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<b>Form 990</b>  Department of the Treasury Internal Revenue Service	<b>Return of Organization Exempt From Income Tax</b>  <b>Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)</b>  ▶ Do not enter Social Security numbers on this form as it may be made public. By law, the IRS generally cannot redact the information on the form. ▶ Information about Form 990 and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a>	OMB No 1545-0047  <div> <div>2013</div> <div>Open to Public Inspection</div> </div>

<b>A</b> For the 2013 calendar year, or tax year beginning 01-01-2013, 2013, and ending 12-31-2013			
<b>B</b> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization LYFORD CAY FOUNDATION INC C/O PUTNEY TWOMBLY HALL & HIRSON Doing Business As		<b>D</b> Employer identification number 23-7025275
	Number and street (or P O box if mail is not delivered to street address) Room/suite 521 5TH AVENUE 10TH FLOOR		<b>E</b> Telephone number (242) 362-4910
	City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10175		<b>G</b> Gross receipts \$ 6,307,588
	<b>F</b> Name and address of principal officer BASIL P GOULANDRIS P O BOX N-7776 LYFORD CAY NASSAU N P THE BAHAMAS, NASSAU BF		
<b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)( ) (insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)	
<b>J</b> Website: WWW.LYFORDCAYFOUNDATION.ORG		<b>H(c)</b> Group exemption number	
<b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		<b>L</b> Year of formation 1969	<b>M</b> State of legal domicile NY

Part I		Summary	
Activities & Governance	1 Briefly describe the organization's mission or most significant activities SEE SCHEDULE O		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	24
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	24
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	0
	6 Total number of volunteers (estimate if necessary)	6	25
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	38,071
	7b Net unrelated business taxable income from Form 990-T, line 34	7b	-20,804
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	1,779,435	2,146,361
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0	0
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,207,158	807,794
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	56,880	54,587
		3,043,473	3,008,742
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,408,785	1,350,408
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	424,253	563,215
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) <u>152,560</u>		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	451,872	709,841
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	2,284,910	2,623,464
	19 Revenue less expenses Subtract line 18 from line 12	758,563	385,278
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	21,703,004	22,711,312
	21 Total liabilities (Part X, line 26)	429,202	316,201
	22 Net assets or fund balances Subtract line 21 from line 20	21,273,802	22,395,111

Part II		Signature Block				
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge						
Sign Here					2014-11-14	
	BASIL GOULANDRIS CHAIRMAN				Date	
Paid Preparer Use Only	Print/Type preparer's name CHRISTINE KAWECKI		Preparer's signature		Date 2014-11-13	Check <input type="checkbox"/> if self-employed PTIN P00743140
	Firm's name  DELOITTE TAX LLP				Firm's EIN  86-1065772	
	Firm's address  TWO JERICO PLAZA  JERICO, NY 11753				Phone no (516) 918-7000	
May the IRS discuss this return with the preparer shown above? (see instructions) . . . . . <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						

Part III

Statement of Program Service Accomplishments

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

☐ Yes ☒ No

1

Briefly describe the organization's mission

SEE SCHEDULE O

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

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

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

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

4a

(Code ) (Expenses \$ 604,065 including grants of \$ 583,314 ) (Revenue \$ 0 )

THE FOUNDATION PROVIDES GRANTS TO NOT-FOR-PROFIT ORGANIZATIONS THAT SEEK TO IMPROVE THE GENERAL EDUCATION, HEALTH AND WELFARE OF THE COMMUNITIES THAT THEY SERVE. IN 2013, GRANTS WERE MADE TO TWENTY-THREE (23) ORGANIZATIONS, TOTALING \$583,314.

4b

(Code ) (Expenses \$ 908,426 including grants of \$ 767,094 ) (Revenue \$ 0 )

THE FOUNDATION PROVIDES ACADEMIC, TECHNICAL AND VOCATIONAL SCHOLARSHIPS TO COLLEGES, UNIVERSITIES AND OTHER EDUCATIONAL INSTITUTIONS FOR DESERVING BAHAMIAN STUDENTS. IN 2013, SEVENTY-THREE (73) SCHOLARSHIPS WERE GRANTED TO FIFTY-SEVEN (57) INSTITUTIONS TOTALING \$767,094.

4c

(Code ) (Expenses \$ 413,768 including grants of \$ 0 ) (Revenue \$ 0 )

THE FOUNDATION PROVIDES AN EDUCATION INITIATIVE, FOCUS, WHICH IS AN EIGHT-YEAR SCHOOL ENRICHMENT PROGRAMME DESIGNED TO SET UNDER-RESOURCED STUDENTS ON A PATH TO COLLEGE AND CAREER SUCCESS THROUGH WEEKEND AND SUMMER CLASSES. IN 2013, THE PROGRAMME HOSTED ONE HUNDRED SEVENTEEN (117) STUDENTS, AT A COST OF \$413,768.

(Code ) (Expenses \$ 83,856 including grants of \$ 0 ) (Revenue \$ 26,196 )

- SCHOLARSHIP ADMINISTRATION, SPECIAL PROJECTS, AND TIMEWORKS VOLUNTEER PROGRAM

4d

Other program services (Describe in Schedule O )

(Expenses \$ 83,856 including grants of \$ ) (Revenue \$ 26,196 )



















4e

Total program service expenses

2,010,115

Part IV

Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a	No
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e	No
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a Yes	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 	14b Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 	15 Yes	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules *(continued)*

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

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

☐

			Yes	No
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			1a	4
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			2a	0
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			2b	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	Yes
b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>			3b	Yes
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a	Yes
b If "Yes," enter the name of the foreign country <b>►</b> BF See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b	No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a	No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b	
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			7a	No
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c	No
d If "Yes," indicate the number of Forms 8282 filed during the year			7d	0
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e	No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f	No
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8	
9 Sponsoring organizations maintaining donor advised funds.				
a Did the organization make any taxable distributions under section 4966?			9a	
b Did the organization make a distribution to a donor, donor advisor, or related person?			9b	
10 Section 501(c)(7) organizations. Enter				
a Initiation fees and capital contributions included on Part VIII, line 12			10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			10b	
11 Section 501(c)(12) organizations. Enter				
a Gross income from members or shareholders			11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year			12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.				
a Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O			13a	
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			13b	
c Enter the amount of reserves on hand			13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?			14a	No
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>			14b	

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section A. Governing Body and Management

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

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

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	NY
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	MAUREEN FRENCH MANAGING DIRECTOR WESTERN ROADNASSAU, N P ,THE BAHAMASBF (242) 362-4910

Part VII

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

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

List all of the organization's **current** key employees, if any See instructions for definition of "key employee "

List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MR MANUEL J CUTILLAS CHAIRMAN	7 00	X		X				0	0	0
(2) MRS ALESSANDRA HOLOWESKO PRESIDENT	10 00	X		X				0	0	0
(3) MR FRANK J CROTHERS VICE CHAIR	7 00	X		X				0	0	0
(4) MRS SARAH A FARRINGTON VICE CHAIR	7 00	X		X				0	0	0
(5) MR BASIL P GOULANDRIS VICE CHAIR	7 00	X		X				0	0	0
(6) MR JEFFREY A EVERETT TREASURER	7 00	X		X				0	0	0
(7) MRS NORMA T DANA DIRECTOR	3 00	X						0	0	0
(8) MR PHILIPPE BONNEFOY DIRECTOR	3 00	X						0	0	0
(9) MRS DIANE DELANO DIRECTOR	3 00	X						0	0	0
(10) MR STUART W RAY DIRECTOR	1 00	X						0	0	0
(11) MR YVES LOURDIN DIRECTOR	3 00	X						0	0	0
(12) MRS KYLIE A NOTTAGE DIRECTOR	3 00	X						0	0	0
(13) MRS LYNN HOLOWESKO DIRECTOR	3 00	X						0	0	0
(14) MR HANS HERMAN HORN DIRECTOR	3 00	X						0	0	0
(15) MRS BETTY ROBERTS DIRECTOR	3 00	X						0	0	0
(16) MRS NANCY KELLY DIRECTOR	3 00	X						0	0	0
(17) MR ARTHUR D LITTLE DIRECTOR	3 00	X						0	0	0

