

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

Name of foundation BI-LO HOLDINGS FOUNDATION INC		A Employer identification number 59-0995428	
Number and street (or P.O. box number if mail is not delivered to street address) 8928 PROMINENCE PARKWAY NO 200		Room/suite	B Telephone number (see instructions) (904) 783-5000
City or town, state or province, country, and ZIP or foreign postal code JACKSONVILLE, FL 32256		C If exemption application is pending, check here ▶ ☐	
G Check all that apply: ☐ Initial return ☐ Final return ☐ Address change ☐ Initial return of a former public charity ☐ Amended return ☐ 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) ▶ \$ 2,634,991		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐	
J Accounting method: ☐ Cash ☒ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	1,722,937			
	2 Check ☐ if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less: Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	899,481	0		
	12 Total. Add lines 1 through 11	2,622,418	0		
	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)	1,800	900		900
	c Other professional fees (attach schedule)	51,123	2,073		0
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	120	0		0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	1,473,887	0		386,561
	24 Total operating and administrative expenses. Add lines 13 through 23	1,526,930	2,973		387,461
	25 Contributions, gifts, grants paid	1,318,883			1,318,883
	26 Total expenses and disbursements. Add lines 24 and 25	2,845,813	2,973		1,706,344
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	-223,395			
	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	2,895,990	2,221,886	2,221,886
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶ <u>412,600</u>			
	Less: allowance for doubtful accounts ▶ _____	171,100	412,600	412,600
	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	623	503	503
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)	2	2	2
	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)	3,067,715	2,634,991	2,634,991	
Liabilities	17 Accounts payable and accrued expenses	43,529		
	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)	43,529	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	3,024,186	2,634,991	
	29 Total net assets or fund balances (see instructions)	3,024,186	2,634,991	
30 Total liabilities and net assets/fund balances (see instructions) .	3,067,715	2,634,991		

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	3,024,186
2 Enter amount from Part I, line 27a	2	-223,395
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	2,800,791
5 Decreases not included in line 2 (itemize) ▶ _____	5	165,800
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29	6	2,634,991

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) $\left\{ \begin{array}{l} \text{If gain, also enter in Part I, line 7} \\ \text{If (loss), enter -0- in Part I, line 7} \end{array} \right\}$	2	
	3	
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		

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	503
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	503
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	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid .	10	503
11	Enter the amount of line 10 to be: Credited to 2021 estimated tax 503 Refunded	11	0

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). <i>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.</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ► \$ 0 (2) On foundation managers. ► \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>	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? <i>If "Yes," attach a conformed copy of the changes</i>	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? <i>If "Yes," attach the statement required by General Instruction T.</i>	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? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ► FL		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation.</i>	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. <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	10	No

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? Website address ▶ <u>N/A</u>	13	Yes	
14	The books are in care of ▶ <u>THE ORGANIZATION</u> Telephone no. ▶ <u>(904) 783-5000</u>			

Located at ▶ 8928 PROMINENCE PARKWAY STE 200 JACKSONVILLE FLZIP+4 ▶ 32256

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	Yes	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

		Yes	No
1a	During the year did the foundation (either directly or indirectly):		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) ☐ Yes ☒ No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions ☐ Organizations relying on a current notice regarding disaster assistance check here. ▶ ☐	1b	
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
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? If "Yes," attach the statement required by Regulations section 53.4945–5(d).	☐ Yes ☐ No	
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? If "Yes" to 6b, file Form 8870.		6b No
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
ELIZABETH THOMPSON 8928 PROMINENCE PARKWAY SUITE 200 JACKSONVILLE, FL 32256	PRESIDENT 1.00	0	0	0
M SANDLIN GRIMM 8928 PROMINENCE PARKWAY SUITE 200 JACKSONVILLE, FL 32256	V.P. & SECRETARY 1.00	0	0	0
KENNETH JONES 8928 PROMINENCE PARKWAY SUITE 200 JACKSONVILLE, FL 32256	TREASURER 1.00	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	3,096,071
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	3,096,071
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	3,096,071
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	46,441
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,049,630
6	Minimum investment return. Enter 5% of line 5.	6	152,482

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	152,482
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	152,482
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	152,482
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	152,482

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	1,706,344
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	1,706,344
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	1,706,344

