (attach schedule)				
	17	Interest				
	18	Taxes (attach schedule) (see instructions)				
	19	Depreciation (attach schedule) and depletion				
	20	Occupancy				
	21	Travel, conferences, and meetings				
	22	Printing and publications				
	23	Other expenses (attach schedule)	1,054	1,054		0
	24	**Total operating and administrative expenses.** Add lines 13 through 23	1,054	1,054		0
	25	Contributions, gifts, grants paid	1,800,150			1,800,150
	26	**Total expenses and disbursements.** Add lines 24 and 25	1,801,204	1,054		1,800,150
	27	Subtract line 26 from line 12:				
	a	**Excess of revenue over expenses and disbursements**	99,013			
	b	**Net investment income** (if negative, enter -0-)		0		
	c	**Adjusted net income** (if negative, enter -0-)				

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	81,196	180,209	180,209
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶			
	Less: accumulated depreciation (attach schedule) ▶			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment: basis ▶			
	Less: accumulated depreciation (attach schedule) ▶			
	15 Other assets (describe ▶)			
	16 **Total assets** (to be completed by all filers—see the instructions. Also, see page 1, item I)	81,196	180,209	180,209
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)			
	23 **Total liabilities**(add lines 17 through 22)	0	0	
Net Assets or Fund Balances	**Foundations that follow FASB ASC 958, check here ▶ ☐ and complete lines 24, 25, 29 and 30.**			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ ☑ and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	0	0	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	28 Retained earnings, accumulated income, endowment, or other funds	81,196	180,209	
	29 **Total net assets or fund balances** (see instructions)	81,196	180,209	
	30 **Total liabilities and net assets/fund balances** (see instructions)	81,196	180,209	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	81,196
2	Enter amount from Part I, line 27a	2	99,013
3	Other increases not included in line 2 (itemize) ▶	3	0
4	Add lines 1, 2, and 3	4	180,209
5	Decreases not included in line 2 (itemize) ▶	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29	6	180,209

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a				
b				
c				
d				
e				

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) **or** Losses (from col.(h))
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any
a			
b			
c			
d			
e			

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 }	2	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE

1 Reserved

(a) Reserved	(b) Reserved	(c) Reserved	(d) Reserved

2	Reserved	2	
3	Reserved	3	
4	Reserved	4	
5	Reserved	5	
6	Reserved	6	
7	Reserved	7	
8	Reserved	8	

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter: _____ **(attach copy of letter if necessary–see instructions)**		
b	Reserved	1	0
c	All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2	3	0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	**Tax based on investment income.** Subtract line 4 from line 3. If zero or less, enter -0-	5	0
6	Credits/Payments:		
a	2020 estimated tax payments and 2019 overpayment credited to 2020 — 6a: 0		
b	Exempt foreign organizations—tax withheld at source — 6b: 0		
c	Tax paid with application for extension of time to file (Form 8868) — 6c: 0		
d	Backup withholding erroneously withheld — 6d: 0		
7	Total credits and payments. Add lines 6a through 6d	7	0
8	Enter any **penalty** for underpayment of estimated tax. Check here ☐ if Form 2220 is attached.	8	0
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶	9	0
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶	10	
11	Enter the amount of line 10 to be: **Credited to 2021 estimated tax** ▶ **Refunded** ▶	11	

Part VII-A Statements Regarding Activities

			Yes	No
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		No
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition)	1b		No
	*If the answer is "Yes" to **1a** or **1b,** attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.*			
c	Did the foundation file **Form 1120-POL** for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: **(1)** On the foundation. ▶ $ 0 **(2)** On foundation managers. ▶ $ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ $ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities.*	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes*	3		No
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T.*	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least $5,000 in assets at any time during the year? *If "Yes," complete Part II, col. (c), and Part XV.*	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ GA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? *If "No," attach explanation*	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2020 or the taxable year beginning in 2020? See the instructions for Part XIV. If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses.*	10	Yes	