Part VII

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) SIR ORVILLE TURNQUEST DIRECTOR	3 00	X						0	0	0
(19) MR ARTHUR FCOADY DIRECTOR	1 00	X						0	0	0
(20) MR T BRENT SYMONETTE DIRECTOR	1 00	X						0	0	0
(21) DR RUDOLPH CREW DIRECTOR	1 00	X						0	0	0
(22) MR ANTHONY ALLEN DIRECTOR	3 00	X						0	0	0
(23) MR PAUL SANDFORD DIRECTOR	3 00	X						0	0	0
(24) MR WILLIAM T HUNTER DIRECTOR	3 00	X						0	0	0
(25) MR ALEXANDER NEAVE SECRETARY	7 00			X				0	0	0
(26) MR E PARKER NEAVE ASSISTANT SECRETARY	7 00			X				0	0	0
<b>1b Sub-Total</b>										
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>								0	0	0

2

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

	Yes	No
3 Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	No
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.		
(A) Name and business address	(B) Description of services	(C) Compensation
MATHER LEIGH LIMITED RENE-LEVESQUE BOULEVARD WESTMONTREALQUEBEC	CONSULTING	117,087
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶1		

Part VIII

Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . . . .	1a			
	b	Membership dues . . . . .	1b			
	c	Fundraising events . . . . .	1c			
	d	Related organizations . . . . .	1d	50,000		
	e	Government grants (contributions)	1e	70,000		
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	2,026,361		
	g	Noncash contributions included in lines 1a-1f \$		31,233		
	h	Total. Add lines 1a-1f . . . . .		2,146,361		
Program Service Revenue	2a		Business Code			
	b					
	c					
	d					
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f . . . . .				
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . .		330,627	82
4		Income from investment of tax-exempt bond proceeds . . . . .				
5		Royalties . . . . .				
6a		Gross rents	(i) Real	(ii) Personal		
b		Less rental expenses				
c		Rental income or (loss)				
d		Net rental income or (loss) . . . . .				
7a		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
b		Less cost or other basis and sales expenses				
c		Gain or (loss)				
d		Net gain or (loss) . . . . .				
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .	a			
b		Less direct expenses . . . . .	b			
c		Net income or (loss) from fundraising events . . . . .				
9a		Gross income from gaming activities See Part IV, line 19 . . . . .	a			
b		Less direct expenses . . . . .	b			
c		Net income or (loss) from gaming activities . . . . .				
10a		Gross sales of inventory, less returns and allowances . . . . .	a			
b		Less cost of goods sold . . . . .	b			
c		Net income or (loss) from sales of inventory . . . . .				
Miscellaneous Revenue		Business Code				
11a		REIMBURSEMENTS	900099	26,196	26,196	
b	CLCF ADMIN FEES	561000	22,500	22,500		
c	LIONHEDGE K-1 UBTI	900099	5,891	5,891		
d	All other revenue . . . . .					
e	Total. Add lines 11a-11d . . . . .		54,587			
12	Total revenue. See Instructions . . . . .		3,008,742	26,196	38,071	798,114

Part IX

Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	567,745	567,745		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	782,663	782,663		
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages.	478,719	332,744	63,496	82,479
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	17,080	10,093	3,035	3,952
9	Other employee benefits.	54,717	39,012	7,729	7,976
10	Payroll taxes.	12,699	7,746	2,280	2,673
11	Fees for services (non-employees):				
a	Management.	155,972		155,972	
b	Legal.	13,286		13,286	
c	Accounting.	47,433		47,433	
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.	41,323		41,323	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).				
12	Advertising and promotion.	83,910	36,212	4,597	43,101
13	Office expenses.	47,513	18,016	20,806	8,691
14	Information technology.	77,480	10,948	66,532	
15	Royalties.				
16	Occupancy.	29,498	750	28,748	
17	Travel.	148	148		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	22,079	16,797	1,594	3,688
20	Interest.				
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.				
23	Insurance.	6,020	2,062	3,958	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O).				
a	FOOD	64,307	64,307		
b	TRANSPORTATION	54,465	54,465		
c	STUDENT SUPPLIES	39,280	39,280		
d	TEACHING SUPPLIES	22,389	22,389		
e	All other expenses	4,738	4,738		
25	<b>Total functional expenses.</b> Add lines 1 through 24e.	2,623,464	2,010,115	460,789	152,560
26	<b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

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

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing . . . . .			1,100,747	1	739,238
	2	Savings and temporary cash investments . . . . .			496,191	2	265,655
	3	Pledges and grants receivable, net . . . . .				3	
	4	Accounts receivable, net . . . . .				4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .				5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . . . . .				6	
	7	Notes and loans receivable, net . . . . .				7	
	8	Inventories for sale or use . . . . .				8	
	9	Prepaid expenses and deferred charges . . . . .			6,474	9	9,743
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a			10c	
	b	Less accumulated depreciation . . . . .	10b				
	11	Investments—publicly traded securities . . . . .			19,033,888	11	20,556,127
	12	Investments—other securities See Part IV, line 11 . . . . .			1,043,204	12	1,140,549
	13	Investments—program-related See Part IV, line 11 . . . . .				13	
	14	Intangible assets . . . . .				14	
	15	Other assets See Part IV, line 11 . . . . .			22,500	15	
16	Total assets. Add lines 1 through 15 (must equal line 34) . . . . .			21,703,004	16	22,711,312	
Liabilities	17	Accounts payable and accrued expenses . . . . .			53,748	17	75,060
	18	Grants payable . . . . .			375,454	18	241,141
	19	Deferred revenue . . . . .				19	
	20	Tax-exempt bond liabilities . . . . .				20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D . . . . .				21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . . . . .				22	
	23	Secured mortgages and notes payable to unrelated third parties . . . . .				23	
	24	Unsecured notes and loans payable to unrelated third parties . . . . .				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D . . . . .				25	
	26	Total liabilities. Add lines 17 through 25 . . . . .			429,202	26	316,201
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets . . . . .			19,485,414	27	20,496,279
	28	Temporarily restricted net assets . . . . .			1,788,388	28	1,898,832
	29	Permanently restricted net assets . . . . .				29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds . . . . .				30	
	31	Paid-in or capital surplus, or land, building or equipment fund . . . . .				31	
	32	Retained earnings, endowment, accumulated income, or other funds . . . . .				32	
	33	Total net assets or fund balances . . . . .			21,273,802	33	22,395,111
	34	Total liabilities and net assets/fund balances . . . . .			21,703,004	34	22,711,312

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI . . . . .

1	Total revenue (must equal Part VIII, column (A), line 12) . . . . .	1	3,008,742
2	Total expenses (must equal Part IX, column (A), line 25) . . . . .	2	2,623,464
3	Revenue less expenses Subtract line 2 from line 1 . . . . .	3	385,278
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .	4	21,273,802
5	Net unrealized gains (losses) on investments . . . . .	5	736,031
6	Donated services and use of facilities . . . . .	6	
7	Investment expenses . . . . .	7	
8	Prior period adjustments . . . . .	8	
9	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	22,395,111

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII . . . . .

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

SCHEDULE A  
(Form 990 or 990EZ)

Department of the  
Treasury  
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.  
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2013

Open to Public  
Inspection

Name of the organization LYFORD CAY FOUNDATION INC C/O PUTNEY TWOMBLY HALL & HIRSON	Employer identification number 23-7025275
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box )

1	<input type="checkbox"/>	A church, convention of churches, or association of churches described in <b>section 170(b)(1)(A)(i).</b>
2	<input type="checkbox"/>	A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E )
3	<input type="checkbox"/>	A hospital or a cooperative hospital service organization described in <b>section 170(b)(1)(A)(iii).</b>
4	<input type="checkbox"/>	A medical research organization operated in conjunction with a hospital described in <b>section 170(b)(1)(A)(iii).</b> Enter the hospital's name, city, and state _____
5	<input type="checkbox"/>	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in <b>section 170(b)(1)(A)(iv).</b> (Complete Part II )
6	<input type="checkbox"/>	A federal, state, or local government or governmental unit described in <b>section 170(b)(1)(A)(v).</b>
7	<input checked="" type="checkbox"/>	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in <b>section 170(b)(1)(A)(vi).</b> (Complete Part II )
8	<input type="checkbox"/>	A community trust described in <b>section 170(b)(1)(A)(vi)</b> (Complete Part II )
9	<input type="checkbox"/>	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See <b>section 509(a)(2).</b> (Complete Part III )
10	<input type="checkbox"/>	An organization organized and operated exclusively to test for public safety See <b>section 509(a)(4).</b>
11	<input type="checkbox"/>	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See <b>section 509(a)(3).</b> Check the box that describes the type of supporting organization and complete lines 11e through 11h <b>a</b> <input type="checkbox"/> Type I <b>b</b> <input type="checkbox"/> Type II <b>c</b> <input type="checkbox"/> Type III - Functionally integrated <b>d</b> <input type="checkbox"/> Type III - Non-functionally integrated
e	<input type="checkbox"/>	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
f	<input type="checkbox"/>	If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
g	<input type="checkbox"/>	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? <b>(i)</b> A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? <b>(ii)</b> A family member of a person described in (i) above? <b>(iii)</b> A 35% controlled entity of a person described in (i) or (ii) above?
h	<input type="checkbox"/>	Provide the following information about the supported organization(s)


	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)  
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	2,290,207	1,929,023	2,154,671	1,779,435	2,146,361	10,299,697
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	2,290,207	1,929,023	2,154,671	1,779,435	2,146,361	10,299,697
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,052,804
6 Public support. Subtract line 5 from line 4						9,246,893

Section B. Total Support							
Calendar year (or fiscal year beginning in) ▶		(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	2,290,207	1,929,023	2,154,671	1,779,435	2,146,361	10,299,697
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	523,307	531,387	434,237	376,954	330,545	2,196,430
9	Net income from unrelated business activities, whether or not the business is regularly carried on	6,487		83,675	39,034	38,701	167,897
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	10,203	10,400	19,883	20,110	26,196	86,792
11	<b>Total support</b> (Add lines 7 through 10)						12,750,816
12	Gross receipts from related activities, etc. (see instructions)					12	46,306
13	<b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and <b>stop here</b> . . . . . 						

Section C. Computation of Public Support Percentage			
14	Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	72 520 %
15	Public support percentage for 2012 Schedule A, Part II, line 14	15	71 210 %
16a	<b>33 1/3% support test—2013.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization		
b	<b>33 1/3% support test—2012.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization		
17a	<b>10%-facts-and-circumstances test—2013.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization		
b	<b>10%-facts-and-circumstances test—2012.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization		
18	<b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		

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

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6 )						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶		

Part IV

**Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test												
Return Reference		Explanation										
PART II, LINE 10		DESCRIPTION 2009 2010 2011 2012 2013 MISCELLANEOUS INCOME \$10,203 \$10,400 \$19,883 \$20,110 \$26,196										

SCHEDULE D  
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2013

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b**  
▶ **Attach to Form 990.** ▶ **See separate instructions.** ▶ **Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

<b>Name of the organization</b> LYFORD CAY FOUNDATION INC C/O PUTNEY TWOMBLY HALL & HIRSON	<b>Employer identification number</b>  23-7025275
--	---

Part I

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

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II

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

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area  
☐ Protection of natural habitat ☐ Preservation of a certified historic structure  
☐ Preservation of open space

2

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

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3

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

4

Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_ 0

5

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

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year  
▶ \_\_\_\_\_ 0 00

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year  
▶ \$ \_\_\_\_\_ 0

8

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

☐ Yes ☐ No

9

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

Part III

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

1a

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

b

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

(i) Revenues included in Form 990, Part VIII, line 1

▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X

▶ \$ \_\_\_\_\_

2

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

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ \_\_\_\_\_

b

Assets included in Form 990, Part X

▶ \$ \_\_\_\_\_

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

Cat No 52283D

Schedule D (Form 990) 2013

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

- 3

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

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other
- 4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5

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

☐ Yes

☐ No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a

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

☐ Yes

☐ No
- b

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

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance
- |    |        |
|----|--------|
|    | Amount |
| 1c |        |
| 1d |        |
| 1e |        |
| 1f |        |
- 2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No
- b

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

☐

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance . . . . .	1,788,388	1,639,732	1,737,910	1,582,247	1,361,958
b Contributions . . . . .					
c Net investment earnings, gains, and losses	166,663	204,636	-22,230	224,413	297,789
d Grants or scholarships . . . . .	52,500	52,500	72,500	68,750	77,500
e Other expenditures for facilities and programs . . . . .					
f Administrative expenses . . . . .	3,719	3,480	3,448		
g End of year balance . . . . .	1,898,832	1,788,388	1,639,732	1,737,910	1,582,247

- 2

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

Board designated or quasi-endowment ▶ 100 000 %
- b

Permanent endowment ▶ 0 %
- c

Temporarily restricted endowment ▶ 0 %
- The percentages in lines 2a, 2b, and 2c should equal 100%
- 3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- (i) unrelated organizations . . . . .

3a(i)

☐ Yes

☐ No

(ii) related organizations . . . . .

3a(ii)

☐ Yes

☐ No
- b

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

3b

☐

☐
- 4

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

**Part VI Land, Buildings, and Equipment.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

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



Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

1	Total revenue, gains, and other support per audited financial statements . . . . .	1	3,744,773
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments . . . . .	2a	736,031
b	Donated services and use of facilities . . . . .	2b	
c	Recoveries of prior year grants . . . . .	2c	
d	Other (Describe in Part XIII ) . . . . .	2d	
e	Add lines 2a through 2d . . . . .	2e	736,031
3	Subtract line 2e from line 1 . . . . .	3	3,008,742
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	
b	Other (Describe in Part XIII ) . . . . .	4b	
c	Add lines 4a and 4b . . . . .	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 ) . . . . .	5	3,008,742

Part XII

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

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

1	Total expenses and losses per audited financial statements . . . . .	1	2,623,464
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities . . . . .	2a	
b	Prior year adjustments . . . . .	2b	
c	Other losses . . . . .	2c	
d	Other (Describe in Part XIII ) . . . . .	2d	
e	Add lines 2a through 2d . . . . .	2e	0
3	Subtract line 2e from line 1 . . . . .	3	2,623,464
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	
b	Other (Describe in Part XIII ) . . . . .	4b	
c	Add lines 4a and 4b . . . . .	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 ) . . . . .	5	2,623,464