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				152,482
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.	2,039,678			
b From 2016.	281,028			
c From 2017.	791,119			
d From 2018.	400,188			
e From 2019.	440,658			
f Total of lines 3a through e.	3,952,671			
4 Qualifying distributions for 2020 from Part XII, line 4: ► \$ _____ 1,706,344				
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.				152,482
e Remaining amount distributed out of corpus	1,553,862			
5 Excess distributions carryover applied to 2020. (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	5,506,533			
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).	2,039,678			
9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a.	3,466,855			
10 Analysis of line 9:				
a Excess from 2016.	281,028			
b Excess from 2017.	791,119			
c Excess from 2018.	400,188			
d Excess from 2019.	440,658			
e Excess from 2020.	1,553,862			

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. ☐ 4942(j)(3) or ☐ 4942(j)(5)

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					

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

Part XV

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 e-mail address of the person to whom applications should be addressed:

AMY PIERCE
8928 PROMINENCE PARKWAY 200
JACKSONVILLE, FL 32256
(904) 783-5000

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

THERE ARE FORMAL GUIDELINES AND AN APPLICATION PROCESS FOR GRANTS. THE ORIGINAL AND PAPER CLIPPED COPIES OF THE FOLLOWING MUST BE SUBMITTED: 1.) GRANT APPLICATION 2.) BOARD LIST 3.) GRANT PROPOSAL NARRATIVE 4.) IF ANOTHER PROGRAM, A PROGRESS REPORT MUST BE SUBMITTED AS PART OF THEIR NEW GRANT PROPOSAL 5.) ONE COPY OF THE IRS 501(C)(3) LETTER DETERMINING TAX-EXEMPT STATUS. THE APPLICATION FOR GRANT FUNDING AND THE INSTRUCTIONS FOR THE GRANT PROPOSAL NARRATIVE ARE ATTACHED.

c Any submission deadlines:

REQUESTS FOR GIFTS ARE ACCEPTED THROUGHT THE YEAR

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

THE FOUNDATION'S OBJECTIVE IS TO CONDUCT, OPERATE AND CARRY ON ACTIVITIES TO BENEFIT ONLY PEOPLE IN THE STATES OF ALABAMA, FLORIDA, GEORGIA, LOUISIANA AND MISSISSIPPI. THE FOUNDATION MAKES GRANTS TO ONLY LOCAL NON-PROFIT 501(C)(3) ORGANIZATIONS IN THOSE AREAS WHICH FOCUS ON HUNGER, WOMEN AND CHILDREN, HEALTH AND EDUCATION INITIATIVES. THE FOUNDATION MAY PUT RESOURCES INTO PROJECTS OF ITS OWN CREATION. IN MAKING GRANT DECISIONS, THE FOUNDATION SEEKS TO SUPPORT INITIATIVES THAT FOSTER SIGNIFICANT VALUE WHICH LASTS BEYOND THE FUNDING PERIOD. THE FOUNDATION WILL NOT CONSIDER REQUESTS FOR MULTI-YEAR COMMITMENTS, CAPITAL CAMPAIGNS OR GENERAL OPERATING SUPPORT.

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	1,318,883
b <i>Approved for future payment</i>				
Total			3b	0

Enter gross amounts unless otherwise indicated.

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

Form **990-PF** (2020)

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

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?			Yes	No
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.				

[illegible]

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.		
	*****	2021-10-29	*****
	_____ 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
	AMY BIBBY		2021-10-29		P00445891
	Firm's name ▶ DIXON HUGHES GOODMAN LLP				Firm's EIN ▶ 56-0747981
	Firm's address ▶ 500 RIDGEFIELD COURT ASHEVILLE, NC 28806				Phone no. (828) 254-2254

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AMERICAN HEART ASSOCIATION 110 VETERANS MEMORIAL BLVD METAIRIE, LA 70005	NONE	501(C)(3)	OPERATIONAL SUPPORT	10,000
AMERICAN LEGION CLINE-PAUTSCH-KOTT 571 W OCEAN AVE BOYNTON BEACH, FL 33426	NONE	501(C)(3)	OPERATIONAL SUPPORT	5,000
AMERICAN LEGION MANDARIN POST 372 4280 OLDFIELD CROSSING DR JACKSONVILLE, FL 32223	NONE	501(C)(3)	OPERATIONAL SUPPORT	5,000
Total ▶ 3a				1,318,883