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	

Website address ▶ N/A

14 The books are in care of ▶ FRANCIE PURNELL Telephone no. ▶ (404) 472-2294

Located at ▶ ONE NATIONAL DRIVE ATLANTA GA ZIP+4 ▶ 30336

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041** —check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the year ▶ 15

16	At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶	16		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

			Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☑ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☑ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☑ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☑ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☑ No			
	(6) Agree to pay money or property to a government official? (**Exception.** Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) ☐ Yes ☑ No			
b	If any answer is "Yes" to 1a(1)–(6), did **any** of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2020?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2020, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2020? ☐ Yes ☑ No			
	If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach statement—see instructions.)	2b		
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here. ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☑ No			
b	If "Yes," did it have excess business holdings in 2020 as a result of **(1)** any purchase by the foundation or disqualified persons after May 26, 1969; **(2)** the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or **(3)** the lapse of the 10-, 15-, or 20-year first phase holding period? *(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2020.)*	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required *(continued)*

			Yes	No
5a	During the year did the foundation pay or incur any amount to:			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☑ No			
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☑ No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☑ No			
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions ☐ Yes ☑ No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☑ No			
b	If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions	5b		No
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☐ No			
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☑ No			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		No
	If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☑ No			
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		
8	Is the foundation subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment during the year? ☐ Yes ☑ No			

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

(a) Name and address	**(b)** Title, and average hours per week devoted to position	**(c)** Compensation **(If not paid, enter -0-)**	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account, other allowances
EMILE SARTALAMACCHIA 809 JEFFERSON HIGHWAY NEW ORLEANS, LA 70121	CORP DIRCTR TAX 1.00	0	0	0
DENNIS BASHUK ONE NATIONAL DRIVE ATLANTA, GA 30336	FOUNDATION MGR. 3.00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than $50,000	**(b)** Title, and average hours per week devoted to position	**(c)** Compensation	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account, other allowances
NONE				

Total number of other employees paid over $50,000 ▶ 0

Part VIII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)***

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than $50,000	**(b)** Type of service	**(c)** Compensation
NONE		
Total number of others receiving over $50,000 for professional services. ▶		0

Part IX-A **Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

Part IX-B **Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions. **3**	
Total. Add lines 1 through 3 ▶	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	160,633
c	Fair market value of all other assets (see instructions)	1c	0
d	**Total** (add lines 1a, b, and c)	1d	160,633
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) — 1e: 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	160,633
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,409
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3. Enter here and on Part V, line 4	5	158,224
6	**Minimum investment return.** Enter 5% of line 5	6	7,911

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6		1	7,911
2a	Tax on investment income for 2020 from Part VI, line 5	2a		
b	Income tax for 2020. (This does not include the tax from Part VI.)	2b		
c	Add lines 2a and 2b		2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	7,911
4	Recoveries of amounts treated as qualifying distributions		4	0
5	Add lines 3 and 4		5	7,911
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	7,911

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	1,800,150
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	**Qualifying distributions.** Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,800,150
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions	5	0
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	1,800,150

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI, line 7				7,911
2 Undistributed income, if any, as of the end of 2020:				
a Enter amount for 2019 only.			0	
b Total for prior years: 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2020:				
a From 2015. 597,568				
b From 2016. 590,586				
c From 2017. 1,212,506				
d From 2018. 976,861				
e From 2019. 858,676				
f **Total** of lines 3a through e.	4,236,197			
4 Qualifying distributions for 2020 from Part XII, line 4: ▶ $ 1,800,150				
a Applied to 2019, 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 2020 distributable amount.				7,911
e Remaining amount distributed out of corpus	1,792,239			
5 Excess distributions carryover applied to 2020.	0			0
(If an amount appears in column (d), the same amount must be shown in column (a).)				
6 **Enter the net total of each column as indicated below:**				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	6,028,436			
b Prior years' undistributed income. Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b. Taxable amount —see instructions		0		
e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0			
8 Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions) . . .	597,568			
9 **Excess distributions carryover to 2021.** Subtract lines 7 and 8 from line 6a	5,430,868			
10 Analysis of line 9:				
a Excess from 2016. . . . 590,586				
b Excess from 2017. . . . 1,212,506				
c Excess from 2018. . . . 976,861				
d Excess from 2019. . . . 858,676				
e Excess from 2020. . . . 1,792,239				

