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Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

2012

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

	endar year 2012, or tax year beginning	, 2012	, and ending		, ,	
THE I	oundation HENN CHARITIES			Α	Employer identification nur 20-4279046	
3291	nd street (or P.O box number if mail is not delivered to st WEST SUNRISE BOULEVARD		Room/suite	В	Telephone number (see the (954) 792-796	•
City or tov	vn LAUDERDALE	State FL	ZIP code 33311	С	If exemption application is	pending, check here 🕨 🗌
G Che	ck all that apply: Initial return	Initial Return of a form	mer public charity	D ·	1 Foreign organizations, chec	k here
H C	Address change	Name change		:	2 Foreign organizations meet here and attach computation	
	Section 4947(a)(1) nonexempt charitable	trust Other taxa <u>ble</u> p	rivate <u>fou</u> ndation	E	If private foundation status under section 507(b)(1)(A)	
	rom Part II, column (c), line 16)	counting method: 🗶 C Other (specify)	Ш.	F	If the foundation is in a 60	month termination
₽ \$ Part I	41,100,199. (Part Analysis of Revenue and	l, column (d) must be on	r .	<u> </u>	under section 507(b)(1)(B)	
	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	nt	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc, received (att sch) 2 Ck if the foundn is not reg to att Sch B	1,913,600.				
	3 Interest on savings and temporary cash investments					
	4 Dividends and interest from securities					
	5 a Gross rents b Net rental income or (loss)			_		
R E	6 a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all					
V	assets on line 6a 7 Capital gain net income (from Part IV, line 2)					
E N	8 Net short-term capital gain					
U E	9 Income modifications 10 a Gross sales less			-		
	allowances b Less Cost of					
	c Gross profit/(loss) (att sch)					
	11 Other income (attach schedule)			_		
	12 Total. Add lines 1 through 11	1 013 600				
	13 Compensation of officers, directors, trustees, etc	1,913,600.	P==		: 12 N.D = 11 N = 1 - 1	
	14 Other employee salaries and wages			7	and the second second	<u>></u> '
	15 Pension plans, employee benefits			න්		<u> </u>
A	16a Legal fees (attach schedule)		1 3	3	YOV 6 4 EC S	**
M	b Accounting fees (attach sch) c Other prof fees (attach sch)		1	—⁺+	, , , ,	
	17 Interest					
E> I	18 Taxes (attach schedule)(see instrs)				,	
N-STRAT-NG	19 Depreciation (attach sch) and depletion					
i, i N. V	20 Occupancy			\dashv		
	21 Travel, conferences, and meetings .	·				
EXPE	22 Printing and publications23 Other expenses (attach schedule)					
N S S	24 Total operating and administrative expenses. Add lines 13 through 23	-	<u> </u>			
	25 Contributions, gifts, grants paid			\dashv		
20î⊹	26 Total expenses and disbursements. Add lines 24 and 25					
	27 Subtract line 26 from line 12:					
	a Excess of revenue over expenses and disbursements	1,913,600.		_		
	b Net investment income (if negative, enter -0-)					
RAA F	C Adjusted net Income (if negative, enter -0-) or Paperwork Reduction Act Notice, see ins	tructions		TEE	0301 12/06/12	Form 990-PF (2012)