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FOLDS OF HONOR FOLDS OF HONOR DEPARTMENT 13 TULSA, OK 74182	NONE	501(C)(3)	OPERATIONAL SUPPORT	281,483
GRACE MEDICAL HOME 1417 E CONCORD STREET ORLANDO, FL 32806	NONE	501(C)(3)	OPERATIONAL SUPPORT	13,000
GUARDIAN CATHOLIC SCHOOLS 4920 BRENTWOOD AVE JACKSONVILLE, FL 32206	NONE	501(C)(3)	OPERATIONAL SUPPORT	17,500
Total ▶ 3a				1,318,883

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HISTORIC EASTSIDE COMMUNITY DEVELOPMENT CORP 925 SPEARING ST JACKSONVILLE, FL 32206	NONE	501(C)(3)	OPERATIONAL SUPPORT	8,500
LAKEWOOD RANCH VETERANS 6915 DEL WEBB BOULEVARD LAKEWOOD RANCH, FL 34202	NONE	501(C)(3)	OPERATIONAL SUPPORT	2,000
LOUSIANA CENTER FOR HEALTH EQUITY 4611 BLUEBONNET BLVD BATON ROUGE, LA 70809	NONE	501(C)(3)	OPERATIONAL SUPPORT	13,000
Total ▶ 3a				1,318,883

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MALIVAI WASHINGTON KIDS FOUNDATION 1055 W 6TH ST JACKSONVILLE, FL 32209	NONE	501(C)(3)	OPERATIONAL SUPPORT	10,000
SANCTUARY OF NORTHEAST FLORIDA INC PO BOX 3301 JACKSONVILLE, FL 32206	NONE	501(C)(3)	OPERATIONAL SUPPORT	8,000
SOCIETY OF ST ANDREW PO BOX 536842 ORLANDO, FL 32853	NONE	501(C)(3)	OPERATIONAL SUPPORT	10,000
Total ▶ 3a				1,318,883

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TEACH FOR AMERICA JACKSONVILLE 214 N HOGAN ST SUITE 6010 JACKSONVILLE, FL 32202	NONE	501(C)(3)	OPERATIONAL SUPPORT	10,000
UF FOUNDATION INC 1938 W UNIVERSITY AVE GAINESVILLE, FL 32603	NONE	501(C)(3)	OPERATIONAL SUPPORT	5,000
USO JACKSONVILLE 2560 MAYPORT ROAD ATLANTIC BEACH, FL 32233	NONE	501(C)(3)	OPERATIONAL SUPPORT	25,000
Total ▶ 3a				1,318,883

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FEEDING NORTHEAST FLORIA 1116 EDGEWOOD AVENUE NORTH D/E JACKSONVILLE, FL 32254		501(C)(3)	OPERATIONAL SUPPORT	4,000
FEEDING AMERICA 161 N CLARK ST SUITE 700 CHICAGO, IL 60601		501(C)(3)	OPERATIONAL SUPPORT	400,000
SECOND HARVEST FOOD BANK 700 EDWARDS AVE NEW ORLEANS, LA 70123		501(C)(3)	OPERATIONAL SUPPORT	15,000
Total ▶ 3a				1,318,883

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FEEDING VALLEY6744 FLAT ROCK RD MIDLAND, GA 31820		501(C)(3)	OPERATIONAL SUPPORT	15,000
FEEDING GULF COAST 5248 MOBILE S ST THEODORE, AL 36582		501(C)(3)	OPERATIONAL SUPPORT	15,000
FEEDING AMERICA TAMPA BAY 4702 TRANSPORT DRIVE BUILDING 6 TAMPA, FL 33605		501(C)(3)	OPERATIONAL SUPPORT	15,000
Total ▶ 3a				1,318,883

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
REGIONAL FOOD BANK OF NE FL 1116 EDGEWOOD AVE N JACKSONVILLE, FL 32254		501(C)(3)	OPERATIONAL SUPPORT	15,000
FEEDING SOUTH FLOIRDA 2501 SW 32ND TERRACE PEMBROKE PARK, FL 33023		501(C)(3)	OPERATIONAL SUPPORT	15,000
FEED THE BOROP BOX 2736 STATESBORO, GA 30459		501(C)(3)	OPERATIONAL SUPPORT	6,500
Total ▶ 3a				1,318,883