Part XIII

Supplemental Information

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

Return Reference	Explanation
PART V, LINE 4	LYFORD CAY FOUNDATION, INC HAS TWO (2) BOARD-DESIGNATED ENDOWMENT FUNDS BOTH ENDOWMENT FUNDS ARE INTENDED TO PROVIDE SCHOLARSHIPS TO BAHAMIAN STUDENTS SEEKING HIGHER EDUCATION (1) EXCELLENCE SCHOLARSHIP FUND - THIS FUND PROVIDES ANNUAL ACADEMIC SCHOLARSHIPS OF UP TO \$10,000, WHICH ARE RESERVED FOR EXCEPTIONAL BAHAMIAN STUDENTS ENROLLED IN COLLEGES AND UNIVERSITIES IN THE UNITED STATES OR CANADA WHOSE PARTICULAR FIELD OF STUDY IS EXPECTED TO CONTRIBUTE SIGNIFICANTLY TO THE BETTERMENT OF THE BAHAMAS THE SCHOLARSHIP IS BASED ON A SELECTED DISCIPLINE RECIPIENTS ARE REQUIRED TO CONTINUE IN THEIR APPROVED MAJOR FOR THE DURATION OF THE SCHOLARSHIP THE FOLLOWING FIELDS OF STUDY ARE ELIGIBLE FOR AWARDS AGRICULTURE, ENGINEERING, ARCHITECTURE, ECONOMICS, MARINE DESIGN / CONSTRUCTION, MANUFACTURING SYSTEMS, AND EDUCATION RECIPIENTS MUST CONTRIBUTE AT LEAST 12 5% OF THE TOTAL COST OF THEIR EDUCATION AND MAY APPLY A GRANT OR SCHOLARSHIP FROM THE COLLEGE OR UNIVERSITY TOWARD THE REMAINING CONTRIBUTORY FUNDS REQUIREMENT DISBURSEMENT FROM THE FUND IS LIMITED TO \$30,000 PER YEAR PLUS 9% OF THE CONTRIBUTIONS ADDED TO THE CAPITAL OF THE FUND THE FUND MUST BE INVESTED IN NOT LESS THAN 50% EQUITIES AND / OR MUTUAL FUNDS PUBLICLY TRADED IN THE UNITED STATES OR CANADA (2) HAROLD W SIEBENS TECHNICAL SCHOLARSHIP FUND - THIS FUND PROVIDES ANNUAL SCHOLARSHIPS OF \$7,500 EACH TOWARDS THE TUITION OF BAHAMIAN STUDENTS ENROLLING IN CAREER SCHOOLS AND COLLEGES OF TECHNOLOGY OUTSIDE THE COMMONWEALTH OF THE BAHAMAS ELIGIBLE RECIPIENTS MUST PROVIDE PROOF OF ACADEMIC PROFICIENCY, FINANCIAL NEED, POSITIVE PERSONAL QUALITIES (I E INTEREST, SERIOUSNESS OF PURPOSE, DETERMINATION, COMMITMENT, LEADERSHIP, COMMUNITY INVOLVEMENT, ETC ), QUALITY OF THE PROPOSED SCHOOL OR COLLEGE, AND APPROPRIATENESS OF THE PROJECTED FIELD OF STUDY, WHICH MUST BE VALUABLE IN SERVING THE NEEDS OF THE BAHAMAS, INCLUDING FIELDS OF STUDY SUCH AS AGRICULTURE AND FISHERIES, AIR CONDITIONING AND REFRIGERATION, AUTOMOTIVE, MARINE AND AVIATION MECHANICS, CONSTRUCTION AND RELATED TRADES, HEAVY EQUIPMENT OPERATION, MACHINE SHOP, COMPUTER SERVICE TECHNOLOGY, HOSPITALITY AND TOURISM, AND HEALTH CARE TECHNOLOGY DISTRIBUTION FROM THE FUND IS UP TO AN AMOUNT EQUAL TO THE LESSER OF (A) 25% OF THE VALUE OF ALL TECHNICAL SCHOLARSHIP AWARDS DURING EACH YEAR FROM SOURCES OTHER THAN THE FUND FOR TECHNICAL TRAINING OUTSIDE OF THE BAHAMAS, OR (B) 5% OF THE AVERAGE MARKET VALUE OF THE FUND AT DECEMBER 31 OVER THE PREVIOUS THREE-YEAR PERIOD
PART X, LINE 2	IN JULY 2006, THE FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ISSUED FINANCIAL INTERPRETATION (FIN) 48, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES - AN INTERPRETATION OF FASB STATEMENT NO 109, WHICH CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN THE FINANCIAL STATEMENTS IN ACCORDANCE WITH FASB STATEMENT NO 109, ACCOUNTING FOR INCOME TAXES AS OF JULY 1, 2009, FASB LAUNCHED THE FASB ACCOUNTING STANDARDS CODIFICATION (ASC) THUS "FIN 48" IS NOW CLASSIFIED AS "ASC 740 " ASC 740 PROVIDES THAT A TAX BENEFIT FROM AN UNCERTAIN TAX POSITION MAY BE RECOGNIZED WHEN IT IS MORE LIKELY THAN NOT THAT THE POSITION WILL BE SUSTAINED UPON EXAMINATION, INCLUDING RESOLUTIONS OF ANY RELATED APPEALS OR LITIGATION PROCESSES, BASED ON THE TECHNICAL MERITS INCOME TAX POSITIONS MUST MEET A MORE LIKELY- THAN-NOT RECOGNITION THRESHOLD AT THE EFFECTIVE DATE TO BE RECOGNIZED UPON THE ADOPTION OF ASC 740 AND IN SUBSEQUENT PERIODS THIS INTERPRETATION ALSO PROVIDES GUIDANCE ON MEASUREMENT, DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, ACCOUNTING IN INTERIM PERIODS, DISCLOSURE AND TRANSITION FOR NON-PUBLIC ENTITIES, ASC 740 WAS EFFECTIVE FOR YEARS BEGINNING AFTER DECEMBER 15, 2007 FOR ELIGIBLE ENTERPRISES, INCLUDING NON-PROFIT ORGANIZATIONS, FSP FIN 48-3 DEFERRED THE EFFECTIVE DATE TO ANNUAL PERIODS BEGINNING AFTER DECEMBER 15, 2008 ALTHOUGH ASC 740 IS PRIMARILY DIRECTED AT TAXABLE BUSINESS ENTERPRISES, A TAX POSITION MAY INCLUDE THE CHARACTERIZATION OF INCOME AS TAX EXEMPT (RELATED OR EXCLUDED EXEMPT FUNCTION INCOME AS DESCRIBED IN IRC 5L2(A)-(B)) AND/OR TAXABLE AS UNRELATED BUSINESS INCOME UNDER IRC 511(A) FOR PRIVATE FOUNDATIONS, A TAX POSITION MAY ALSO INCLUDE THE CHARACTERIZATION OF INCOME AND EXPENSES AS NET INVESTMENT INCOME SUBJECT TO EXCISE TAX UNDER IRC 4940(A) LYFORD CAY FOUNDATION, INC HAS ADOPTED ASC 740 EFFECTIVE THE TAX YEAR BEGINNING JANUARY 1, 2009 LYFORD CAY FOUNDATION, INC HAS EVALUATED THE EFFECT OF THE STANDARD AND HAS DETERMINED THAT THE ADOPTION OF ASC 740 WILL HAVE NO SIGNIFICANT IMPACT ON ITS FINANCIAL STATEMENTS IN THE EVENT LYFORD CAY FOUNDATION, INC WERE TO RECOGNIZE INTEREST AND PENALTIES RELATED TO UNCERTAIN TAX POSITIONS, IT WOULD BE RECOGNIZED IN THE FINANCIAL STATEMENTS AS AN INCOME TAX EXPENSE TAX YEARS 2008 THROUGH 2012 ARE OPEN TO EXAMINATION BY THE FEDERAL AND STATE TAXING AUTHORITIES, RESPECTIVELY THERE ARE NO INCOME TAX EXAMINATIONS CURRENTLY IN PROCESS

[illegible]