Part XIV **Private Operating Foundations** (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2020, enter the date of the ruling. . . . . ▶

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

	Tax year	Prior 3 years			(e) Total
	(a) 2020	(b) 2019	(c) 2018	(d) 2017	
2a Enter the lesser of the adjusted net income from Part I or the minimum 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 exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test—enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . .					
c "Support" alternative test—enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV **Supplementary Information (Complete this part only if the foundation had $5,000 or more in assets at any time during the year—see instructions.)**

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000). (See section 507(d)(2).)

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

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

Check here ▶ ☑ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

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

c Any submission deadlines:

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

Part XV Supplementary Information (continued)

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year* See Additional Data Table				
Total . . . . . ▶ **3a**				1,800,150
b *Approved for future payment*				
Total . . . . . ▶ **3b**				0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue:					
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	217	
4 Dividends and interest from securities					
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					
8 Gain or (loss) from sales of assets other than inventory					
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)		0		217	0
13 **Total.** Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)				**13**	217

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

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). (See instructions.)

Part XVII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

		Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a Transfers from the reporting foundation to a noncharitable exempt organization of:			
(1) Cash	1a(1)		No
(2) Other assets	1a(2)		No
b Other transactions:			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		No
(3) Rental of facilities, equipment, or other assets	1b(3)		No
(4) Reimbursement arrangements	1b(4)		No
(5) Loans or loan guarantees	1b(5)		No
(6) Performance of services or membership or fundraising solicitations	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No

d If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

(a) Line No.	**(b)** Amount involved	**(c)** Name of noncharitable exempt organization	**(d)** Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☑ No

b If "Yes," complete the following schedule.

(a) Name of organization	**(b)** Type of organization	**(c)** Description of relationship

Sign Here

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 taxpayer) is based on all information of which preparer has any knowledge.

******	2021-10-28	******
Signature of officer or trustee	Date	Title

May the IRS discuss this return with the preparer shown below (see instr.) ☑ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☐	PTIN
RICK BERNSTEIN CPA		2021-10-28		P00548954

Firm's name ▶ APRIO LLP	Firm's EIN ▶57-1157523
Firm's address ▶ 5 CONCOURSE PARKWAY SUITE 1000 ATLANTA, GA 30328	Phone no. (404) 892-9651