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GRACE FOOD PANTRY 245 EDUCATION WAY BUNNELL, FL 32110		501(C)(3)	OPERATIONAL SUPPORT	5,000
ST AUGUSTINE DISTILLERS 112 RIBERIA ST ST AUGUSTINE, FL 32084		501(C)(3)	OPERATIONAL SUPPORT	24,900
AMERICAN RED CROSS 751 RIVERSIDE AVE JACKSONVILLE, FL 32204		501(C)(3)	OPERATIONAL SUPPORT	365,000
Total ▶ 3a				1,318,883

TY 2020 Accounting Fees Schedule**Name:** BI-LO HOLDINGS FOUNDATION INC**EIN:** 59-0995428

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	1,800	900		900

TY 2020 Investments Corporate Bonds Schedule

Name: BI-LO HOLDINGS FOUNDATION INC

EIN: 59-0995428

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
MADISON CO. TOBACCO WAREHOUSE	2	2

TY 2020 Other Decreases Schedule

Name: BI-LO HOLDINGS FOUNDATION INC
EIN: 59-0995428

Description	Amount
UNCOLLECTIBLE PLEDGE	165,800

TY 2020 Other Expenses Schedule**Name:** BI-LO HOLDINGS FOUNDATION INC**EIN:** 59-0995428**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
VENDOR SUMMIT - PRINTED MATERIALS	100,258	0		0
VENDOR SUMMIT - PROFESSIONAL FEES	175,306	0		0
VENDOR SUMMIT - OTHER	803,900	0		0
TECHNOLOGY RENTAL FEES	7,863	0		0
HUNGER RELIEF	372,374	0		372,374
DISASTER RELIEF	14,186	0		14,187

TY 2020 Other Income Schedule

Name: BI-LO HOLDINGS FOUNDATION INC

EIN: 59-0995428

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS	899,481		899,481

TY 2020 Other Professional Fees Schedule**Name:** BI-LO HOLDINGS FOUNDATION INC**EIN:** 59-0995428

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEES	2,073	2,073		0
MISCELLANEOUS	32,312	0		0
SERVICE CHARGES	16,738	0		0

TY 2020 Taxes Schedule

Name: BI-LO HOLDINGS FOUNDATION INC
EIN: 59-0995428

Taxes Schedule

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX EXPENSE	120	0		0

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 <u>www.irs.gov/Form990</u> for the latest information.	OMB No. 1545-0047
		2020
Name of the organization BI-LO HOLDINGS FOUNDATION INC		Employer identification number 59-0995428

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 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. 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
BI-LO HOLDINGS FOUNDATION INC

Employer identification number

59-0995428

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	See Additional Data Table	\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
—		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)

Name of organization BI-LO HOLDINGS FOUNDATION INC	Employer identification number 59-0995428
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given (see instructions). Use duplicate copies of Part II if additional space is needed.	(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
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	

Name of organization BI-LO HOLDINGS FOUNDATION INC	Employer identification number 59-0995428
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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

Additional Data

Software ID:
Software Version:
EIN: 59-0995428
Name: BI-LO HOLDINGS FOUNDATION INC