SCHEDULE F  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,  
Part IV, line 14b, 15, or 16.  
► Attach to Form 990. ► See separate instructions.  
► Information about Schedule F (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization  
LYFORD CAY FOUNDATION INC  
C/O PUTNEY TWOMBLY HALL & HIRSON

Employer identification number  
23-7025275

Part I

General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☒ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed )

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
( 1 ) See Add'l Data					
( 2 )					
( 3 )					
( 4 )					
( 5 )					
3a Sub-total	3	18			2,017,477
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	3	18			2,017,477

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
( 1 )	See Add'l Data								
( 2 )									
( 3 )									
( 4 )									
( 5 )									
( 6 )									
( 7 )									
( 8 )									
( 9 )									
( 10 )									
( 11 )									
( 12 )									
( 13 )									
( 14 )									
( 15 )									
( 16 )									

2

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . ▶

40

3

Enter total number of other organizations or entities . . . . . ▶

42

Part III

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
( 1 )							
( 2 )							
( 3 )							
( 4 )							
( 5 )							
( 6 )							
( 7 )							
( 8 )							
( 9 )							
( 10 )							
( 11 )							
( 12 )							
( 13 )							
( 14 )							
( 15 )							
( 16 )							
( 17 )							
( 18 )							

**Part IV Foreign Forms**

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☐

Yes

☒

No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)*

☐

Yes

☒

No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*

☐

Yes

☒

No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*

☐

Yes

☒

No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*

☐

Yes

☒

No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).*

☐

Yes

☒

No

**Part V Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

**990 Schedule F, Supplemental Information**

Return Reference	Explanation
PART I, LINE 2	<p>THE LYFORD CAY FOUNDATION, INC. MONITORS THE GRANTS IT MAKES TO SCHOLARSHIP RECIPIENTS BY REMITTING THE SCHOLARSHIP FUNDS DIRECTLY TO THE INSTITUTION OF HIGHER LEARNING. NO FURTHER FOLLOW-UP IS REQUIRED, AS THE SCHOLARSHIP GRANT IS AUTOMATICALLY APPLIED AGAINST THE STUDENT'S TUITION. SCHOLARSHIP CRITERIA INCLUDE: - MUST BE A BAHAMIAN CITIZEN AND PROVIDE VERIFICATION OF SAME, - MUST BE ACCEPTED AT THE COLLEGE OR UNIVERSITY, - MUST HAVE A MINIMUM GPA OF 3.0 OUT OF A POSSIBLE 4.0 OR EQUIVALENT, - MUST SUBMIT A COMPLETE ONLINE APPLICATION WITH ALL SUPPORTING DOCUMENTATION INCLUDING VERIFICATION OF FAMILY FINANCIAL RESOURCES, TWO (2) LETTERS OF RECOMMENDATION, A CURRENT RESUME, TWO (2) PERSONAL ESSAYS AND COPIES OF SCHOOL TRANSCRIPTS AND RELEVANT EXAMINATION RESULTS. THE SELECTION PROCESS IS AS FOLLOWS: (I) ALL SUBMITTED APPLICATIONS ARE REVIEWED. (II) NOTICEABLY WEAK CANDIDATES AND INCOMPLETE APPLICATIONS ARE ELIMINATED. (III) SELECTION AMONG THE REMAINING CANDIDATES IS WEIGHTED AS FOLLOWS: - ACADEMIC MERIT - 35% - FINANCIAL NEED - 35% - THE CALIBER OF THE PROPOSED COLLEGE OR UNIVERSITY - 10% - THE FIELD OF STUDY - 10% - THE CANDIDATE'S PERSONAL QUALITIES - 10%. (IV) PRIORITY IS GIVEN TO THE FIELDS OF STUDY CONSIDERED MOST VALUABLE IN SERVING THE ECONOMIC AND SOCIAL NEEDS OF THE BAHAMAS. (V) FINANCIAL RESOURCES ARE CONSIDERED, INCLUDING THE COST OF ATTENDANCE AT THE PROPOSED COLLEGE OR UNIVERSITY AND OTHER SCHOLARSHIP AWARDS AND GRANTS RECEIVED BY THE APPLICANT. (VI) THE CALIBER OF THE INSTITUTION OF CHOICE, AND (VII) CANDIDATE'S PERSONAL QUALITIES, INCLUDING HIS OR HER LEADERSHIP SKILLS, LEVEL OF COMMITMENT TO THE COMMUNITY, ABILITY TO THINK CLEARLY ABOUT PERSONAL STRENGTHS AND GOALS, MOTIVATION AND THE POTENTIAL TO SUCCEED IN COLLEGE. AN INDEPENDENT SCREENING COMMITTEE OF LOCAL PROFESSIONALS IS RESPONSIBLE FOR MAKING RECOMMENDATIONS ON CANDIDATES TO RECEIVE SCHOLARSHIPS. TO QUALIFY FOR SCHOLARSHIP RENEWAL, RECIPIENTS ARE REQUIRED TO SUBMIT AN OFFICIAL TRANSCRIPT SHOWING THAT THEY HAVE MAINTAINED THE MINIMUM GPA REQUIREMENTS FOR THEIR SCHOLARSHIP TYPE (I.E. UNDERGRADUATE - 3.0, GRADUATE - 3.5, AND TECHNICAL &amp; VOCATIONAL - 2.75). EFFECTIVE 2008, SCHOLARSHIP RECIPIENTS ARE ALSO REQUIRED TO: (I) SUBMIT A WRITTEN PERSONAL EVALUATION OF THEIR ACADEMIC YEAR, (II) COMPLETE TWENTY (20) HOURS OF VOLUNTEER COMMUNITY SERVICE, AND (III) COMPLETE, ON AN ANNUAL BASIS, A COST OF ATTENDANCE FORM DETAILING THEIR EDUCATIONAL EXPENSES, OTHER SCHOLARSHIP AWARDS AND GRANTS, ETC. GRANTS ARE MADE WITH THE UNDERSTANDING THAT THE RECIPIENT WILL RETURN TO LIVE AND WORK IN THE BAHAMAS WHEN HIS OR HER EDUCATION HAS BEEN COMPLETED.</p>

Additional Data

Software ID:  
Software Version:  
EIN: 23-7025275  
Name: LYFORD CAY FOUNDATION INC  
C/O PUTNEY TWOMBLY HALL & HIRSON

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA & THE CARIBBEAN	1	6	GRANT-MAKING	GRANTS FOR COMMUNITY IMPROVEMENT	583,314
CENTRAL AMERICA & THE CARIBBEAN	1	6	PROGRAM SERVICES	ADMINISTRATIVE EXPENSES	1,078,841
CENTRAL AMERICA & THE CARIBBEAN	1	6	PROGRAM SERVICES	EDUCATION ASSISTANCE	22,500

**Form 990 Schedule F Part I - Activities Outside The United States**

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA	0	0	PROGRAM SERVICES	EDUCATION ASSISTANCE	99,349
NORTH AMERICA	0	0	PROGRAM SERVICES	ADMINISTRATIVE EXPENSES	155,973
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	EDUCATION ASSISTANCE	70,000

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	EDUCATION ASSISTANCE	7,500

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA & THE CARIBBEAN	GRANT ASSISTANCE FOR LUNCH AND LITERACY PROGRAMS	44,850	CHECK		N/A	FMV
		CENTRAL AMERICA & THE CARIBBEAN	GRANT ASSISTANCE FOR BUTTERFLY & MOTH COLLECTION	4,500	CHECK		N/A	FMV
		CENTRAL AMERICA & THE CARIBBEAN	GRANT ASSISTANCE FOR OPERATING SUPPORT	12,500	CHECK		N/A	FMV
		CENTRAL AMERICA & THE CARIBBEAN	GRANT ASSISTANCE FOR OPERATING SUPPORT	10,000	CHECK		N/A	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA & THE CARIBBEAN	GRANT ASSISTANCE FOR OPERATING SUPPORT	11,250	CHECK		N/A	FMV
		CENTRAL AMERICA & THE CARIBBEAN	GRANT ASSISTANCE FOR OPERATING SUPPORT	2,000	CHECK		N/A	FMV
		CENTRAL AMERICA & THE CARIBBEAN	GRANT ASSISTANCE FOR 2013 BASKETBALL SUMMER CAMP	10,000	CHECK		N/A	FMV
		CENTRAL AMERICA & THE CARIBBEAN	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION	237,614	CHECK		N/A	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA & THE CARIBBEAN	GRANT ASSISTANCE FOR COMPUTER & E-LEARNING PROGRAM SOFTWARE	2,500	CHECK		N/A	FMV
		CENTRAL AMERICA & THE CARIBBEAN	GRANT ASSISTANCE FOR FINANCIALLY-CHALLENGED FAMILIES	15,000	CHECK		N/A	FMV
		CENTRAL AMERICA & THE CARIBBEAN	GRANT ASSISTANCE FOR UNIFORMS & SCHOOL SUPPLIES	7,500	CHECK		N/A	FMV
		CENTRAL AMERICA & THE CARIBBEAN	SCHOLARSHIP ASSISTANCE	132,500	CHECK		N/A	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA & THE CARIBBEAN	GRANT ASSISTANCE FOR OPERATING SUPPORT	3,200	CHECK		N/A	FMV
		CENTRAL AMERICA & THE CARIBBEAN	PARTIAL SCHOLARSHIP PROGRAMME	39,500	CHECK		N/A	FMV
		CENTRAL AMERICA & THE CARIBBEAN	GRANT ASSISTANCE FOR OPERATING SUPPORT	5,000	CHECK		N/A	FMV
		CENTRAL AMERICA & THE CARIBBEAN	SUMMER 2012 THE EAGLES ACADEMY (TEA)	7,500	CHECK		N/A	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA & THE CARIBBEAN	GRANT ASSISTANCE FOR OPERATING SUPPORT	2,000	CHECK		N/A	FMV
		CENTRAL AMERICA & THE CARIBBEAN	GRANT ASSISTANCE FOR OPERATING SUPPORT	5,000	CHECK		N/A	FMV
		CENTRAL AMERICA & THE CARIBBEAN	PARTIAL SCHOLARSHIP PROGRAMME	5,000	CHECK		N/A	FMV
		CENTRAL AMERICA & THE CARIBBEAN	GRANT ASSISTANCE FOR OPERATING SUPPORT	5,000	CHECK		N/A	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA & THE CARIBBEAN	GRANT ASSISTANCE FOR OPERATING SUPPORT	3,400	CHECK		N/A	FMV
		CENTRAL AMERICA & THE CARIBBEAN	GRANT ASSISTANCE FOR OPERATING SUPPORT	10,000	CHECK		N/A	FMV
		CENTRAL AMERICA & THE CARIBBEAN	GRANT ASSISTANCE FOR 2013 ECO-FISHING CAMP	7,500	CHECK		N/A	FMV
		CENTRAL AMERICA & THE CARIBBEAN	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION	22,500	CHECK		N/A	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION	7,500	CHECK		N/A	FMV
		NORTH AMERICA	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION	7,383	CHECK		N/A	FMV
		NORTH AMERICA	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION	3,750	CHECK		N/A	FMV
		NORTH AMERICA	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION	7,500	CHECK		N/A	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION	15,000	CHECK		N/A	FMV
		NORTH AMERICA	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION	7,500	CHECK		N/A	FMV
		NORTH AMERICA	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION	20,000	CHECK		N/A	FMV
		NORTH AMERICA	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION	10,000	CHECK		N/A	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION	7,383	CHECK		N/A	FMV
		NORTH AMERICA	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION	13,333	CHECK		N/A	FMV
		EUROPE (INCLUDING ICELAND & GREENLAND)	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION	20,000	CHECK		N/A	FMV
		EUROPE (INCLUDING ICELAND & GREENLAND)	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION	7,500	CHECK		N/A	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION	7,500	CHECK		N/A	FMV
		EUROPE (INCLUDING ICELAND & GREENLAND)	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION	35,000	CHECK		N/A	FMV
		MIDDLE EAST & NORTH AFRICA	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION	7,500	CHECK		N/A	FMV
		CENTRAL AMERICA & THE CARIBBEAN	SCHOOL ENRICHMENT PROGRAMME EXPENSES	413,768	CHECK		N/A	FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

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		CENTRAL AMERICA & THE CARIBBEAN	EXPENSES RELATED TO PROVIDING PROGRAM SERVICES	245,938	CHECK		N/A	FMV
		CENTRAL AMERICA & THE CARIBBEAN	GENERAL & ADMINISTRATIVE EXPENSES	419,135	CHECK		N/A	FMV
		NORTH AMERICA	CONSULTING SERVICES	38,886	CHECK		N/A	FMV
		NORTH AMERICA	CONSULTING SERVICES	117,087	CHECK		N/A	FMV

Schedule I  
(Form 990)

Grants and Other Assistance to Organizations,  
Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2013

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization  
LYFORD CAY FOUNDATION INC  
C/O PUTNEY TWOMBLY HALL & HIRSON

Employer identification number  
23-7025275

Part I

General Information on Grants and Assistance

- 1

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

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

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

41

3

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

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV

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

Return Reference	Explanation
PART I, LINE 2	THE LYFORD CAY FOUNDATION, INC MONITORS THE GRANTS IT MAKES TO SCHOLARSHIP RECIPIENTS BY REMITTING THE SCHOLARSHIP FUNDS DIRECTLY TO THE INSTITUTION OF HIGHER LEARNING NO FURTHER FOLLOW-UP IS REQUIRED, AS THE SCHOLARSHIP GRANT IS AUTOMATICALLY APPLIED AGAINST THE STUDENT'S TUITION SCHOLARSHIP CRITERIA INCLUDE - MUST BE A BAHAMIAN CITIZEN AND PROVIDE VERIFICATION OF SAME, - MUST BE ACCEPTED AT THE COLLEGE OR UNIVERSITY, - MUST HAVE A MINIMUM GPA OF 3 0 OUT OF A POSSIBLE 4 0 OR EQUIVALENT, - MUST SUBMIT A COMPLETE ONLINE APPLICATION WITH ALL SUPPORTING DOCUMENTATION INCLUDING VERIFICATION OF FAMILY FINANCIAL RESOURCES, TWO (2) LETTERS OF RECOMMENDATION, A CURRENT RESUME, TWO (2) PERSONAL ESSAYS AND COPIES OF SCHOOL TRANSCRIPTS AND RELEVANT EXAMINATION RESULTS THE SELECTION PROCESS IS AS FOLLOWS (I) ALL SUBMITTED APPLICATIONS ARE REVIEWED (II) NOTICEABLY WEAK CANDIDATES AND INCOMPLETE APPLICATIONS ARE ELIMINATED (III) SELECTION AMONG THE REMAINING CANDIDATES IS WEIGHTED AS FOLLOWS - ACADEMIC MERIT - 35% - FINANCIAL NEED - 35% - THE CALIBER OF THE PROPOSED COLLEGE OR UNIVERSITY - 10% - THE FIELD OF STUDY - 10% - THE CANDIDATE'S PERSONAL QUALITIES - 10% (IV) PRIORITY IS GIVEN TO THE FIELDS OF STUDY CONSIDERED MOST VALUABLE IN SERVING THE ECONOMIC AND SOCIAL NEEDS OF THE BAHAMAS (V) FINANCIAL RESOURCES ARE CONSIDERED, INCLUDING THE COST OF ATTENDANCE AT THE PROPOSED COLLEGE OR UNIVERSITY AND OTHER SCHOLARSHIP AWARDS AND GRANTS RECEIVED BY THE APPLICANT (VI) THE CALIBER OF THE INSTITUTION OF CHOICE,AND (VII) CANDIDATE'S PERSONAL QUALITIES, INCLUDING HIS OR HER LEADERSHIP SKILLS, LEVEL OF COMMITMENT TO THE COMMUNITY, ABILITY TO THINK CLEARLY ABOUT PERSONAL STRENGTHS AND GOALS, MOTIVATION AND THE POTENTIAL TO SUCCEED IN COLLEGE AN INDEPENDENT SCREENING COMMITTEE OF LOCAL PROFESSIONALS IS RESPONSIBLE FOR MAKING RECOMMENDATIONS ON CANDIDATES TO RECEIVE SCHOLARSHIPS TO QUALIFY FOR SCHOLARSHIP RENEWAL, RECIPIENTS ARE REQUIRED TO SUBMIT AN OFFICIAL TRANSCRIPT SHOWING THAT THEY HAVE MAINTAINED THE MINIMUM GPA REQUIREMENTS FOR THEIR SCHOLARSHIP TYPE (I E UNDERGRADUATE - 3 0, GRADUATE - 3 5, AND TECHNICAL & VOCATIONAL - 2 75) EFFECTIVE 2008, SCHOLARSHIP RECIPIENTS ARE ALSO REQUIRED TO (I) SUBMIT A WRITTEN PERSONAL EVALUATION OF THEIR ACADEMIC YEAR, (II) COMPLETE TWENTY (20) HOURS OF VOLUNTEER COMMUNITY SERVICE, AND (III) COMPLETE, ON AN ANNUAL BASIS, A COST OF ATTENDANCE FORM DETAILING THEIR EDUCATIONAL EXPENSES, OTHER SCHOLARSHIP AWARDS AND GRANTS, ETC GRANTS ARE MADE WITH THE UNDERSTANDING THAT THE RECIPIENT WILL RETURN TO LIVE AND WORK IN THE BAHAMAS WHEN HIS OR HER EDUCATION HAS BEEN COMPLETED