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
ACLU FOUNDATION OF VIRGINA 701 EAST FRANKLIN STREET SUITE 1412 RICHMOND, VA 23219	NONE	PC	COMMUNITY SERVICE	3,000
AGRES ONLUS ASD VIA DANTE ALIGHIERI MASSINA 21040 IT	NONE	PC	COMMUNITY SERVICE	500
ALZHEIMER'S COMMUNITY CARE INC 800 NORTHPOINT PKWY WEST PALM BEACH, FL 33407	NONE	PC	COMMUNITY SERVICE	2,500
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
AMERICAN CANCER SOCIETY 132 W 32ND STREET NEW YORK, NY 10001	NONE	PC	MEDICAL RESEARCH	5,000
AMERICAN HEART ASSOCIATION 105 DECKER CT IRVINE, TX 75062	NONE	PC	MEDICAL	2,000
AMERICAN RED CROSS 8550 ARLINGTON BLVD FAIRFAX, VA 22031	NONE	PC	MEDICAL	50,000
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
APRON INC291 N HUBBARDS LN LOUISVILLE, KY 40207	NONE	PC	COMMUNITY SERVICE	50,000
ASHLAND POLICE FOUNDATION 601 ENGLAND ST ASHLAND, VA 23005	NONE	PC	COMMUNITY SERVICE	1,200
BACK ON MY FEET 201 N CHARLES STREET BALTIMORE, MD 21201	NONE	PC	COMMUNITY SERVICE	500
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
BLUE RIDGE AREA FOOD BANK PO BOX 937 VERONA, VA 24482	NONE	PC	COMMUNITY SERVICE	2,500
BOCA WEST CHILDREN'S FOUNDATION 20583 BOCA WEST DRIVE BOCA RATON, FL 33434	NONE	PC	COMMUNITY SERVICE	3,500
BYRON GAMBULOS ANIMAL ENRICHMENT ENDOWMENT 2322 N BROADWAY AVE OKLAHOMA CITY, OK 73103	NONE	PC	COMMUNITY SERVICE	2,500
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
CAMERON K GALLAGHER FOUNDATION 9700 GAYTON RD ROCHMOND, VA 23238	NONE	PC	COMMUNITY SERVICE	500
CAROLINE SYMMES FOUNDATION 12441 CREEKWOOD LN CARMEL, IN 46032	NONE	PC	COMMUNITY SERVICE	2,500
CHRISTAMORE HOUSE 502 N TREMONT ST INDIANAPOLIS, IN 46222	NONE	PC	COMMUNITY SERVICE	1,000
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
COASTAL BEND FOOD BANK 826 KRILL ST CORPUS CHRISTI, TX 78408	NONE	PC	COMMUNITY SERVICE	1,750
COASTAL CONSERVATION ASSOCIATION 4061 FORRESTAL AVE ORLANDO, FL 32806	NONE	PC	COMMUNITY SERVICE	5,000
COLORADO RESTAURANT ASSOCIATION 430 E 7TH AVE DENVER, CO 80203	NONE	PC	COMMUNITY SERVICE	20,000
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
CYSTIC FIBROSIS FOUNDATION 4550 MONTGOMERY AVE BETHESDA, MD 20814	NONE	PC	MEDICAL	3,000
DARE TO CARE5803 FERN VALLEY RD LOUISVILLE, KY 40228	NONE	PC	COMMUNITY SERVICE	1,000
DAVIDS FAITH AND HOPFE FOR LIFE FDN PO BOX 14 GOODRICH, MI 48438	NONE	PC	COMMUNITY SERVICE	1,500
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
DETROIT WINE ORGANIZATION PO BOX 876 BIRMINGHAM, MI 48012	NONE	PC	COMMUNITY SERVICE	3,000
DOWNTOWN INDY INC 111 MONUMENT CIR 250 INDIANAPOLIS, IN 46204	NONE	PC	COMMUNITY SERVICE	2,500
EISENHOWER HEALTH FOUNDATION 39000 BOB HOPE DRIVE RANCHO MIRAGE, CA 92270	NONE	PC	COMMUNITY SERVICE	5,000
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
EMERIL LAGASSE FOUNDATION 829 ST CHARLES AVENUE NEW ORLEANS, LA 70130	NONE	PC	COMMUNITY SERVICE	28,000
EQUAL JUSTICE INITIATIVE 122 COMMERCE ST MONTGOMERY, AL 36104	NONE	PC	COMMUNITY SERVICE	250,000
FEED MORE INC1415 RHOADMILLER ST RICHMOND, VA 23220	NONE	PC	COMMUNITY SERVICE	5,500