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	ADT	\$ 10,000	Person ☒
	1 TOWN CENTER RD		Payroll ☐
	BOCA RATON, FL 33486		Noncash ☐ (Complete Part II for noncash contribution.)
<u>2</u>	ADVANTAGE SOLUTIONS	\$ 36,700	Person ☒
	7411 FULLERTON STREET SUITE 200		Payroll ☐
	JACKSONVILLE, FL 32256		Noncash ☐ (Complete Part II for noncash contribution.)
<u>3</u>	AHERN AND ASSOCIATES PC	\$ 10,000	Person ☒
	8 SOUTH MICHIGAN AVENUE SUITE 3600		Payroll ☐
	CHICAGO, IL 60603		Noncash ☐ (Complete Part II for noncash contribution.)
<u>4</u>	ANHEUSER-BUSCH	\$ 60,000	Person ☒
	6465 EAST JOHNS CROSSING		Payroll ☐
	JOHNS CREEK, GA 30067		Noncash ☐ (Complete Part II for noncash contribution.)
<u>5</u>	AONSEGWICK	\$ 20,000	Person ☒
	13901 SUTTON PARK DR S		Payroll ☐
	JACKSONVILLE, FL 32224		Noncash ☐ (Complete Part II for noncash contribution.)
<u>6</u>	BREAKTHRU BEVERAGE	\$ 40,000	Person ☒
	2001 NORTH ELLIS ROAD		Payroll ☐
	JACKSONVILLE, FL 32254		Noncash ☐ (Complete Part II for noncash contribution.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>7</u>	BRILL	\$ 10,000	Person ☒
	5775 GLENRIDGE DR BUILDING A		Payroll ☐
	SANDY SPRINGS, GA 30328		Noncash ☐ (Complete Part II for noncash contribution.)
<u>8</u>	BURKE GILLIS JULIANO GROUP	\$ 20,000	Person ☒
	2377 LINWOOD AVE 211		Payroll ☐
	NAPLES, FL 34112		Noncash ☐ (Complete Part II for noncash contribution.)
<u>9</u>	BURR & FORMAN	\$ 10,000	Person ☒
	200 SOUTH ORANGE AVENUE STE 800		Payroll ☐
	ORLANDO, FL 32801		Noncash ☐ (Complete Part II for noncash contribution.)
<u>10</u>	BUTTERBALL LLC	\$ 10,000	Person ☒
	2382 WEST CLOVELLY LANE		Payroll ☐
	ST AUGUSTINE, FL 32092		Noncash ☐ (Complete Part II for noncash contribution.)
<u>11</u>	C&S WHOLESALE GROCERS	\$ 150,000	Person ☒
	7 CORPORATE DRIVE		Payroll ☐
	KEENE, NH 03431		Noncash ☐ (Complete Part II for noncash contribution.)
<u>12</u>	CAMPBELL'S	\$ 10,000	Person ☒
	6270 WINDJAMMER POINT		Payroll ☐
	CUMMING, GA 30041		Noncash ☐ (Complete Part II for noncash contribution.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	CAPTURERX	\$ 6,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	219 E HOUSTON ST		
	SAN ANTONIO, TX 78205		
14	CATELLI BROTHERS INC	\$ 7,500	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	PO BOX 8877		
	COLLINGSWOOD, NJ 08108		
15	CHARLOTTE'S WEB	\$ 5,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	2425 55TH STREETSUITE 200		
	BOULDER, CO 80301		
16	CITY FACILITIES MANAGEMENT	\$ 27,500	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	8211 CYPRESS PLAZA DRIVE		
	JACKSONVILLE, FL 32256		
17	CITY FACILITIES MANAGEMENT	\$ 7,500	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	8211 CYPRESS PLAZA DRIVE		
	JACKSONVILLE, FL 32256		
18	COCA-COLA	\$ 75,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	601 1ST STREET SOUTH UNIT 5G		
	JACKSONVILLE BEACH, FL 32250		

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	COLORADO BOXED BEEF COMPANY	\$ 5,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	708 THIRD AVE 28TH FLOOR		
	NEW YORK, NY 100170000		
20	CONSTELLATION BRANDS	\$ 20,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	2212 VENETIAN WAY		
	WINTER PARK, FL 32789		
21	DAYMON	\$ 12,300	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	333 LUDLOW STREET 5TH FLOOR		
	STAMFORD, CT 06902		
22	DELOITTE	\$ 5,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	50 N LAURA ST 3400		
	JACKSONVILLE, FL 32202		
23	DIAGEO	\$ 10,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	249 ORANGE AVE		
	JACKSONVILLE, FL 32259		
24	DOLE FRESH VEGETABLES	\$ 9,200	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	200 S TRYON		
	CHARLOTTE, NC 28105		

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	EMPLOYER DIRECT HEALTHCARE LLC	\$ 5,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	2100 ROSS AVE 550		
	DALLAS, TX 75201		
26	EURO PASTRY	\$ 25,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	2001 ORVILLE DRIVE		
	RONKONKOMA, NY 11779		
27	FIELDDALE FARMS	\$ 25,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	558 BROILER BLVD		
	BALDWIN, GA 30511		
28	FLAVOR 1ST GROWERS AND PACKERS	\$ 5,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	331 BANNER FARM RD		
	MILLS RIVER, NC 28759		
29	FLOWERS FOODS	\$ 9,200	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	2261 WEST 30TH STREET		
	JACKSONVILLE, FL 32209		
30	FLOWERS FOODS	\$ 5,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	2261 WEST 30TH STREET		
	JACKSONVILLE, FL 32209		