Page 2

Pań	(d]]_	Balance Sheets	column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	10 01	(c) Fair Market Value
	1	Cash - non-interest		199.	19	\rightarrow	199.
	2		ary cash investments .	155.		<u> </u>	
	3	Accounts receivable	•				e de es deservir de la composición del composición de la composici
		Less: allowance for	doubtful accounts				
	4	Pledges receivable	·			7	
		Less: allowance for	doubtful accounts				<u> </u>
	5	Grants receivable					
	6	Receivables due from office disqualified persons (atta	cers, directors, trustees, and other ch schedule) (see instructions)				
	7	Other notes and loans rec	, ,				
A		Less: allowance for					
Š	8	Inventories for sale	or use				
A S E T	9	Prepaid expenses ai	nd deferred charges .				
s	10 a	a Investments – U.S. obligations (attach s	and state government chedule)		-		
	l t	o Investments — corporate	stock (attach schedule)				
	(c Investments — corporate	bonds (attach schedule)				
	11	Investments – land, equipment basis	buildings, and				
		Less accumulated depred (attach schedule)	eration • • • • • • • • • • • • • • • • • • •				
	12	Investments - morte	gage loans				
	13	Investments - other	(attach schedule)				
	14	Land, buildings, and					
		Less accumulated depred (attach schedule)					
	15	Other assets (descri		22,900,000.	24,813,60	0.	41,100,000.
	16		completed by all filers — Also, see page 1, item l)	22,900,199.	24,813,79	9.	41,100,199.
ᆫ	17	Accounts payable ar	nd accrued expenses				
Å	18	Grants payable					
В	19	Deferred revenue					
Ļ	20		ctors, trustees, & other disqualified persons		·		
T T	21		s payable (attach schedule)				
ļ	22	Other liabilities (des	cribe)	` <u> </u>	 .		
E S	23	Total liabilities (add					
			llow SFAS 117, check here 24 through 26 and lines 30 and 31.	4			
N F E U T N	24	Unrestricted					
TN	25	Temporarily restricted	ed				
D	26	Permanently restrict	_		<u>. </u>		
A B S A L T A		Foundations that do and complete lines	o not follow SFAS 117, check here 27 through 31.	-			
E L T A	27	Capital stock, trust p	orincipal, or current funds				
SNC	28		, or land, building, and equipment fund				
OΕ	29	•	ulated income, endowment, or other funds	22,900,199.	24,813,79		
R S	30		fund balances (see instructions) net assets/fund balances	22,900,199.	24,813,79	99.	
	31	(see instructions)		22,900,199.	24,813,79	99.	
Par		Analysis of Char	nges in Net Assets or Fund Balanc	ces		,	
1	Tota	I net assets or fund ba	alances at beginning of year — Part II, colur d on prior year's return)	mn (a), line 30 (must agr	ee with	1	22 000 100
2		er amount from Part I,		•		2	22,900,199. 1,913,600.
3		increases not included in I		•	<u> </u>	3	1, 515, 600.
4		lines 1, 2, and 3				4	24,813,799.
5		ases not included in line 2	(itemize)		ļ	5	
6	Tota	I net assets or fund be	alances at end of year (line 4 minus line 5)	- Part II, column (b), lin	e 30	6	24,813,799.

	(a) List and describe	the kind(s) of property sold (e.g., ree; or common stock, 200 shares MLC	al estate,	(b) How ac P - Purc D - Dona		(C) Date acquired (month, day, year)	(d)Date sold (month, day, year)
1:	a		 -				
	b						
	c			-	_		
	d					<u> </u>	
	e						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale			(h) Gain or (e) plus (f) m	
	a						
	b						
	<u> </u>						
	d					· - · ·	
	e						
		ng gain in column (h) and owned by		4	_	(I) Gains (Colu	mn (h)
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if ar			ain minús column (k) an -0-) or Losses (fro	
	a	·	. <u> </u>				
	b		·				
	C						
	<u>d</u>						
	<u> </u>					,	<u></u>
2	Capital gain net income or (net Net short-term capital gain or (l	capital loss). If gain, also if (loss), en oss) as defined in sections 1222(5) as	enter in Part I, line 7 ter -0- in Part I, line 7 and (6)		2		
	If gain, also enter in Part I, line	8, column (c) (see instructions). If (loss), enter -0-			i	
	ın Part I, line 8				3		
Pa	rt V Qualification Under	Section 4940(e) for Reduce	d Tax on Net Investme	ent Inco	me		
Was	es,' the foundation does not quali	ion 4942 tax on the distributable am fy under section 4940(e) Do not con n each column for each year; see the	nplete this part	·		Yes	X No
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass			(d) Distribution imn (b) divided t	
	2011	0.		0.			0.000000
	2010	0.	<u> </u>	0.			0.000000
	2009	0.		0.			0.000000
	2008	0.		0.			0.000000
	2007	0.		0.			0.000000
			<u> </u>		2		0.000000
3		e 5-year base period – divide the tot has been in existence if less than 5			3		0.000000
4	Enter the net value of noncharit	able-use assets for 2012 from Part)	X, line 5		4		0.
5	Multiply line 4 by line 3				5		0.
6	Enter 1% of net investment inco	ome (1% of Part I, line 27b) .			6		
7	Add lines 5 and 6				7		0.
8	Enter qualifying distributions fro	•			8		
	If line 8 is equal to or greater the Part VI instructions.	ian line 7, check the box in Part VI,	line 1b, and complete that pa	art using a	1%	tax rate. See the	

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 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If 'Yes,' complete Part XIV

TEEA0304 12/07/12

Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names

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10

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and addresses

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charitable purposes?

the tax year beginning in 2012?