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
FEEDING AMERICA - KENTUCKY'S HEARTLAND 4900 PUERTO RICO AVE WASHINGTON, DC 20017	NONE	PC	COMMUNITY SERVICE	10,500
FEEDING AMERICA - KENTUCKY'S HEARTLAND PO BOX 821 ELIZABETHTOWN, KY 90037	NONE	PC	COMMUNITY SERVICE	10,500
FEEDING AMERICA - MARYLAND FOOD BANK 2200 HALETHORPE FARMS RD BALTIMORE, MD 21227	NONE	PC	COMMUNITY SERVICE	1,000
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
FEEDING SOUTHWEST VIRGINA 1025 ELECTRIC RD SALEM, VA 24153	NONE	PC	COMMUNITY SERVICE	2,000
FIRST SERVE3400 N PORTLAND AVE OKLAHOMA CITY, OK 73112	NONE	PC	COMMUNITY SERVICE	2,500
FOOD BANK FOR THE HEARTLAND 10525 J STREET OMAHA, NE 68127	NONE	PC	COMMUNITY SERVICE	4,000
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
FOODBANK OF SOUTHEASTERN VIRGINIA 800 TIDEWATER DR NORFOLK, VA 23504	NONE	PC	COMMUNITY SERVICE	2,000
FRAIZER HISTORY MUSEUM 829 W MAIN STREET LOUISVILLE, KY 40202	NONE	PC	CULTURAL	2,500
FRIENDS OF COSTCO GUILD PO BOX 19755 SEATTLE, WA 98109	NONE	PC	COMMUNITY SERVICE	10,000
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
GEORGE WASHINGTON'S MOUNT VERNON PO BOX 110 MOUNT VERNON, VA 22121	NONE	PC	CULTRUAL	5,000
GLEANERS COMMUNITY FOOD BANK 2131 BEAUFAIT ST DETROIT, MI 48207	NONE	PC	COMMUNITY SERVICE	1,000
GOD'S PANTRY FOOD BANK 1685 JAGGIE FOX WAY LEXINGTON, KY 40511	NONE	PC	COMMUNITY SERVICE	1,000
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
GONZMART FAMILY FOUNDATION 2025 E 7TH AVE TAMPA, FL 33605	NONE	PC	COMMUNITY SERVICE	10,000
GREAT PLAINS FOOD BANK 1720 3RD AVE N FARGO, ND 58102	NONE	PC	COMMUNITY SERVICE	1,000
GREATER NEW ORLEANS FOUNDATION 919 ST CHARLES AVE NEW ORLEANS, LA 70130	NONE	PC	COMMUNITY SERVICE	15,000
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
GULF COAST COMMUNITY FOUNDATION 601 S TAMIAMI TRAIL VENICE, FL 34285	NONE	PC	COMMUNITY SERVICE	7,000
GUMMAKONDA REDDY FOUNDATION 1060 NW 3RD ST HALLANDALE, FL 33009	NONE	PC	COMMUNITY SERVICE	3,000
HABITAT FOR HUMANITY 332 WEST LAMAR STREET AMERICUS, GA 31709	NONE	PC	COMMUNITY SERVICE	1,000
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
HEALTHCARE FOR THE HOMELESS 421 FALLSWAY BALTIMORE, MD 21202	NONE	PC	COMMUNITY SERVICE	3,000
HEARTLAND HOPE MISSION2021 U ST OMAHA, NE 68107	NONE	PC	COMMUNITY SERVICE	2,000
HEROS SPORTS 4630 N LOOP 1604 W STE 305B SAN ANTONIO, TX 78249	NONE	PC	COMMUNITY SERVICE	1,250
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
HISPANIC SCHOLARSHIP FOUNDATION 1411 W 190TH ST GARDENA, CA 90248	NONE	PC	EDUCATIONAL	10,000
HISTIO CURE FOUNDATION 1600 RIVER OAKS BLVD HOUSTON, TX 77019	NONE	PC	MEDICAL RESEARCH	2,500
HOME OF THE INNOCENTS 1100 E MARKET ST LOUISVILLE, KY 40206	NONE	PC	COMMUNITY SERVICE	2,500
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
HOUSE OF RUTH 14383 NEWBROOK DRIVE STE 300 CHANTILLY, VA 20151	NONE	PC	COMMUNITY SERVICE	2,500
HUMANE SOCIETY FOR HAMILTON COUNTY 1721 PLEASANT ST NOBLESVILLE, IN 46060	NONE	PC	COMMUNITY SERVICE	500