Additional Data

Software ID:  
Software Version:  
EIN: 23-7025275  
Name: LYFORD CAY FOUNDATION INC  
C/O PUTNEY TWOMBLY HALL & HIRSON

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BELOIT COLLEGE 700 COLLEGE STREET BELOIT,WI 535115595	39-0808497	501(C)(3)	7,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BETHUNE-COOKMAN UNIVERSITY 640 DR MARY MCLEOD BETHUNE BOULEVARD DAYTONA BEACH, FL 321143099	59-0704726	501(C)(3)	7,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALIFORNIA MARITIME ACADEMY 200 MARITIME ACADEMY DRIVE VALLEJO,CA 94590	23-7213404	501(C)(3)	7,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLUMBIA THEOLOGICAL SEMINARY 701 SOUTH COLUMBIA DRIVE DECATUR,GA 30030	58-0566165	501(C)(3)	13,333	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DREXEL UNIVERSITY 3141 CHESTNUT STREET PHILADELPHIA, PA 19104	23-1352630	501(C)(3)	7,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EAST CENTRAL UNIVERSITY 1100 EAST 14TH STREET ADA, OK 748206999	23-7058908	501(C)(3)	7,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FLORIDA INTERNATIONAL UNIVERSITY 11200 SW 8TH STREET MIAMI, FL 33174	65-0177616	501(C)(3)	32,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HARVARD UNIVERSITY 1350 MASSACHUSETTS AVENUE CAMBRIDGE, MA 02138	53-0199180	501(C)(3)	10,000	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

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JOHNS HOPKINS UNIVERSITY 3400 NORTH CHARLES STREET BALTIMORE, MD 212181683	52-0595110	501(C)(3)	35,000	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KETTERING UNIVERSITY 1700 UNIVERSITY AVENUE FLINT, MI 485046214	38-2410852	501(C)(3)	15,000	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MESSIAH COLLEGE 1 COLLEGE AVENUE SUITE 3010 MECHANICSBURG,PA 170556805	23-1352661	501(C)(3)	7,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NOVA SOUTHEASTERN UNIVERSITY 3301 COLLEGE AVENUE FORT LAUDERDALE FL 333147796	59-1083502	501(C)(3)	7,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RHODE ISLAND SCHOOL OF DESIGN 2 COLLEGE STREET PROVIDENCE, RI 029032717	05-0258956	501(C)(3)	7,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ROBERT MORRIS UNIVERSITY 6001 UNIVERSITY BOULEVARD PITTSBURGH,PA 15108	25-1120678	501(C)(3)	7,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SALISBURY UNIVERSITY 1101 CAMDEN AVENUE SALISBURY,MD 218012195	52-6002033	501(C)(3)	7,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAMFORD UNIVERSITY 800 LAKESHORE DRIVE BIRMINGHAM, AL 352290001	63-0312914	501(C)(3)	7,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STATE UNIVERSITY OF NEW YORK MARITIME COLLEGE 6 PENNYFIELD AVENUE THROGGS NECK, NY 10465	51-0180576	501(C)(3)	7,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEMPLE UNIVERSITY 1801 NORTH BROAD STREET PHILADELPHIA, PA 191226094	23-1365971	501(C)(3)	10,000	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TENNESSEE TECHNOLOGICAL UNIVERSITY 1 WILLIAM L JONES DRIVE COOKEVILLE,TN 38505	59-1712030	501(C)(3)	7,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF LOUISVILLE THE 2301 SOUTH 3RD STREET LOUISVILLE, KY 40292	61-1014882	501(C)(3)	20,000	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF MIAMI THE 1320 SOUTH DIXIE HIGHWAY CORAL GABLES, FL 331462926	59-0624458	501(C)(3)	7,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF NORTH CAROLINA AT CHARLOTTE THE 9201 UNIVERSITY CITY BOULEVARD CHARLOTTE, NC 282230001	56-0791228	501(C)(3)	7,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VANDERBILT UNIVERSITY 2201 WEST END AVENUE NASHVILLE, TN 37235	62-0476822	501(C)(3)	20,000	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YALE UNIVERSITY SACHEM STREET NEW HAVEN, CT 06520	06-0646973	501(C)(3)	30,000	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DARTON STATE COLLEGE 2400 GILLIONVILLE ROAD ALBANY,GA 317073023	23-7320363	501(C)(3)	7,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DAYTONA STATE COLLEGE 1200 WEST INTERNATIONAL SPEEDWAY BOULEVARD DAYTONA BEACH,FL 321142817	59-1211226	501(C)(3)	7,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DEVRY UNIVERSITY 4000 MILLENIA BOULEVARD ORLANDO,FL 32839	36-2781982	501(C)(3)	7,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DUTCHESS COMMUNITY COLLEGE 53 PENDELL ROAD POUGHKEEPSIE, NY 12601	14-1756293	501(C)(3)	15,000	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FERRIS STATE UNIVERSITY 1201 SOUTH STATE STREET BIG RAPIDS, MI 493072020	38-6005159	501(C)(3)	7,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FULL SAIL UNIVERSITY 3300 UNIVERSITY BOULEVARD WINTER PARK, FL 32792	59-2111456	501(C)(3)	7,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LINCOLN COLLEGE OF TECHNOLOGY 2410 METROCENTRE BOULEVARD WEST PALM BEACH, FL 33407	59-2420433	501(C)(3)	30,000	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARINE MECHANICS INSTITUTE 9751 DELEGATES DRIVE ORLANDO, FL 32837	86-0329466	501(C)(3)	25,000	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MINOT STATE UNIVERSITY 500 UNIVERSITY AVENUE WEST MINOT, ND 587070001	45-6002481	501(C)(3)	7,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW ENGLAND INSTITUTE OF TECHNOLOGY 1 NEW ENGLAND TECH BOULEVARD EAST GREENWICH, RI 028181258	05-0312747	501(C)(3)	30,000	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW YORK INSTITUTE OF TECHNOLOGY NORTHERN BOULEVARD OLD WESTBURY, NY 11568	11-1788788	501(C)(3)	15,000	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TULSA WELDING SCHOOL 3500 SOUTHSIDE BOULEVARD JACKSONVILLE,FL 32216	59-3708228	501(C)(3)	15,000	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLARKSON UNIVERSITY 8 CLARKSON AVENUE POTSDAM, NY 136990001	15-0543659	501(C)(3)	10,000	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF ARKANSAS THE 1125 WEST MAPLE STREET FAYETTEVILLE, AR 72701	71-6056774	501(C)(3)	10,000	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JOHNSON & WALES UNIVERSITY 8 ABBOTT PARK PLACE PROVIDENCE, RI 029033703	05-0306206	501(C)(3)	7,500	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLLEGE OF SAINT BENEDICT THE 31802 COUNTY ROAD COLLEGEVILLE, MN 56321	41-0969244	501(C)(3)	29,829	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANDREWS UNIVERSITY 8975 US HIGHWAY 31 BERRIEN SPRINGS,MI 49104	38-1627600	501(C)(3)	33,333	0	FMV	N/A	SCHOLARSHIP ASSISTANCE FOR POST-SECONDARY EDUCATION