Form 990-PF (2012)

3 b

4 a

b If 'Yes,' did it have excess business holdings in 2012 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 2012)

4 a Did the foundation invest during the year any amount in a manner that would jeopardize its

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

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Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

Amount

All other program-related investments. See instructions

Total. Add lines 1 through 3

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Form 990-PF (2012) THE HENN CHARITIES

20-4279046

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	1 a	
		\longrightarrow	<u> </u>
	b Average of monthly cash balances	1 b	0.
	C Fair market value of all other assets (see instructions)	1 c	0.
	d Total (add lines 1a, b, and c)	1 d	0.
	e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation)	300	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	0.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	0.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.
Pã	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations	ting fo	undations
	and certain foreign organizations check here ► 🗓 and do not complete this part.)	_	
1	Minimum investment return from Part X, line 6 .	1	
2	a Tax on investment income for 2012 from Part VI, line 5	总额	
	b Income tax for 2012 (This does not include the tax from Part VI.)		
	c Add lines 2a and 2b	2 c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	· ·	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7		7	
		1 1	
Цą	Qualifying Distributions (see instructions)		
_		1200	
,	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	
	b Program-related investments — total from Part IX-B	1 b	
	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:		
Ī	a Suitability test (prior IRS approval required) .	3 a	
	b Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	
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		6	0.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether to qualifies for the section 4940(e) reduction of tax in those years.	he found	

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Form 990-PF (2012)

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1	Distributable amount for 2012 from Part XI, line 7				
2	Undistributed income, if any, as of the end of 2012:				
	Enter amount for 2011 only			0.	
Ł	Total for prior years 20, 20, 20				
3	Excess distributions carryover, if any, to 2012	-			
a	From 2007 . 0 .				
	From 2008 0 .				
	From 2009 0 .				
	From 2010 . 0 .				
	From 2011				
	Total of lines 3a through e	0.			
4	Qualifying distributions for 2012 from Part XII, line 4: \$				
_	Applied to 2011, but not more than line 2a				
2	Applied to 2011, but not more than line 2a				
t	Applied to undistributed income of prior years (Election required – see instructions)			<u> </u>	
C	: Treated as distributions out of corpus (Election required – see instructions)				
c	Applied to 2012 distributable amount				
e	Remaining amount distributed out of corpus	0.			
5					
	(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:				
а	Corpus Add lines 3f, 4c, and 4e. Subtract line 5	0.			
t	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				
c	Subtract line 6c from line 6b. Taxable amount – see instructions		0.		
			- 0.		
e	Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount — see instructions			ο.	
f	Undistributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013				0
7	Amounts treated as distributions out of				0.
	corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
	· '				
8	Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)	0.			
9	Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	0.			
10	Analysis of line 9:				
a	Excess from 2008 0.				
	Excess from 2009 0.				ļ
	Excess from 2010 0.				
	Excess from 2011 0.			1	
€	Excess from 2012 0.				