HY-VEE SANFORD LEGENDS 2210 W PENTAGON PL SIOUX FALLS, SD 57107	NONE	PC	COMMUNITY SERVICE	2,500
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
INDIANAPOLIS UPLIFT FOUNDATION PO BOX 441458 INDIANAPOLIS, IN 46244	NONE	PC	COMMUNITY SERVICE	1,500
JDRF506 HALLE PARK DR COLLIERVILLE, TN 38017	NONE	PC	COMMUNITY SERVICE	1,000
JONATHANS PLACE 6065 DUCK CREEK DR GARLAND, TX 75043	NONE	PC	COMMUNITY SERVICE	2,500
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
KENTUCKY HARVEST 7705 NATIONAL TURNPIKE LOUISVILLE, KY 40214	NONE	PC	COMMUNITY SERVICE	500
KIDS MATTER INTERNATIONAL 535 S NOLAN DR 300 SOUTHLAKE, TX 76092	NONE	PC	COMMUNITY SERVICE	1,000
KIDS PEACE4085 INDEPENDENCE DR SCHNECKSVILLE, PA 18078	NONE	PC	COMMUNITY SERVICE	1,000
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
LAXER FAMILY FOUNDATION 1208 S HOWARD AVE TAMPA, FL 33606	NONE	PC	COMMUNITY SERVICE	7,000
LINK STRYJEWSKI FOUNDATION 930 TCHOUPITOULAS ST NEW ORLEANS, LA 70130	NONE	PC	COMMUNITY SERVICE	6,250
LOUISIANA RESTAURANT ASSOCIATION EDUCATION FOUNDATION 700 N ARNOULT ROAD METAIRIE, LA 70002	NONE	PC	COMMUNITY SERVICE	2,500
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
LOUISVILLE URBAN LEAGUE 1535 W BROADWAY LOUISVILLE, KY 40203	NONE	PC	COMMUNITY SERVICE	2,500
LOVE CITY INC344 N 26TH ST LOUISVILLE, KY 40212	NONE	PC	COMMUNITY SERVICE	1,000
LUTHERAN CHILD AND FAMILY SERVICES OF IN ONE OAKBROOK TERRACE STE 501 OAKBROOK TERRACE, IL 60181	NONE	PC	COMMUNITY SERVICE	500
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
MARINE CORPS LEAGUE #770 3619 JEFFERSON DAVIS HIGHWAY STAFFORD, VA 22554	NONE	PC	COMMUNITY SERVICE	1,000
MICHIGAN RESTAURANT & LODGING AC 225 W WASHTENAW ST LANSING, MI 48933	NONE	PC	COMMUNITY SERVICE	15,000
MUHAMMAD ALI CENTER 144 N 6TH STREET LOUISVILLE, KY 40202	NONE	PC	COMMUNITY SERVICE	10,000
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
NAACP LEGAL DEFENSE & EDUCATION FUND INC 40RECTOR STREET 5TH FLOOR NEW YORK, NY 10006	NONE	PC	COMMUNITY SERVICE	250,000
NAPA VALLEY COMMUNITY FOUNDATION 3299 CLAREMONT WAY STE 4 NAPA, CA 94558	NONE	PC	COMMUNITY SERVICE	25,000
NEW BRAUNFELS FOOD BANK 1620 S SEGUIN AVE NEW BRAUNFELS, TX 78130	NONE	PC	COMMUNITY SERVICE	3,000
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
NON COMMISSIONED OFFICERS ASSOCIATION 9330 CORPORATE DRIVE SELMA, TX 78154	NONE	PC	COMMUNITY SERVICE	500
OKLAHOMA CITY POLICE ATHLETIC LEAGUE 1925 DOWNING STREET OKLAHOMA CITY, OK 73120	NONE	PC	COMMUNITY SERVICE	3,500
OKLAHOMA FOOD BANK 3355 S PURDUE AVE OKLAHOMA CITY, OK 73179	NONE	PC	COMMUNITY SERVICE	2,000
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
OLD NEWS BOYS OF FLINT 6255 TAYLOR DR FLINT, MI 48507	NONE	PC	COMMUNITY SERVICE	500
OMAHA POLICE OFFICERS ASSOCIATION 13445 CRYER AVE OMAHA, NE 68144	NONE	PC	COMMUNITY SERVICE	1,500
PALM BEACH INDIA ASSOCIATION PO BOX 31225 PALM BEACH GARDENS, FL 33420	NONE	PC	COMMUNITY SERVICE	3,000
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
RDNC RELIEF FUND ONE NATIONAL DRIVE ATLANTA, GA 30336	AFFILIATE	PC	COMMUNITY SERVICE	100,000