SCHEDULE M  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.  
▶ Attach to Form 990.

▶Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization  
LYFORD CAY FOUNDATION INC  
C/O PUTNEY TWOMBLY HALL & HIRSON

Employer identification number  
  
23-7025275

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	22	31,233	OTHER
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ▶ ( )				
26 Other ▶( )				
27 Other ▶( )				
28 Other ▶ ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .

29

0

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .

30a

No

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .

32a

Yes

b If "Yes," describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Part II

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, COLUMN (B)	THE AMOUNT REPRESENTS TWO (2) SEPARATE CONTRIBUTIONS BY TWO (2) SEPARATE DONORS, I E ONE (1) CONTRIBUTION PER DONOR
PART I, LINE 32B	THE FOUNDATION'S INVESTMENTS ARE HELD WITH AN INVESTMENT ADVISOR, FUND EVALUATION GROUP (FEG) DONATIONS OF STOCK ARE RECEIVED INTO THE FOUNDATION'S INVESTMENT ACCOUNTS AND, SUBSEQUENTLY, SOLD ON THE DAY RECEIVED

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
▶ Attach to Form 990 or 990-EZ.  
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at  
[www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2013

Open to Public  
Inspection

Name of the organization  
LYFORD CAY FOUNDATION INC  
C/O PUTNEY TWOMBLY HALL & HIRSON

Employer identification number  
23-7025275

Return Reference	Explanation
FORM 990, PART I LINE 1	LYFORD CAY FOUNDATION, INC SUPPORTS THE DEVELOPMENT OF THE BAHAMAS BY INVESTING ITS RESOURCES DIRECTLY IN PHILANTHROPIC INITIATIVES, INCLUDING POST-SECONDARY EDUCATION, THE SUPPORT OF BAHAMIAN NOT-FOR-PROFIT ORGANIZATIONS AND THE PREPARATION OF BAHAMIAN STUDENTS FOR POST-SECONDARY OPPORTUNITIES

Return Reference	Explanation
FORM 990, PART III LINE 1	LYFORD CAY FOUNDATION, INC SUPPORTS THE DEVELOPMENT OF THE BAHAMAS BY INVESTING ITS RESOURCES DIRECTLY IN PHILANTHROPIC INITIATIVES THE FOUNDATION'S PRIMARY MEANS OF ACHIEVING THIS AIM IS VIA THE AWARDING OF SCHOLARSHIPS FOR POST-SECONDARY EDUCATION AND TECHNICAL TRAINING, THE SUPPORT OF BAHAMIAN NOT-FOR-PROFIT CHARITABLE ORGANIZATIONS TARGETING THE EMOTIONAL, EDUCATIONAL AND RECREATIONAL NEEDS OF CHILDREN AND YOUNG ADULTS, THE ENVIRONMENT AND OTHER PRESSING SOCIAL ISSUES, AND TO PROVIDING EFFECTIVE PROGRAMS THAT ENHANCE THE PREPARATION OF A LARGER NUMBER OF BAHAMIAN STUDENTS FOR POST-SECONDARY OPPORTUNITIES AND THE CAREERS OF A GLOBALLY -COMPETITIVE WORLD

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	LYNN HOLOWESKO, DIRECTOR, & ALESSANDRA HOLOWESKO, DIRECTOR, HAVE A FAMILY RELATIONSHIP ALEXANDAR NEAVE, SECRETARY & E PARKER NEAVE, ASSISTANT SECRETARY, HAVE A FAMILY RELATIONSHIP PAUL SANDFORD, DIRECTOR & MAUREEN FRENCH, MANAGING DIRECTOR, HAVE A BUSINESS RELATIONSHIP

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 WAS REVIEWED IN DETAIL BY THE EXECUTIVE COMMITTEE PRIOR TO ITS FILING. ALL MEMBERS OF THE BOARD ALSO RECEIVE A COPY (IN PDF) OF THE FINAL FORM 990 PRIOR TO ITS FILING.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ON AN ANNUAL BASIS, ALL MEMBERS, DIRECTORS, OFFICERS AND EMPLOYEES ARE REQUIRED TO COMPLETE AN ACKNOWLEDGEMENT OF THE STATEMENT OF POLICY ON CONFLICTS OF INTEREST THE MANAGING DIRECTOR IS RESPONSIBLE FOR COMPILING A LIST OF CONFLICTS DECLARED IN ACCORDANCE WITH THE PROCEDURE AND SUBMITS THE LIST TO THE AUDIT COMMITTEE THE AUDIT COMMITTEE IS RESPONSIBLE FOR REVIEWING SUCH LISTING AND MONITORING ITS COMPLIANCE FOUNDATION MEMBERS, DIRECTORS, OFFICERS AND EMPLOYEES ARE ENCOURAGED TO PARTICIPATE IN THE DISCUSSION ON GRANTS TO ORGANIZATIONS TO WHICH THEY HAVE OFFICIAL AND DISCLOSED CONNECTIONS HOWEVER, THEY MAY NOT VOTE AS A MEMBER OF THE BOARD OF DIRECTORS UPON ANY PROPOSED GRANT TO SUCH APPLICANTS ALL CONFLICTS ARE TO BE NOTED IN THE MINUTES OF THE MEETING

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	THE EXECUTIVE COMMITTEE IS TO MEET, AT LEAST, ON AN ANNUAL BASIS TO DISCUSS EMPLOYEE EVALUATIONS AND COMPENSATION MINUTES OR A MEMORANDUM OF THE MEETING SUMMARIZING THE DISCUSSIONS AND DECISIONS MADE ARE FILED WITH THE FOUNDATION'S PERMANENT RECORDS THE COMMITTEE WILL REVIEW OTHER RELIABLE BENCHMARK INFORMATION, SUCH AS THE COUNCIL ON FOUNDATION'S ANNUAL GRANT MAKERS SALARY AND BENEFITS REPORT, TO ENSURE THAT THE COMPENSATION OF THE MANAGING DIRECTOR AND OTHER KEY EMPLOYEES IS APPROPRIATE AND CONSISTENT WITH THE MARKETPLACE

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON BEING REQUESTED FROM THE ORGANIZATION