Form 990-PF (2012) THE HENN CHARITI			\(\(\) \(\	20-427904	6 Page 10
Private Operating Foundat					
1 a If the foundation has received a ruling or do is effective for 2012, enter the date of the r	etermination letter ti uling	hat it is a private op	erating foundation,		07/25/08
b Check box to indicate whether the foundation	on is a private opera	ating foundation des	cribed in section	X 4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
each year listed	0.	0.	0.	0.	N/A
b 85% of line 2a	0.	0.	0.	0.	N/A
c Qualifying distributions from Part XII, line 4 for each year listed	0.	0.	0.	0.	0.
d Amounts included in line 2c not used directly for active conduct of exempt activities	0.	0.	0.	_0.	N/A
 Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c 	0.	0.	0.	0.	N/A
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test - enter					
(1) Value of all assets	24,813,799.	22,900,199.	17,620,199.	17,620,189.	82,954,386.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	24,813,799.	22,900,199.	17,620,199.	17,620,189.	82,954,386.
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()(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
RartiXVI Supplementary Information assets at any time during the	(Complete this	part only if the	foundation had	\$5,000 or more	in
1 Information Regarding Foundation Manag					
a List any managers of the foundation who h close of any tax year (but only if they have	ave contributed mor	e than 2% of the to nan \$5,000). (See se	tal contributions rec ection 507(d)(2).)	eived by the founda	tion before the
PRESTON B. HENN					
b List any managers of the foundation who o a partnership or other entity) of which the f	wn 10% or more of	the stock of a corpo	ration (or an equally	y large portion of the	e ownership of
NONE		,, or ground minores	•		
2 Information Regarding Contribution, Gran	t Gift Loan Schola	erchin etc Program	16'		
Check here X if the foundation only makes complete items 2a, b, c, and d	nakes contributions	to preselected chari	table organizations	and does not accep zations under other	t unsolicited conditions,
a The name, address, and telephone number	r or e-mail of the pe	rson to whom applic	cations should be ac	ddressed	
b The form in which applications should be s	ubmitted and inform	nation and materials	they should include	e:	
c Any submission deadlines:					
d Any realizations as fundations are a large	wah oo bu sassasis	weel organ at	lo fioldo lundo of	chitutions or other f	notors:
d Any restrictions or limitations on awards, s	ouch as by geograph	ncai aicas, cilaiilabi	ie neius, killus Ul III:	sututions, or other la	201013

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Recipient	f 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)	substantial contributor	recipient	30.11.02.0011	
a Paid during the year				
			į	
			1	
	1			
				,
			1	
Total			► 3a	
b Approved for future payment		Τ		
b Approved for factore payment				
			1	
_				
Total	<u> </u>	<u> </u>	. ► 3b	

PartXVIIA Analysis of Income-Producing Activities

			Lloualata	d huginass income	Evaluded	hu coetion 512 512 or 514	
	·	amounts unless otherwise indicated	(a) Business code	(b) Amount	(c) Exclu- sion	by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See instructions.)
	-	am service revenue:			code		
2	·——				 		
					-		
ì	<u>, — </u>				-		· · · · · ·
	<u></u>	· - ·-			 		
f			··		1		
ç	Fees	and contracts from government agencies			İ _		
2	Memb	ership dues and assessments .					
3	Interest	on savings and temporary cash investments					
4		ends and interest from securities .					THE PARTY OF THE P
5		ental income or (loss) from real estate.				计图图 LTM 图	
		financed property			 		
_		ebt-financed property			├ ──┤		
6		tal income or (loss) from personal property .			<u> </u>		
7		investment income .			 		
8 9		(loss) from sales of assets other than inventory come or (loss) from special events			 		
10		profit or (loss) from sales of inventory					
11		revenue.		21/25/21/21/21			
	3	10101100			a goog and	And the second s	- Principles of Mary Control of State o
	,						
•	:				1		
(<u> </u>						
•			ĺ		-		
	Subto	tal. Add columns (b), (d), and (e)					
13	Subto	Add line 12, columns (b), (d), and (e)		·		13	
13	Subto		ns)	·		13	
13 (See	Subto Total.	Add line 12, columns (b), (d), and (e)		ishment of Exemp	4-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		
13 (See	Subto Total works	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Barriage Relationship of Activities to the	Accompl		ot Purpo	oses	to the
13 (See	Subto Total.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)
13 (See	Subto Total. works rt:XVI	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Bar Relationship of Activities to the	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)
13 (See	Subto Total. works rt:XVI	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Bar Relationship of Activities to the	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)
13 (See	Subto Total. works rt:XVI	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Bar Relationship of Activities to the	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)
13 (See	Subto Total. works rt:XVI	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Bar Relationship of Activities to the	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)
13 (See	Subto Total. works rt:XVI	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Bar Relationship of Activities to the	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)
13 (See	Subto Total. works rt:XVI	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Bar Relationship of Activities to the	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)
13 (See	Subto Total. works rt:XVI	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Bar Relationship of Activities to the	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)
13 (See	Subto Total. works rt:XVI	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Bar Relationship of Activities to the	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)
13 (See	Subto Total. works rt:XVI	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Bar Relationship of Activities to the	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)
13 (See	Subto Total. works rt:XVI	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Bar Relationship of Activities to the	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)
13 (See	Subto Total. works rt:XVI	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Bar Relationship of Activities to the	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)
13 (See	Subto Total. works rt:XVI	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Bar Relationship of Activities to the	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)
13 (See	Subto Total. works rt:XVI	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Bar Relationship of Activities to the	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)
13 (See	Subto Total. works rt:XVI	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Bar Relationship of Activities to the	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)
13 (See	Subto Total. works rt:XVI	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Bar Relationship of Activities to the	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)
13 (See	Subto Total. works rt:XVI	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Bar Relationship of Activities to the	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)
13 (See	Subto Total. works rt:XVI	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Bar Relationship of Activities to the	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)
13 (See	Subto Total. works rt:XVI	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Bar Relationship of Activities to the	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)
13 (See	Subto Total. works rt:XVI	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Bar Relationship of Activities to the	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)
13 (See	Subto Total. works rt:XVI	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Bar Relationship of Activities to the	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)
13 (See	Subto Total. works rt:XVI	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Bar Relationship of Activities to the	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)
13 (See	Subto Total. works rt:XVI	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation Bar Relationship of Activities to the	Accompl	orted in column (e) of Pa	ot Purpo	oses	to the structions)

Form 990-PF (2012) THE HENN CHARITIES 20-4279046 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

de	escribe	organization direct d in section 501(c to political organiz) of the Code (o	engage in any of the ther than section s	ne following with 501(c)(3) organi	any othe zations)	er organization or in section 52	7,		Yes	No
a Tr	ansfer	s from the reporting	ng foundation to	a noncharitable e	xempt organizat	ion of					
(1) Casi	h							1 a (1)		_X
(2) Othe	er assets							1 a (2)		X
b O	ther tra	ansactions [,]							-National Art	扩	
(1) Sale	es of assets to a no	oncharitable exe	empt organization					1 b (1)		X
(2) Purc	hases of assets fr	om a noncharita	able exempt organ	nization		•	•	1 b (2)		Х
(3) Reni	tal of facilities, equ	upment, or othe	r assets			•		1 b (3)		Х
•	•	nbursement arrang	•						1 b (4)		X
•	•	ns or loan guarante							1 b (5)		X
•	•	formance of service		nin or fundraising s	solicitations				1 b (6)		X
•	•	of facilities, equip		•		es	•		1 c		X
CS	iailing	or racinties, equipi	ment, maning it	313, 011101 433013, 1	or para crimpioye	.	• ••				 -
th	e good	ls, other assets, or	r services given	by the reporting for	oundation. If the	foundati	on received les	s show the fair ma s than fair market services received	value in	of	
(a) Line		(b) Amount involved		of noncharitable exem	 			sfers, transactions, and		gement	s
(-,	-	(4)	()		<u> </u>		·	· · · · · · · · · · · · · · · · · · ·			
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						<u> </u>					
						1					
de	escribe	undation directly o) of the Code (o	ated with, or relate ther than section s	ed to, one or mo 501(c)(3)) or in	ore tax-ex section 5	kempt organizat 27°	ions	Yes	×	No
b if		complete the follow							1 1 .		
	(a)) Name of organiza	ation	(b) Type	of organization		(с	Description of rel	ationship		
				_							
		 									
			12								
	Under p	penalties of perjury de and complete Declarat	dare that I have example to the	mined this return, include than taxnaver) is hase	ling accompanying so	hedules and	d statements, and to	the best of my knowledgledge	ge and belief, i	t is true	,
Sian	00,100,		77_71	and tanpayor, to base	i .		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		May the	RS disc	uss
Sign		Vacall	77. IV	100.	حلمحاميا	o 12 € -			this retur	n with th	ne
Here			1/ 10	W1.	2012		RUSTEE		_ (see ipst	(uctions	<u> </u>
	Signa	ature of officer or trustee		Dennararia e	Date	11	Date		IPTIN X	Yes	No
		Print/Type preparer's	пате	Preparer's s	signature .	r DA	-	Checkif			
Paid		JIM L. HOS	KINS, CPA	X	PU -	<u> </u>	10/17/13	self-employed	P0126	749	
Prepa	rer	Firm's name		SKINS, OPA,	P.A.	•		Firm's EIN 65-0	808149		
Use C		Firm's address	2560 RCA	BOULEVARD,	SUITE 108						
		<u> </u>	PALM BEAC	H GARDENS		FL 33	410	Phone no (563	L) 627-	<u> 1388</u>	<u> </u>
BAA									Form 99	0-PF (2012)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF

OMB No 1545-0047

2012

Name of the organization		Employer identification number
THE HENN CHARITIES		20-4279046
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not trea	ated as a private foundation
	527 political organization	
Form 990-PF	x 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 Canaral Rule or a Special Rule	
,,,,,,	•	and a Cassial Duta. Cas instructions
Note. Only a section 501(c)(/), (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, contributor. (Complete Parts I and II	990-EZ, or 990-PF that received, during the year, \$5,000 o	or more (in money or property) from any one
contributor, (Complete Faits Failu ii	,	
Special Rules		
<u>-</u>		. L. C. W
509(a)(1) and $170(b)(1)(A)(vi)$ and r	ifiling Form 990 or 990-EZ that met the 33-1/3% support te received from any one contributor, during the year, a contrib 90, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete P	bution of the greater of (1) \$5,000 or
For a section $501(c)(7)$, (8), or (10)	organization filing Form 990 or 990-EZ that received from a	any one contributor, during the year,
total contributions of more than \$1,0	000 for use exclusively for religious, charitable, scientific, lit or animals. Complete Parts I, II, and III	erary, or educational purposes, or
,	organization filing Form 990 or 990-EZ that received from a	any one contributor, during the year
Contributions for use exclusively for	religious, charitable, etc. purposes, but these contributions	did not total to more than \$1,000.
If this box is checked, enter here the	e total contributions that were received during the year for a e parts unless the General Rule applies to this organization	an <i>exclusively</i> religious, charitable, etc, because it received nonexclusively
	ns of \$5,000 or more during the year	► \$
Caution: An organization that is not covered answer 'No' on Part IV, line 2, of its Form 99 meet the filing requirements of Scheduli	l by the General Rule and/or the Special Rules does not file Schedu 90, or check the box on line H of its Form 990-EZ or on Part I, line e B (Form 990, 990-EZ, or 990-PF)	2, of its Form 990-PF, to certify that it does not
	tice, see the Instructions for Form 990, 990EZ, Sci	hedule B (Form 990, 990-EZ, or 990-PF) (2012)
or 990-PF.		

•	•		
Schedule Name of org	B (Form 990, 990-EZ, or 990-PF) (2012)	Page	1 of 1 of Part
	CNN CHARITIES	' '	279046
			273040
Pelvi I	Contributors (see instructions) Use duplicate copies of Part I if additional space is nee	ded	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	PRESTON B. HENN 3291 WEST SUNRISE BOULEVARD	\$1,913,600.	Person X Payroll Noncash X
	FORT LAUDERDALE FL 33311		(Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	·	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	·	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution

Person Payroll Noncash

(Complete Part II if there is a noncash contribution.)

Page

1 to

of Part II

Name of organization

THE HENN CHARITIES

Employer identification number 20-4279046

Parill Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. from (b) Description of noncash property given (c) FMV (or estimate) (d) Date received Part I (see instructions) INTEREST - 1965_FERRARI 275 GTB/C 1,913,600. 12/28/12 (c) FMV (or estimate) (d) Date received (a) No. (b) Description of noncash property given from Part I (see instructions) (a) No. from Part I (d) Date received (c) FMV (or estimate) (see instructions) (b) Description of noncash property given (a) No. from Part I (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received (a) No. from (b)
Description of noncash property given (d) Date received (c) FMV (or estimate) (see instructions) Part I (a) No. from (d) Date received (c) FMV (or estimate) (see instructions) (b) Description of noncash property given Part I

Additional Information

Form 990-PF, Page 4, Part VII-A - Statements Regarding Activities - Question 10

PRESTON B. HENN WAS A SUBSTANTIAL CONTRIBUTOR IN PRIOR YEARS AND DONATED A SUBSTANTIAL CONTRIBUTION IN 2012. HIS ADDRESS IS 3291 W. SUNRISE BLVD., FT. LAUDERDALE, FL 33311

LISTED BELOW PLEASE FIND SUBSTANTIAL CONTRIBUTORS FROM PRIOR YEARS:

3290 SUNRISE INVESTMENTS, INC., 3291 W. SUNRISE BLVD., FT. LAUDERDALE, FL 33311

FUNLAN THEATRES & SWAP SHOP, INC., 3291 W. SUNRISE BLVD., FT. LAUDERDALE, FL 33311

Additional Information

General Explanation of Activity

THIS ENTITY IS A PRIVATE OPERATING FOUNDATION WHICH CONSTITUTES A MUSEUM FOR CARS. THE CARS ARE THE ONLY ASSETS OF THE FOUNDATION.

Additional Information

Appraisal - 1965 Ferrari 275 GTB/C Speciale

Attached please find an appraisal dated April 9, 2012 reflecting the fair market value of the above referenced collectible as of December 28, 2007. This value is being used due to the fact that a partial interest of 8% was contributed in 2012. A partial interest of 40% had been previously contributed in 2007. An additional partial interest of 15% had been contributed in 2011.

Also, attached please find an "updated" appraisal dated December 28, 2012 reflecting the fair market value as of December 28, 2012. This value was used in calculating the fair market value, at the applicable percentages, used on the balance sheet of the tax return.

Form 990-PF, Page 6, Part VIII, Line 1 Information about Officers, Directors, Trustees, Etc.

(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
Person X Business JIM SCOTT 3291 WEST SUNRISE BOULEVARD FORT LAUDERDALE FL 33311 Person X Business	TRUSTEE 0.00	0.	0.	0.
3291 WEST SUNRISE BOULEVARD FORT LAUDERDALE FL 333311	TRUSTEE 0.00	0.	0.	0.

Total

0.	0.	0.

Form 990-PF, Page 2, Part II, Line 15 **Other Assets Stmt**

	Beginning	End of Year		
Line 15 - Other Assets:	Year Book Book Value Value		Fair Market Value	
1985 PORSCHE 962	1,500,000.	1,500,000.	1,500,000.	
1980 PORSCHE 935	1,000,000.	1,000,000.	1,000,000.	
1980 PORSCHE FITZPATRICK 935	800,000.	800,000.	800,000.	
1965 FERRARI 275 GTB/C (40% INTEREST)	14,320,000.	14,320,000.	24,000,000.	
1965 FERRARI 275 GTB/C (15% INTEREST)	5,280,000.	5,280,000.	9,000,000.	
1965 FERRARI 275 GTB/C (8% INTEREST)	0.	1,913,600.	4,800,000.	

Total

22,900,000. 24,813,600. 41,100,000.

THE	HENN	CHARITIES	

20-4279046

2

Supporting Statement of:

Form 990-PF, p1/Line 1(a)

Description	Amount		
8% INTEREST - 1965 FERRARI 275 GTB/C	1,913,600.		
Total	1,913,600.		

Form **8868**

Rev January 2013)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury

File a separate application for each return.

internal Revenue	Service	-1			_
-	e filing for an Automatic 3-Month Extension, co	•			* X
-	e filing for an Additional (Not Automatic) 3-Mon			•	
-	plete Part II unless you have already been grant				
request an e	ling (e-file). You can electronically file Form 886 required to file Form 990-T), or an additional (no function of time to file any of the forms listed in With Certain Personal Benefit Contracts, which ring of this form, visit www.irs gov/efile and click	ot automatic) i Part I or Pai nust be sent	3-month extension of time. You can elect rt II with the exception of Form 8870, Info to the IRS in paper format (see instructio	tronically file Form 8 ormation Return for 1	8868 to Transfers
Part (Automatic 3-Month Extension of Tim	e. Only su	bmit original (no copies needed)	·	
	n required to file Form 990-T and requesting an	automatic 6-	month extension - check this box and co	omplete Part I only	<u> </u>
All other cor income tax i	porations (including 1120-C filers), partnerships eturns.	, REMICs, an			
			Enter filer's identi	fying number, see i	
Tuma au	Name of exempt organization or other filer, see instructions			Employer Identification	number (City) or
Type or print					
•	THE HENN CHARITIES Number, street, and room or suite number. If a P O box, see			20-4279046 Social security nu	mbor (SSN)
File by the due date for	Number, street, and room or suite number. If a P O box, see	e instructions		Social security ha	(33N)
filing your	3291 WEST SUNRISE BOULEVARD City, town or post office, state, and ZIP code For a foreign a			<u> </u>	
return See instructions	City, town or post office, state, and ZIP code For a foreign a	idaress, see instr	uctions		
	FORT LAUDERDALE			FL 3331	_1
Enter the Re	turn code for the return that this application is for	or (file a sepa	arate application for each return) .		04
Application Is For		Return Code	Application Is For		Return Code
Form 990 or	Form 990-EZ	01	Form 990-T (corporation)		07
Form 990-Bl	-	02	Form 1041-A		08
Form 4720 ((individual)	03	Form 4720		09
Form 990-PI		04	Form 5227		10
Form 990-T	(section 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-T	(trust other than above)	06	Form 8870		12
Telephor If the org If this is check the	The No. ► (954) _792-7963 ganization does not have an office or place of but for a Group Return, enter the organization's four is box If it is for part of the group, insign is for.	FAX N usiness in the r digit Group check this bo	O (954) 792-7962 United States, check this box . Exemption Number (GEN) ox I and attach a list with the na	f this is for the whole mes and EINs of all	• • •
until The ex ► X ► If the t	Aug 15 , 20 13 , to file the exempt or tension is for the organization's return for calendar year 20 12 or	ganization ref	turn for the organization named above.	nal return	
	application is for Form 990-BL, 990-PF, 990-T, 4 undable credits. See instructions	1720, or 6069	, enter the tentative tax, less any	3 a \$	0.
payme	application is for Form 990-PF, 990-T, 4720, or onts made_Include any prior year overpayment a	allowed as a	credit	3ь \$	0.
c Baland EFTPS	ce due. Subtract line 3b from line 3a Include you (Electronic Federal Tax Payment System) See	ur payment w	outh this form, if required, by using	3c \$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

			20-427	9046	Page 2	
-	re filing for an Additional (Not Automatic) 3-Month					► 🛛
	complete Part II if you have already been granted a			filed Form	8868	
	re filing for an Automatic 3-Month Extension, comp Additional (Not Automatic) 3-Month Ex			(no coni	es neede	<u>d)</u>
Mengin	Additional (Not Automatic) 3-Month L	(terision	Enter filer's id			
	Name of exempt organization or other filer, see instructions				tification numb	
_			1			
Type or print	THE HENN CHARITIES			20-4279		
•	Number, street, and room or suite number If a P O box, see inst	ructions		Social security	number (SSN)	
File by the extended due date for			ļ			
filing your return See	3291 WEST SUNRISE BOULEVARD City, town or post office, state, and ZIP code For a foreign address	a con instructi				
instructions						
	FORT LAUDERDALE	FL 33	3311			
Enter the F	Return code for the return that this application is for	(file a sepa	rate application for each return).			04
		(,				<u> </u>
Applicatio	on .	Return	Application			Return
Is For		Code	Is For	**************************************		Code
	or Form 990-EZ	01				
Form 990-		02	Form 1041-A Form 4720			08
Form 990-) (individual)	03	Form 5227			10
	T (section 401(a) or 408(a) trust)	05	Form 6069			11
	T (trust other than above)	06	Form 8870			12
TelephIf the cIf this whole group	organization does not have an office or place of busins for a Group Return, enter the organization's four of	FAX No. P ness in the digit Group l		n the name		► ☐ nis is for the of all
5 For 6 If the	puest an additional 3-month extension of time until calendar year 2012, or other tax year beginning tax year entered in line 5 is for less than 12 month Change in accounting period the extension ADDIT EPARE A COMPLETE AND ACCURATE TO	s, check re	NFORMATION IS REQUIRED	Final re	, 20 turn	·
nonr	s application is for Form 990-BL, 990-PF, 990-T, 47 efundable credits. See instructions		· · · · · · · · · · · · · · · · · · ·	8 a	\$	0.
payn	is application is for Form 990-PF, 990-T, 4720, or 60 ments made. Include any prior year overpayment all Form 8868	069, enter a owed as a d	ny refundable credits and estimated t credit and any amount paid previously	ax / 8 b	\$	0.
¢ Bala EFTI	ince due. Subtract line 8b from line 8a. Include your PS (Electronic Federal Tax Payment System). See i	payment w nstructions	rith this form, if required, by using	8 c	\$	0.
	Signature and Verific	ation mu	st be completed for Part II on	ly.		
Under penalti correct, and c	nes of perjury, I declare that I have examined this form, including accomplete, and that I amount orized to prepare this form	ompanying sch	edules and statements, and to the best of my know	owledge and b	elief, it is true,	
Signature >	Title >	C.P.A.		Di	ate ► 08/	<u>/05/13</u>
BAA	0	FIFZ0502	01/21/13		Form 8868	(Rev 1-2013)