REACH UNLIMITED INC12777 JONES RD HOUSTON, TX 77070	NONE	PC	COMMUNITY SERVICE	2,500
RETT SYNDROME RESEARCH TRUST 67 UNDER CLIFF ROAD TRUMBULL, CT 06611	NONE	PC	MEDICAL	5,000
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
SEAL LEGACY FOUNDATION 2110-B BOCA RATON STE B-102 AUSTIN, TX 78747	NONE	PC	COMMUNITY SERVICE	5,000
SONOMA COUNTY RESILIENCE FUND 120 STONY POINT RD STE 220 SANTA ROSA, CA 65401	NONE	PC	COMMUNITY SERVICE	25,000
SOS CHILDREN'S VILLAGES 3681 NW 59TH PLACE COCNUT CREEK, FL 33073	NONE	PC	COMMUNITY SERVICE	5,000
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
SOUTHEASTERN GROCERS GIVES FOUNDATION 8928 PROMINENCE KWY 200 JACKSONVILLE, FL 32256	NONE	PC	COMMUNITY SERVICE	9,200
TEXAS RESTAURANT ASSOC & EDUCATION FDN 512 E RIVERSIDE DR UNIT 250 AUSTIN, TX 78704	NONE	PC	COMMUNITY SERVICE	21,500
THE BANQUET900 E 8TH ST SIOUX FALLS, SD 57103	NONE	PC	COMMUNITY SERVICE	2,500
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
THE CHRISTMAS GIFTPO BOX 11456 FARGO, ND 58106	NONE	PC	COMMUNITY SERVICE	1,000
THE EPILEPSY FOUNDATION CENTRAL & SOUTH TEXAS 8601 VILLAGE DR STE 220 SAN ANTONIO, TX 78217	NONE	PC	MEDICAL	1,500
THE HEALING HOUSE707 LEE ST LAFAYETTE, LA 70506	NONE	PC	COMMUNITY SERVICE	3,000
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
THE TEXAS WINE SCHOOL FOUNDATION 2301 PORTSMOUTH ST HOUSTON, TX 77098	NONE	PC	COMMUNITY SERVICE	2,500
THEODORE ROOSEVELT MEDORA FOUNDATION PO BOX 1696 BISMARCK, ND 58502	NONE	PC	COMMUNITY SERVICE	1,000
TOUR DE KOMEN INC 7400 STAMFORD CT FISHERS, IN 46038	NONE	PC	COMMUNITY SERVICE	5,000
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
TOYS FOR TOTSPO BOX 303 LAKELAND, FL 33802	NONE	PC	COMMUNITY SERVICE	8,000
TOYS FOR TOTSPO BOX 19524 LOUISVILLE, KY 40259	NONE	PC	COMMUNITY SERVICE	1,000
TRACY'S SANCTUARY HOUSE 908 N 8TH ST BISMARK, ND 58501	NONE	PC	COMMUNITY SERVICE	1,000
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
UCP OF CENTRAL FLORIDA 3305 S ORANGE AVE ORLANDO, FL 32806	NONE	PC	MEDICAL	38,000
UJA-FEDERATION OF NEW YORK 130 E 59TH STREET NEW YORK, NY 10022	NONE	PC	RELIGIOUS	20,000
UNITED WAY OF SAN ANTONIO 700 S ALAMO ST SAN ANTONIO, TX 78205	NONE	PC	COMMUNITY SERVICE	7,000
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
UNITED WAY WORLDWIDE 701 N FAIRFAX ST ALEXANDRIA, VA 22314	NONE	PC	COMMUNITY SERVICE	100,000
UNIVERSAL ORLANDO FOUNDATION 9907 UNIVERSAL BLVD ORLANDO, FL 32819	NONE	PC	COMMUNITY SERVICE	15,000
UNIVERSITY OF LOUISIANA - LAFAYETTE FOUNDATION 705 E ST MARY BLVD LAFAYETTE, LA 70503	NONE	PC	COMMUNITY SERVICE	1,000
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
USBG NATIONAL CHARITY FOUNDATION 2654 W HORIZON RIDGE PKWY STE B5 PMB 252 HENDERSON, NV 89052	NONE	PC	COMMUNITY SERVICE	500,000
VIRGINIA CENTER FOR INCLUSIVE COMMUNITIES 5511 STAPLES MILL RD 202 RICHMOND, VA 23228	NONE	PC	COMMUNITY SERVICE	3,000
VIRGINIA PENINSULA FOODBANK 2401 ALUMINUM AVE HAMPTON, VA 23661	NONE	PC	COMMUNITY SERVICE	2,500
Total . . . . . ▶ **3a**				1,800,150