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>31</u>	FRESH FOOD GROUPCOUNTRY FRESH	\$ 20,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	3200 RESEARCH FOREST DRIVE SUITE A5		
	THE WOODLANDS, TX 77381		
<u>32</u>	GENERAL MILLS	\$ 10,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	3605 W SOUTHERN HILLS BLVD		
	ROGERS, AR 72758		
<u>33</u>	GENUINE GEORGIA GROUP LLC	\$ 9,200	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	302 W CHURCH STREET		
	FORT VALLEY, GA 31030		
<u>34</u>	GEORGIA PACIFIC	\$ 5,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	133 PEACHTREE STREET NE		
	ATLANTA, GA 30303		
<u>35</u>	GLOBALWORX	\$ 30,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	2812 EMERYWOOD PKY SUTIE 120		
	RICHMOND, VA 23103		
<u>36</u>	GOJO INDUSTRIES	\$ 6,600	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	1 GOJO PLAZA SUITE 500		
	AKRON, OH 44311		

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>37</u>	GREAT LAKES CHEESE	\$ 16,500	Person ☒
	17825 GREAT LAKES PKWY		Payroll ☐
	HIRAM, OH 44234		Noncash ☐ (Complete Part II for noncash contribution.)
<u>38</u>	HALLMARK CARDS INC	\$ 5,000	Person ☒
	2501 MCGEE STREET MD840		Payroll ☐
	KANSAS CITY, MO 64141		Noncash ☐ (Complete Part II for noncash contribution.)
<u>39</u>	HORMEL DELI SOLUTIONS	\$ 9,200	Person ☒
	1 HORMEL PLACE		Payroll ☐
	AUSTIN, TX 55912		Noncash ☐ (Complete Part II for noncash contribution.)
<u>40</u>	HORMEL FOODS CORPORATION	\$ 10,000	Person ☒
	1 HORMEL PLACE		Payroll ☐
	AUSTIN, TX 55912		Noncash ☐ (Complete Part II for noncash contribution.)
<u>41</u>	INTEGRATED LIGHTING SOLUTIONS LLC	\$ 5,000	Person ☒
	8955 GUILFORD RD 120		Payroll ☐
	COLUMBIA, MD 21046		Noncash ☐ (Complete Part II for noncash contribution.)
<u>42</u>	IST MANAGEMENT	\$ 5,000	Person ☒
	934 GLENWOOD AVE SE		Payroll ☐
	ATLANTA, GA 30316		Noncash ☐ (Complete Part II for noncash contribution.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>43</u>	JBS US	\$ 5,000	Person ☒
	1770 PROMONTORY CIRCLE		Payroll ☐
	GREELEY, CO 80634		Noncash ☐ (Complete Part II for noncash contribution.)
<u>44</u>	JBS USA FOOD COMPANY	\$ 10,000	Person ☒
	1207 25TH ST PL SE		Payroll ☐
	HICKORY, NC 28602		Noncash ☐ (Complete Part II for noncash contribution.)
<u>45</u>	KESSLER CREATIVE	\$ 14,000	Person ☒
	12276 SAN JOSE BLVD STE 115		Payroll ☐
	JACKSONVILLE, FL 32223		Noncash ☐ (Complete Part II for noncash contribution.)
<u>46</u>	KEURIG DR PEPPER	\$ 16,000	Person ☒
	6045 BOWDENDALE AVE		Payroll ☐
	JACKSONVILLE, FL 322166041		Noncash ☐ (Complete Part II for noncash contribution.)
<u>47</u>	KIMBERLY-CLARK	\$ 10,000	Person ☒
	PO BOX 2020		Payroll ☐
	NEENAH, WI 54957		Noncash ☐ (Complete Part II for noncash contribution.)
<u>48</u>	L&M	\$ 9,200	Person ☒
	131 WEST CRACKER SWAMP ROAD		Payroll ☐
	EAST PALATKA, FL 32131		Noncash ☐ (Complete Part II for noncash contribution.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
49	LAND O'FROST	\$ 10,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	16850 CHICAGO AVE		
	LANSING, IL 60438		
50	LASER CONNECTION	\$ 5,500	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	725 STEVENS AVE		
	OLDSMAR, FL 34677		
51	LIPMAN- CUSTOM PAK INC	\$ 5,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	PO BOX 3088		
	IMMOKALEE, FL 34142		
52	MOLSONCOORS	\$ 60,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	1910 W NORTH A STREET 7		
	TAMPA, FL 33606		
53	MONDELEZ	\$ 8,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	1651 COMMON WAY RD		
	ORLANDO, FL 32814		
54	NATIONAL BEEF PACKING	\$ 25,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	PO BOX 20046		
	KANSAS CITY, MO 64195		

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>55</u>	NESTLE PURINA PETCARE COMPANY	\$ 9,200	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	221 EAST POINT DRIVE		
	SAVANNAH, GA 31410		
<u>56</u>	NEWS AMERICA	\$ 12,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	185 AVENUE OF THE AMERICAS		
	NEW YORK, NY 10036		
<u>57</u>	NIAGARA BOTTLING	\$ 125,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	1440 BRIDGEGATE DR		
	DIAMOND BAR, CA 91765		
<u>58</u>	NOVOLEX	\$ 30,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	101 E CAROLINA AVE		
	HARTSVILLE, SC 29550		
<u>59</u>	OPTERUS	\$ 5,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	815 14TH ST SW BUILDING C UNIT 200		
	LOVELAND, CO 80537		
<u>60</u>	PEPSI	\$ 85,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	159 WORTHINGTON PARKWAY		
	ST JOHNS, FL 32259		

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
61	PERRY'S ICE CREAM	\$ 5,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	1 ICE CREAM PLAZA		
	AKRON, NY 14001		
62	PIPING ROCK HEALTH PRODUCTS	\$ 30,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	2120 SMITHTOWN AVE		
	RONKONKOMA, NY 11779		
63	POLAR BEVERAGE	\$ 30,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	1001 SOUTHBRIDGE ST		
	WORCESTER, MA 01610		
64	PROTECT PLUS AIR (CTM)	\$ 10,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	420 3RD AVE NW 2		
	HICKORY, NC 28601		
65	QUAD GRAPHICS	\$ 9,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	100 DUPLAINVILLE ROAD		
	THE ROCK, GA 30285		
66	RITEWAY	\$ 20,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contribution.)
	6817 SOUTHPPOINT PKWY SUITE 1201		
	JACKSONVILLE, FL 32216		

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>67</u>	RNDC	\$ 9,200	Person ☒
	PO BOX 3389		Payroll ☐
	WEST COLUMBIA, SC 291710000		Noncash ☐ (Complete Part II for noncash contribution.)
<u>68</u>	RYAN INC	\$ 7,500	Person ☒
	13155 NOEL ROAD SUITE 100		Payroll ☐
	DALLAS, TX 75240		Noncash ☐ (Complete Part II for noncash contribution.)
<u>69</u>	SAGE FRUIT	\$ 10,000	Person ☒
	15733 MOHAWK STREET		Payroll ☐
	OVERLAND PARK, KS 66224		Noncash ☐ (Complete Part II for noncash contribution.)
<u>70</u>	SHIPT	\$ 5,000	Person ☒
	17 20TH STREET NORTH SUITE 100		Payroll ☐
	BIRMINGHAM, AL 35203		Noncash ☐ (Complete Part II for noncash contribution.)
<u>71</u>	SHUTTS & BOWEN LLP	\$ 18,600	Person ☒
	1022 PARK STREET		Payroll ☐
	JACKSONVILLE, FL 32204		Noncash ☐ (Complete Part II for noncash contribution.)
<u>72</u>	SMITHFIELD	\$ 10,000	Person ☒
	4225 NAPERVILLE ROAD SUITE 600		Payroll ☐
	LISLE, IL 60532		Noncash ☐ (Complete Part II for noncash contribution.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
73	SOUTHERN GLAZERS WINE & SPIRITS	\$ 35,000	Person ☒
	6867 STUART LANE S		Payroll ☐
	LAKELAND, FL 32254		Noncash ☐ (Complete Part II for noncash contribution.)
74	ST JOHN & PARTNERS	\$ 15,000	Person ☒
	1301 RIVERPLACE BLVD 2ND FLOOR		Payroll ☐
	JACKSONVILLE, FL 32207		Noncash ☐ (Complete Part II for noncash contribution.)
75	SYMPHONY RETAILAI	\$ 10,000	Person ☒
	16475 DALLAS PKWY		Payroll ☐
	DALLAS, TX 75001		Noncash ☐ (Complete Part II for noncash contribution.)
76	THE WINE GROUP	\$ 6,000	Person ☒
	4596 TESLA ROAD		Payroll ☐
	LIVERMORE, CA 94550		Noncash ☐ (Complete Part II for noncash contribution.)
77	TITO'S HANDMADE VODKA	\$ 9,200	Person ☒
	12101 MOORE ROAD		Payroll ☐
	AUSTIN, TX 78719		Noncash ☐ (Complete Part II for noncash contribution.)
78	TREEHOUSE FOODS	\$ 10,000	Person ☒
	2021 SPRING ROAD - SUITE 600		Payroll ☐
	OAK BROOK, IL 60523		Noncash ☐ (Complete Part II for noncash contribution.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>79</u>	TYSON	\$ 125,000	Person ☒
	5441 W 5TH ST		Payroll ☐
	JACKSONVILLE, FL 32254		Noncash ☐ (Complete Part II for noncash contribution.)
<u>80</u>	UNFI	\$ 10,000	Person ☒
	1 ALBION ROAD STE 101		Payroll ☐
	LINCOLN, RI 02865		Noncash ☐ (Complete Part II for noncash contribution.)
<u>81</u>	UNILEVER	\$ 34,200	Person ☒
	7411 FULLERTON STREET SUITE 200		Payroll ☐
	JACKSONVILLE, FL 32256		Noncash ☐ (Complete Part II for noncash contribution.)
<u>82</u>	UTZ QUALITY FOODS LLC	\$ 9,500	Person ☒
	117 PINNACLE POINT DR		Payroll ☐
	ST MARYS, GA 31558		Noncash ☐ (Complete Part II for noncash contribution.)
<u>83</u>	VALASSIS DIGITAL	\$ 20,000	Person ☒
	15955 LA CANTERA PARKWAY		Payroll ☐
	SAN ANTONIO, TX 78256		Noncash ☐ (Complete Part II for noncash contribution.)
<u>84</u>	VALVOLINE INC	\$ 5,300	Person ☒
	PO BOX 55270		Payroll ☐
	LEXINGTON, KY 40555		Noncash ☐ (Complete Part II for noncash contribution.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>85</u>	VESTCOM	<u>\$ 8,000</u>	Person ☒
	2800 CANTRELL ROAD SUITE 500		Payroll ☐
	LITTLE ROCK, AR 72202		Noncash ☐ (Complete Part II for noncash contribution.)
<u>86</u>	WASTE HARMONICS	<u>\$ 15,000</u>	Person ☒
	7620 OMNITECH PLACE SUITE 1		Payroll ☐
	VICTOR, NY 14564		Noncash ☐ (Complete Part II for noncash contribution.)
<u>87</u>	WEIL GOTSHAL & MANGES	<u>\$ 15,000</u>	Person ☒
	767 FIFTH AVENUE		Payroll ☐
	NEW YORK, NY 10153		Noncash ☐ (Complete Part II for noncash contribution.)
<u>88</u>	WISH FARMS	<u>\$ 5,000</u>	Person ☒
	1301 S FRONTAGE RD		Payroll ☐
	PLANT CITY, FL 33563		Noncash ☐ (Complete Part II for noncash contribution.)
<u>89</u>	WONDERFUL SALES LLC	<u>\$ 9,000</u>	Person ☒
	11444 WEST OLYMPIC BOULEVARD TENTH F		Payroll ☐
	LOS ANGELES, CA 90064		Noncash ☐ (Complete Part II for noncash contribution.)
<u>90</u>	AXONIFY	<u>\$ 6,000</u>	Person ☒
	450 PHILLIP ST WATERLOO		Payroll ☐
	WATERLOO, CA		Noncash ☐ (Complete Part II for noncash contribution.)