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
WOUNDED WARRIOR PROJECTS 4899 BELFORT ROAD STE 300 JACKSONVILLE, FL 32256	NONE	PC	COMMUNITY SERVICE	1,500
YWCA CASS CLAY 3000 S UNIVERSITY DR FARGO, ND 58103	NONE	PC	COMMUNITY SERVICE	1,000
Total . . . . . ▶ **3a**				1,800,150

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491305008881

TY 2020 Other Expenses Schedule

Name: REPUBLIC NATIONAL DISTRIBUTING COMPANY FOUNDATION INC

EIN: 45-3842838

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK CHARGES	1,054	1,054		0

TY 2020 Substantial Contributors Schedule

Name: REPUBLIC NATIONAL DISTRIBUTING COMPANY FOUNDATION INC

EIN: 45-3842838

Name	Address
REPUBLIC NATIONAL DISTRIBUTING CO	ONE NATIONAL DRIVE ATLANTA, GA 30336

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491305008881

Schedule B (Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Name of the organization
REPUBLIC NATIONAL DISTRIBUTING COMPANY FOUNDATION INC

Employer identification number
45-3842838

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☑ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

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

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year . . . . . ▶ $ _____

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

Name of organization	Employer identification number
REPUBLIC NATIONAL DISTRIBUTING COMPANY FOUNDATION INC	45-3842838

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

Contributors

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	REPUBLIC NATIONAL DISTRIBUTING CO LLC ONE NATIONAL DRIVE ATLANTA, GA 30336	$ 1,900,000	☑ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)

Name of organization
REPUBLIC NATIONAL DISTRIBUTING COMPANY
FOUNDATION INC

Employer identification number
45-3842838

Part II **Noncash Property**

(see instructions). Use duplicate copies of Part II if additional space is needed.

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

Name of organization	Employer identification number
REPUBLIC NATIONAL DISTRIBUTING COMPANY FOUNDATION INC	45-3842838

Part III *Exclusively* **religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of** *exclusively* **religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this information once. See instructions.) ▶ $ ________**

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee