

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF** 

Department of the Treasury Internal Revenue Service

OMB No 1545-0052

EXTENDED TO NOVEMBER 16, 2015

Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990of.

	יוט נ	arenual year 2017 or tax year beginning		, and ending		
-	Nan	ne of foundation			A Employer identification	number
	т	OV MCCANN FOIDIDAMION INC	ı		E0 2166202	
		OY MCCANN FOUNDATION, INC ber and street (or PO box number if mail is not delivered to street		Room/suite	59-3166283  B Telephone number	
		700 SOUTH MACDILL AVENUE		360	(813) 805-	0093
•		or town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	
		AMPA, FL 33629-5244	•		The samples application to p	onaling, onesic ricit
•	G C	heck all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	s, check here
		Final return	Amended return		9	
		Address change	Name change		Foreign organizations me check here and attach co	mputation
	H_C	heck type of organization: X Section 501(c)(3) ex			E If private foundation sta	
	<u> </u>		Other taxable private foundang method: X Cash		under section 507(b)(1)	
		r market value of all assets at end of year   J Accounting Part II, col. (c), line 16)	ther (specify)	Accrual	F If the foundation is in a	
	( <i>III</i>		mn (d) must be on cash t	pasis )	under section 507(b)(1)	(b), check here
[		Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
•		1 Contributions, gifts, grants, etc., received			N/A	
	ļ	2 Check X If the foundation is not required to attach Sch. B		·		
		3 Interest on savings and temporary cash investments	442.	442.		STATEMENT 1
		Dividends and interest from securities	200,956.	195,638.		STATEMENT 2
SCANNED		5a Gross rents		<del></del>		
		b Net rental income or (loss)	592,295.			
	ne	b and or (loss) from sale of assets not on line 10 b assets on line 6a 5,697,087.	3,2,2,3,1			
	3ve	7 Capital gain net income (from Part IV, line 2)		592,295.		
	æ	8 Net short-term capital gain		<del></del>		
(G)		9 Income modifications	CEIVED	<u> </u>		
<b>Q</b>		10a Gross sales less returns and allowances		<u> </u>		
		D Less Cost of goods sold	OV 2 4 2015 C	<u> </u>		
		c Gross profit or (loss)	0	<u> </u>	 	
Ö		11 Other income  12 Total. Add lines 1 through 11	<b>ジレモ79.31,</b> /6193.	788,375.		
		13 Compensation of officers, directors, trustees, etc	0-			0.
VOV		14 Other employee salaries and wages	109,689.	0.	· · · · · · · · · · · · · · · · · · ·	109,689.
లు		15 Pension plans, employee benefits	19,829.	0.		19,829.
	xpenses	16a Legal fees STMT 3	320.	240.		80.
07	pen	b Accounting fees STMT 4	1,500.	1,125.		375.
丟	ш	c Other professional fees STMT 5	158,408.	158,408.		0.
	ıţi	17 Interest 18 Taxes STMT 6	14,815.	5,286.		8,125.
	stra	19 Depreciation and depletion	14,013.			0,123.
	iii	20 Occupancy				<u> </u>
	Adr	21 Travel, conferences, and meetings	2,992.	0.		2,992.
	P	22 Printing and publications				
	Operating and Administrative	23 Other expenses STMT 7	9,263.	0.		9,263.
	rati	24 Total operating and administrative				
	Эре	expenses. Add lines 13 through 23	316,816.	165,059.		150,353.
		25 Contributions, gifts, grants paid	815,658.			815,658.
		26 Total expenses and disbursements. Add lines 24 and 25	1,132,474.	165,059.		966,011.
		27 Subtract line 26 from line 12:	1,136,4/4.			900,011.
		Excess of revenue over expenses and disbursements	-338,781.			
		b Net investment income (if negative, enter -0-)	,	623,316.		
_		c Adjusted net income (if negative, enter -0-)			N/A	

423501 11-24-14 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2014)

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	12,879,105.
2	Enter amount from Part I, line 27a	2	-338,781.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	12,540,324.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	12,540,324.
	<del> </del>		

1a	ehouse; or common stock, 20	ld (e.g., real estate, 00 shs. MLC Co.)	] (	How acquire P - Purchase D - Donation	ed (c	) Date acquired mo., day, yr.)	(d) Date sold (mo., day, yr.)
b SEE ATTACHED	STATEMENT						
C							
đ							
e							
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain or (los (e) plus (f) minus	
a b						<del></del>	
c							
d e 5,697,087.			5,104,792	+			592,295
Complete only for assets showing	gain in column (h) and own			+	(I) G	aıns (Col. (h) gaı	
(i) F.M.V. as of 12/31/69	(i) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (I)	7	col. (k	), but not less the osses (from col.	an -0-) <b>or</b>
<u>a</u>				+ -			
b				1			
C							
d							
e							592,295
2 Capital gain net income or (net cap	oital loss) If gain, also	o enter in Part I, line nter -0- in Part I, line	7	}			592,295
3 Net short-term capital gain or (loss	•		•	'			
If gain, also enter in Part I, line 8, c		-(5) and (5).	•	)			
If (loss), enter -0- in Part I, line 8				J 3		N/2	A
Part V   Qualification Ur	nder Section 4940(e	) for Reduced	Tax on Net li	nvestmen	t Inco	me	
(For optional use by domestic private t	foundations subject to the se	ction 4940(a) tax on	net investment inco	me.)			
If section 4940(d)(2) applies, leave thi	ıs part blank.						
Was the foundation liable for the section	on 4942 tax on the distributat						
				1?			Yes X No
	fy under section 4940(e). Do	not complete this pa	irt				Yes X No
	fy under section 4940(e). Do ach column for each year; see	not complete this pa e the instructions be	irt. fore making any entr	ies.			
	fy under section 4940(e). Do ach column for each year; see	not complete this pa e the instructions be ) ng distributions	ort. fore making any entr Net value of nonc	ies. (c) haritable-use		Distr (col. (b) d	(d) button ratio ivided by col. (c))
Enter the appropriate amount in ea (a)  Base period years  Calendar year (or tax year beginning	fy under section 4940(e). Do ach column for each year; see	not complete this pa e the instructions ber o) ng distributions 950,810.	ort. fore making any entr Net value of nonc	ies. (c) haritable-use	552.	Dıstr (col. (b) d	(d) hbution ratio ivided by col. (c)) • 068078
Enter the appropriate amount in ea (a)  Base period years Calendar year (or tax year beginning 2013 2012	fy under section 4940(e). Do ach column for each year; see	not complete this pa e the instructions ber o) ng distributions 950,810. 783,005.	ort. fore making any entr  Net value of nonc  1	(c) haritable-use (3, 966, 3, 390,	552. 544.	Distr (col. (b) d	(d) ibution ratio ivided by col. (c))  . 068078
Enter the appropriate amount in ea (a)  Base period years Calendar year (or tax year beginning 2013 2012 2011	fy under section 4940(e). Do ach column for each year; see	not complete this pare the instructions before the instructions before the instructions before the instructions before the instructions 950,810.783,005.685,854.	ort. fore making any entrone  Net value of none  1 1 1	ies. (c) haritable-use: 3,966, 3,390, 3,461,	552. 544. 203.	Distr (col. (b) d	(d) ibution ratio ivided by col. (c))  • 068078  • 058474
Enter the appropriate amount in ea (a)  Base period years Calendar year (or tax year beginning 2013 2012 2011 2010	fy under section 4940(e). Do ach column for each year; see	not complete this page the instructions being distributions 950,810.783,005.685,854.733,662.	ort. fore making any entropy  Net value of nonce  1  1 1 1	ies. (c) haritable-use: 3,966, 3,390, 3,461, 1,528,	552. 544. 203. 731.	Distr (col. (b) d	(d) ibution ratio ivided by col. (c))  • 068078  • 058474  • 050950  • 063638
1 Enter the appropriate amount in ea (a) Base period years Calendar year (or tax year beginning 2013 2012 2011	fy under section 4940(e). Do ach column for each year; see	not complete this pare the instructions before the instructions before the instructions before the instructions before the instructions 950,810.783,005.685,854.	ort. fore making any entropy  Net value of nonce  1  1 1 1	ies. (c) haritable-use: 3,966, 3,390, 3,461,	552. 544. 203. 731.	Distr (col. (b) d	(d) ibution ratio ivided by col. (c))  • 068078  • 058474  • 050950
1 Enter the appropriate amount in ea (a) Base period years Calendar year (or tax year beginning 2013 2012 2011 2010 2009	fy under section 4940(e). Do ach column for each year; see	not complete this page the instructions being distributions 950,810.783,005.685,854.733,662.	ort. fore making any entropy  Net value of nonce  1  1 1 1	ies. (c) haritable-use: 3,966, 3,390, 3,461, 1,528,	552. 544. 203. 731.	(col. (b) d	(d) hbutton ratio ivided by col. (c))
Base period years Calendar year (or tax year beginning 2013 2012 2011 2010 2009  Total of line 1, column (d)	fy under section 4940(e). Do ach column for each year; see (b g in) Adjusted qualifyii	not complete this pare the instructions bereing distributions  950,810. 783,005. 685,854. 733,662. 754,873.	ort. fore making any entr  Net value of nonc  1  1  1  1	ies. (c) haritable-use 3,966, 3,390, 3,461, 1,528, 1,481,	552. 544. 203. 731.	Distr (col. (b) d	(d) hbutton ratio ivided by col. (c))
1 Enter the appropriate amount in ea (a) Base period years Calendar year (or tax year beginning 2013 2012 2011 2010 2009  Total of line 1, column (d)	fy under section 4940(e). Do ach column for each year; see (b) g in)  Adjusted qualifyii  -year base period - divide the	not complete this pare the instructions bereing distributions  950,810. 783,005. 685,854. 733,662. 754,873.	Net value of nonc  1 1 1 1 1	ies. (c) haritable-use 3,966, 3,390, 3,461, 1,528, 1,481,	552. 544. 203. 731.	(col. (b) d	(d) (button ratio (vided by col. (c))
Base period years Calendar year (or tax year beginning 2013 2012 2011 2010 2009  Total of line 1, column (d) Average distribution ratio for the 5- the foundation has been in existence	fy under section 4940(e). Do ach column for each year; see (b) g in)  Adjusted qualifyii  -year base period - divide the ce if less than 5 years	not complete this page the instructions before the instruction before the instructions before the instruction	Net value of nonc  1 1 1 1 1	ies. (c) haritable-use 3,966, 3,390, 3,461, 1,528, 1,481,	552. 544. 203. 731.	(col. (b) d	(d) ibution ratio ivided by col. (c))  . 068078 . 058474 . 050956 . 063638 . 06574! . 30688!
Base period years Calendar year (or tax year beginning 2013 2012 2011 2010 2009  Total of line 1, column (d) Average distribution ratio for the 5- the foundation has been in existence	fy under section 4940(e). Do ach column for each year; see (b) g in)  Adjusted qualifyii  -year base period - divide the ce if less than 5 years	not complete this page the instructions before the instruction before the instructions before the instruction	Net value of nonc  1 1 1 1 1	ies. (c) haritable-use 3,966, 3,390, 3,461, 1,528, 1,481,	552. 544. 203. 731.	(col. (b) d	(d) ibution ratio ivided by col. (c))  . 068078 . 058474 . 050956 . 063638 . 065749 . 306889 . 06137
Base period years Calendar year (or tax year beginning 2013 2012 2011 2010 2009  Total of line 1, column (d) Average distribution ratio for the 5- the foundation has been in existence Enter the net value of noncharitable Multiply line 4 by line 3	fy under section 4940(e). Do ach column for each year; see (b) Adjusted qualifying a period - divide the ce if less than 5 years e-use assets for 2014 from Page 1964.	not complete this page the instructions before the instruction before the instructions before the instruction	Net value of nonc  1 1 1 1 1	ies. (c) haritable-use 3,966, 3,390, 3,461, 1,528, 1,481,	552. 544. 203. 731.	2 3	(d) ibution ratio ivided by col. (c))
Base period years Calendar year (or tax year beginning 2013 2012 2011 2010 2009  Total of line 1, column (d) Average distribution ratio for the 5- the foundation has been in existence Enter the net value of noncharitable Multiply line 4 by line 3 Enter 1% of net investment income	fy under section 4940(e). Do ach column for each year; see (b) Adjusted qualifying a period - divide the ce if less than 5 years e-use assets for 2014 from Page 1964.	not complete this page the instructions before the instruction before the instructions before the instruction	Net value of nonc  1 1 1 1 1	ies. (c) haritable-use 3,966, 3,390, 3,461, 1,528, 1,481,	552. 544. 203. 731.	2 3 4	(d) Ibution ratio Ivided by col. (c))  . 068078 . 058474 . 050956 . 063638 . 06574! . 30688! . 061377 14,079,534 . 864,160 . 6,233
Calendar year (or tax year beginning 2013 2012 2011 2010 2009 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-	ry under section 4940(e). Do ach column for each year; see (b) g in)  Adjusted qualifyii  -year base period - divide the ce if less than 5 years e-use assets for 2014 from Pie (1% of Part I, line 27b)	not complete this page the instructions before the instruction before the instructions before the instruction	Net value of nonc  1 1 1 1 1	ies. (c) haritable-use 3,966, 3,390, 3,461, 1,528, 1,481,	552. 544. 203. 731.	2 3 4 5 6	(d)

Form 990-PF (2014) JOY MCCANN FOUNDATION, INC.		<u>59-3166</u>			Page 4
Part VI Excise Tax Based on Investment Income (Section 49		948 - see	<u>nstru</u>	ctio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here  and					
Date of ruling or determination letter: (attach copy of letter if n					
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► X and enter 1%	1		6,2	<u>33.</u>
of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4	* *				_
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only.	Others enter -0-)	2			0.
3 Add lines 1 and 2		3		6,2	<u>33.</u>
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only.	Others enter -0-)	4			<u> 0.</u>
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		6,2	<u> 33.</u>
6 Credits/Payments:	1. 1. 10.705				
a 2014 estimated tax payments and 2013 overpayment credited to 2014	6a 12,795.				
b Exempt foreign organizations - tax withheld at source	6b				
c Tax paid with application for extension of time to file (Form 8868)	6c	l l			
d Backup withholding erroneously withheld	6d	_		^ F	٥-
7 Total credits and payments. Add lines 6a through 6d		7		<u> </u>	<u>95.</u>
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is at	tached	8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9		<del></del>	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	C	10		<u>6,5</u>	62.
11 Enter the amount of line 10 to be. Credited to 2015 estimated tax	6,562. Refunded ▶	11			0.
Part VII-A Statements Regarding Activities	<del></del>		<del></del>	Vaa	N
1a During the tax year, did the foundation attempt to influence any national, state, or local leg	distation or did it participate or intervene	in	-	Yes	
any political campaign?			1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purp		•	1b		
If the answer is "Yes" to 18 or 16, attach a detailed description of the activities a	and copies of any materials publishe	ea or			
distributed by the foundation in connection with the activities			ŀ.,		x
c Did the foundation file Form 1120-POL for this year?	ha ugart		10		
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during to  (1) On the foundation. ▶ \$ (2) On foundation manage			1		
e Enter the reimbursement (if any) paid by the foundation during the year for political expen			ł		
managers. > \$ 0.	diture tax imposed on foundation				
2 Has the foundation engaged in any activities that have not previously been reported to the	IRS2		2		x
If "Yes." attach a detailed description of the activities	11.0		-		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing	n instrument articles of incorporation o	r			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chan	• • • • • • • • • • • • • • • • • • • •	•	3		х
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year.	_		4a		X
b if "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year	r?	,	5		X
If "Yes," attach the statement required by General Instruction T					
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	either:				
By language in the governing instrument, or					
By state legislation that effectively amends the governing instrument so that no mandation	ory directions that conflict with the state	law			
remain in the governing instrument?			6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co	omplete Part II, col (c), and Part XV	•	7	X	_
					_
8a Enter the states to which the foundation reports or with which it is registered (see instruct	ions) ►				
FL					
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attorney General (or designate)				
of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of	section 4942(j)(3) or 4942(j)(5) for cale	ndar			
year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"	complete Part XIV		9		X
10 Did any persons become substantial contributors during the tax year? if "Yes," attach a sche	dule listing their names and addresses		10		X

Form 990-PF (2014) JOY MCCANN FOUNDATION, I	NC.		59-31662	83 Page 6
Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)	
5a Dusing the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es X No	1 1
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire	ectiv.	ŀ	1
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?		es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
4945(d)(4)(A)? (see instructions)	ii doscribod iii oodiidii	□ v.	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational numbers or f		15 CAA 110	
	or educational purposes, or r		es X No	
the prevention of cruelty to children or animals?	da. 4b.a	- <del></del>	S LAL NO	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	<u>-</u>	n Regulations	37/3	<u>.</u>
section 53.4945 or in a current notice regarding disaster assistance (see instru	·		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h				- } -
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f			_	
expenditure responsibility for the grant?		/A Y	es L No	
If "Yes," attach the statement required by Regulations section 53.494	5-5(d)			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			1 1
a personal benefit contract?		Y	es 🗓 No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			Sb X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Y	es 🗓 No	] ]
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attribi	utable to the transaction?			7b
Part VIII Information About Officers, Directors, Trust		nagers, Highly		
Paid Employees, and Contractors			•	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	nours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
JOY MCCANN CULVERHOUSE	CHAIRMAN/DIRE		compensacin	
1700 S. MACDILL AVENUE, SUITE 360				
TAMPA, FL 33629	5.00	٥.	0.	0.
SCOTT D. LYNCH	DIRECTOR	<del></del>	<del></del>	
1700 S. MACDILL AVENUE, SUITE 360	DIRECTOR		l i	
TAMPA, FL 33629	10.00	0.	o.	0.
CHRISTOPHER CHAPMAN	CO-CHAIR/DIRE		0.	<u> </u>
	CO-CHAIR/DIRE	CTOR		
1700 S. MACDILL AVENUE, SUITE 360	15 00			•
TAMPA, FL 33629	15.00	0.	0.	0.
			1	
	<u> </u>	<u> </u>		
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	<del> </del>	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	devoted to position	<u> </u>	and deterred compensation	allowances
	PROGRAM OFFIC	ER		
AVE., STE. 360, TAMPA, FL 33629	40.00	109,689.	19,829.	0.
	1			
	1			
	1			
	<del> </del>	<del></del>		
	†			
Total number of other employees paid over \$50,000	<u> </u>	<u> </u>		0
- Gags named of other disployable para over woodood				J

Form 990-PF (2014) JOY MCCANN FOUNDATION, INC.		166283 Page
Part VIII Information About Officers, Directors, Trustees, Foundation Manag Paid Employees, and Contractors (continued)	ers, Highly	
3. Five highest-paid independent contractors for professional services. If none, enter "NONE."		
	b) Type of service	(c) Compensation
NONE	<b>b)</b> 1) po 01 0011100	(6) 55 5 5
HONE		
Total number of others receiving over \$50,000 for professional services		<b>•</b>
Part IX:A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information sumber of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	such as the	Expenses
1 N/A		<del></del>
14712		
2		
3		
4		
<u> </u>		
Dort IV D O		
Part IX-B Summary of Program-Related Investments	<del></del>	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A		
		0
2		
<del></del>	·	
All after any problem in the state of the st		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 1 . Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 13,519,021. a Average monthly fair market value of securities 1a 528,910. b Average of monthly cash balances 1b 246,012. c Fair market value of all other assets 1c 14,293,943. d Total (add lines 1a, b, and c) 1d Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 293, Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 079,534 703.97 Minimum investment return. Enter 5% of line 5 Part XI / Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.) 703,977. Minimum investment return from Part X, line 6 6,233 2a Tax on investment income for 2014 from Part VI, line 5 2a 2b b Income tax for 2014. (This does not include the tax from Part VI.) Add lines 2a and 2b 2c Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 966,011. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a **b** Cash distribution test (attach the required schedule) 3b 966,011. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b Adjusted qualifying distributions. Subtract line 5 from line 4 6 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

4940(e) reduction of tax in those years.

JOY MCCANN FOUNDATION, INC. 59-3166283 Form 990-PF (2014) Page 9 Part XIII Undistributed Income (see instructions) (b) (c) (d) Corpus 2013 2014 Years prior to 2013 1 Distributable amount for 2014 from Part XI, 697,744. line 7 2 Undistributed income, if any, as of the end of 2014 0 a Enter amount for 2013 only b Total for prior years: 0. 3 Excess distributions carryover, if any, to 2014: 186,680 a From 2009 173,584. **b** From 2010 27,525. c From 2011 145,882. 274,200. d From 2012 e From 2013 807,871 f Total of lines 3a through e 4 Qualifying distributions for 2014 from 966,011 Part XII, line 4: ►\$ 0 a Applied to 2013, but not more than line 2a b Applied to undistributed income of prior 0. years (Election required - see instructions) c Treated as distributions out of corpus 0. (Election required - see instructions) 697,744. d Applied to 2014 distributable amount 268,267. e Remaining amount distributed out of corpus Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a) ) 6 Enter the net total of each column as indicated below: 1,076,138. & Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract 0. line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously 0 assessed d Subtract line 6c from line 6b. Taxable 0 amount - see instructions e Undistributed income for 2013. Subtract line 4a from line 2a. Taxable amount - see instr. 0 f Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must 0. be distributed in 2015 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election 0. may be required - see instructions) 8 Excess distributions carryover from 2009 186,680. not applied on line 5 or line 7 9 Excess distributions carryover to 2015.

889,458.

10 Analysis of line 9:

173,584. a Excess from 2010 27,525. b Excess from 2011 145,882. c Excess from 2012 274,200. d Excess from 2013 268,267 e Excess from 2014

Subtract lines 7 and 8 from line 6a

	ANN FOUNDAT			59-31	66283 Page 10
Part XIV Private Operating F	oundations (see in:	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter that	t it is a private operating			
foundation, and the ruling is effective fo	r 2014, enter the date of t	the ruling	▶		
<b>b</b> Check box to indicate whether the found	dation is a private operatir	ng foundation described i	n section	4942(j)(3) or49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities				<u> </u>	
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					-
(4) Gross investment income					
Part XV   Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during t				. ,	
Information Regarding Foundation     List any managers of the foundation whyear (but only if they have contributed r.  NONE	o have contributed more		ributions received by the	foundation before the clos	e of any tax
b List any managers of the foundation wh other entity) of which the foundation ha			or an equally large porte	on of the ownership of a pa	rtnership or
NONE					
2 Information Regarding Contribut Check here ► X if the foundation of the foundation makes gifts, grants, etc.	only makes contributions t	to preselected charitable	organizations and does i		
a The name, address, and telephone num SEE ATTACHMENT 1	ber or e-mail address of t	the person to whom appli	cations should be addre	ssed:	
b The form in which applications should to SEE ATTACHMENT 1	e submitted and informat	tion and materials they sh	ould include:		
c Any submission deadlines: SEE ATTACHMENT 1			<del> </del>	<del>-</del>	
d Any restrictions or limitations on award SEE ATTACHMENT 1	s, such as by geographica	al areas, charitable fields,	kinds of institutions, or e	other factors:	

3 Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	7
a Paid during the year				
AMERICAN CANCER SOCIETY 3709 WEST JETTON AVENUE		₽C	ANNUAL OPERATING FUND	
TAMPA, FL 33629				15,300
				<u>-</u>
ASOLO CENTER FOR PERFORMING ARTS		₽C	ANNUAL OPERATING FUND	
5555 NORTH TAMIAMI TRAIL SAROSOTA, FL 34243				15,300
				23,500
BIRMINGHAM-SOUTHERN COLLEGE		₽C	ANNUAL OPERATING FUND	
900 ARKADELPHIA ROAD, BOX 549003				
BIRMINGHAM, AL 35254		<u> </u>		15,300
BOY SCOUTS OF AMERICA GULF RIDGE		₽C	SCOUT REACH PROGRAM	
COUNCIL				
13228 NORTH CENTRAL AVE. TAMPA, FL 33612				25 22
TAMEA, 111 33012				25,000
BOY SCOUTS OF AMERICA GULF RIDGE		₽C	ANNUAL OPERATING FUND	
COUNCIL				
13228 NORTH CENTRAL AVE.				
TAMPA, FL 33612  Total  SEE CO	ONTINUATION SHEE	I ET(S)	<b>▶</b> 3a	15,300 815,658
b Approved for future payment			00	<u> </u>
NONE				
<del></del>			-	
				····
Total	. <u> </u>	L	▶ 3b	- (

Part XVI-A

**Analysis of Income-Producing Activities** 

Enter gross amounts unless otherwise indicated.	Unrelated business income			ided by section 512, 513, or 514	(e)		
	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt		
1 Program service revenue:	code	Amount	sion	Amount	function income		
8	<del></del>		<del> </del>				
b			-				
•		<del></del>	-		<del>-</del>		
<u> </u>		<del>-</del>	<del> </del>	<del></del>			
			<del> </del>				
			<del> </del>				
g Fees and contracts from government agencies			<del> </del>				
· · ·			-				
2 Membership dues and assessments							
3 Interest on savings and temporary cash			14	442.			
Investments			$\frac{14}{14}$				
4 Dividends and interest from securities			1 4	200,930.			
5 Net rental income or (loss) from real estate:							
a Debt-financed property					<del></del>		
b Not debt-financed property							
6 Net rental income or (loss) from personal							
property			ļ				
7 Other investment income				· <u>-</u>			
8 Gain or (loss) from sales of assets other							
than inventory			18	592,295.			
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory							
11 Other revenue:							
a							
b							
C							
d							
e							
12 Subtotal. Add columns (b), (d), and (e)		0.		793,693.	0.		
13 Total. Add line 12, columns (b), (d), and (e)				13	793,693.		
(See worksheet in line 13 instructions to verify calculations.)							
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes			
Line No. Explain below how each activity for which incom			contrib	outed importantly to the accom	plishment of		
the foundation's exempt purposes (other than b	y providing fu	inds for such purposes).					
N/A							
			_				
		· · · · · · · · · · · · · · · · · ·					
				•			
		· · · · · · · · · · · · · · · · · · ·					
				<del></del>			
		· · · · · · · · · · · · · · · · · · ·					
			_		<del></del>		
			_	<del> </del>	<del></del>		
				<del> </del>			
		<del></del>					
423621 11-24-14	-		_		Form <b>990-PF</b> (2014)		

Part XVII	Information Regarding	g Transfers	To and	Transactions a	nd Relationships	With Noncharitable
	Exempt Organization	s				

1,	Did the or	rganization directly or indir	ectly engage in any	of the followin	g with any other organization	on described in sect	ion 501(c) of	<u> </u>	Yes	No
					7, relating to political organ			1 [		
а	Transfers	from the reporting founda	ation to a noncharit	able exempt org	ganization of:			1 1		
	(1) Cash							1a(1)		X
	(2) Other	r assets						1a(2)		X
b	Other tran	isactions;								
	(1) Sales	s of assets to a noncharital	ble exempt organiza	ition				16(1)	`	X
		hases of assets from a no						1b(2)		X
		al of facilities, equipment,	•	·				1b(3)		X
		bursement arrangements						1b(4)		X
	` '	s or loan guarantees						1b(5)		X
	(6) Perfo	ormance of services or me	mbership or fundra	ısıng solicitatio	ns			1b(6)		$\overline{\mathbf{x}}$
C	Sharing o	of facilities, equipment, ma	iling lists, other ass	ets, or paid em	ployees			1c		X
						ways show the fair i	narket value of the goods, o	ther asse	ts,	
		-					or sharing arrangement, sh			
	column (	d) the value of the goods,	other assets, or ser	vices received.						
(a)L	ine no	(b) Amount involved	(c) Name o	f noncharitable	exempt organization	(d) Description	n of transfers, transactions, and s	haring arra	ngeme	nts
				N/A	<del>-</del> -					
	_									
							-			
		- · · ·								
		_								
		_								
				-						
		<del></del> .								
		-								
						<u> </u>				
	1.45.4.									
2 <b>a</b>			•	•	or more tax-exempt organi	zations described	۲	7 ٧	TV.	] No
		1 501(c) of the Code (other		(3)) or in sect	1011 527 7			Yes	A	סאו ר
D	ir Yes, c	omplete the following sch (a) Name of org			(b) Type of organization	<del> </del>	(c) Description of relationsh	un		
	_	N/A			(b) Type of organization		(b) Description of relationsh	<del>p</del>		
	-	N/A								
_						· · · · · · · · · · · · · · · · · · ·				
		<del></del>					* *			
					g accompanying schedules and			the IDE -	001122	bio
Sig	an and b	elief, it is true correct, and cor	nplete Declaration of p	reparer (other thai	n taxpayer) is based on all inform	nation of which prepare	retur	the IRS di	prepare	er
He		Dyon	Mark		1 11/15/15	DIRECT		wn below ( Yes	See insi	Ϊνο.
	Sigi	nature of officer or trustee	1	$\overline{}$	Date	Title				
		Print/Type preparer's na	ime	Preparer's \$1		Date	Check If PTIN	_		
		MICHAEL J.	PEREZ,	1114	1/0/4/	ا سي اه داردا	self- employed			
Pa	id	CPA		11 1/20	471X	[[[13] 15	P00	272	784	
Pr	eparer	Firm's name ► SKO	DA, MINO	TI & C	o. U	<del>- +</del>	Firm's EIN ▶ 34-19			
Us	e Only		-							
		Firm's address ▶ 20	1 E. KEN	NEDY BL	VD #1500					
		TA	MPA, FL 3	<u>3360</u> 2-5	865		Phone no. (813)2	288-8	<u> 382</u>	6
								rm <b>990</b>	_	

59-3166283 PAGE 1 OF

Part IV   Capital Gains and Lo	osses for Tax on Investment Income				
• (a) List and	d describe the kind(s) of property sol	d, e.g., real estate,	(b) How acquired P - Purchase D - Donation	(c) Date acquired	(d) Date sold
	rick warehouse; or common stock, 2	UU SRS. MLC CO.	D - Donation		(mo., day, yr.)
	#02062				12/31/14
b MERRILL LYNCH					12/31/14
c MERRILL LYNCH				VARIOUS	12/31/14
	#02062			VARIOUS	12/31/14
	#02062			VARIOUS	$\frac{12/31/14}{12/31/14}$
	#02062 SUPPL. #02062 SUPPL.	<del>-</del> ·		VARIOUS	12/31/14
	#02062 SUPPL.	<del></del>			12/31/14 12/31/14
	DIVIDENDS		<del></del>	VARIOUS	12/31/14
CAPITAL GAINS	DIVIDENDS				
k		<del></del>	-	<del> </del>	
			-	<del>                                     </del>	<u> </u>
m	<del></del>				<del></del>
n					
0					
	(f) Depreciation allowed	(g) Cost or other basis	(h	) Gain or (loss)	
(e) Gross sales price	(or allowable)	plus expense of sale		olus (f) minus (g)	
a 1,036,646.		1,009,222.			27,424.
b 559,903.		554,237.	<del></del>		5,666.
c 2,382,967.		1,896,828.	<del></del>	•	486,139.
d 680,984.		574,180.			106,804.
e 20.			_		20.
f 203,143.		203,143.			0.
g 354,124.		360,513.			-6,389.
h 478,175.		506,669.			-28,494.
1,125.					1,125.
1					
<u>k</u>					
m	1				
n					
Complete only for accets shown	l ng gain in column (h) and owned by t	the foundation on 12/31/69	, (I) I =	(6 (6-)	<del></del>
Complete only for assets shown				sses (from col. (h)) of col. (h) gain ove	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		not less than "-0-")	
2					27,424.
a b	· -				5,666.
C					486,139.
d					106,804.
e					20.
f					0.
g					-6,389.
h					-28,494.
					1,125.
J					
k					
m				_	
n					
0					
			i		
2 Capital gain net income or (net ca	apıtal loss) {   If gain, also enter   If (loss), enter "-0	ın Part I, line 7 -" ın Part I, line 7	2		592,295.
•	apital loss) {   If gain, also enter   If (loss), enter "-0	` \	2		592,295.
•	ss) as defined in sections 1222(5) an , column (c).	` \	2	N/A	592,295.

Part XV   Supplementary Information				
3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
BOYS & GIRLS CLUB OF SARASOTA		PC	ANNUAL OPERATING FUND	
PO BOX 4068				
SARASOTA, FL 34230				15,300.
BOYS & GIRLS CLUB OF TAMPA BAY		PC	HOLIDAY GIFT -	
1307 N. MACDILL AVE.			LACOOCHEE CLUB	
TAMPA, FL 33607	<u></u>	<u> </u>		988.
BOYS & GIRLS CLUB OF TAMPA BAY		PC	ANNUAL OPERATING FUND	
1307 N. MACDILL AVE.				
TAMPA, FL 33607				15,300.
BOYS & GIRLS CLUB OF TAMPA BAY		PC	PAJAMA PROGRAM	
1307 N. MACDILL AVE.				
TAMPA, FL 33607				4,632.
CHI-CHI RODRIGUEZ YOUTH FOUNDATION		PC	TECHNOLOGY LAB	
3030 N. MCMULLEN BOOTH ROAD				
CLEARWATER, FL 33761				15,000.
CHI-CHI RODRIGUEZ YOUTH FOUNDATION		PC	ANNUAL OPERATING FUND	
3030 N. MCMULLEN BOOTH ROAD				15 200
CLEARWATER, FL 33761	<del>                                     </del>			15,300.
CHILDREN'S HOME, INC.		PC	REFOCUS, REBUILD,	
10909 MEMORIAL HIGHWAY TAMPA, FL 33615	ļ		REDIRECT PROJECT	25,000.
		-		23,000.
CHILDREN'S HOME, INC.		PC	ANNUAL OPERATING FUND	
10909 MEMORIAL HIGHWAY TAMPA, FL 33615				15,300.
<del></del>				, <u></u>
CHILDREN'S HOME, INC. 10909 MEMORIAL HIGHWAY		₽C	HOLIDAY GIFT	
TAMPA, FL 33615				643.
DV NOVED COLLEGE				
FLAGLER COLLEGE PO BOX 1027		PC	ANNUAL OPERATING FUND	
ST. AUGUSTINE, FL 32085		L		15,300.
Total from continuation sheets				729,458.

3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<del></del>	or substantial contributor	Тобрын		
FLORIDA HOSPITAL TAMPA		₽C	ANNUAL OPERATING FUND	
3100 EAST FLETCHER AVENUE FAMPA, FL 33613				15,30
FLORIDA ORCHESTRA		₽C	ESTABLISHING NEW	
244 SECOND AVENUE NORTH, SUITE 420			AUDIENCES THROUGH	10.00
ST. PETERSBURG, FL 33701			DIVERSE PROGRAMMING	10,00
FLORIDA ORCHESTRA		₽C	ANNUAL OPERATING FUND	
244 SECOND AVENUE NORTH, SUITE 420				
ST. PETERSBURG, FL 33701				15,30
CIDIC INC. OF CARACOMA COUNTY		₽C		
GIRLS INC. OF SARASOTA COUNTY 201 SOUTH TUTTLE AVENUE			ANNUAL OPERATING FUND	
SARASOTA, FL 34237		ļ		15,30
JACKSONVILLE UNIVERSITY 2800 UNIVERSITY BLVD. N.		PC	ANNUAL OPERATING FUND	
JACKSONVILLE, FL 32233				15,30
LOUISIANA STATE UNIVERSITY HEALTH		PC	ANNUAL OPERATING FUND	
SCIENCES CENTER FOUNDATION				
450 A SOUTH CLAIBORNE AVE. NEW ORLEANS, LA 70112				15,30
MACDONALD TRAINING CENTER		₽C	BUSINESS DEVELOPMENT	
5420 W. CYPRESS ST. FAMPA, FL 33607-1706			SPECIALIST	25,00
MACDONALD TRAINING CENTER		₽C	ANNUAL OPERATING FUND	
5420 W. CYPRESS ST. TAMPA, FL 33607-1706				15,30
,	-			
MACDONALD TRAINING CENTER		₽C	FINE ARTS STUDIO	
5420 W. CYPRESS ST.				<u> </u>
TAMPA, FL 33607-1706				1,00
MASSACHUSETTS GENERAL HOSPITAL		₽C	ANNUAL OPERATING FUND	
165 CAMBRIDGE STREET, SUITE 600				
BOSTON, MA 02114  Total from continuation sheets	<u></u>	<u> </u>		15,30

Part XV Supplementary Information	1			
3 Grants and Contributions Paid During the Y	<del></del>			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
MOFFITT CANCER CENTER & RESEARCH		₽C	ANDULAL ODERAMING EUND	
INSTITUTE		FC	ANNUAL OPERATING FUND	
12902 MAGNOLIA DRIVE				
TAMPA, FL 33612-9416				15,300
RAMPANT LION FOUNDATION		PC	ANNUAL OPERATING FUND	
PO BOX 8360			INVIOLE OF ENGLISHED TOWN	
ANN ARBOR, MI 48107				15,300
			ANDELLI ODERNATIVO EIDID	
RINGLING MUSEUM		PC	ANNUAL OPERATING FUND	
5401 BAY SHORE ROAD				15,300
SARASOTA, FL 34243			-	13,300
SAINT LEO UNIVERSITY		PC	ANNUAL OPERATING FUND	
PO BOX 6665				
SAINT LEO, FL 33574-6665		DQ		15,300
SALVATION ARMY		PC	THE SUSTAINABLE LIVING PROJECT & SALVATION	
1603 N. FLORIDA AVENUE, PO BOX 2839 TAMPA, FL 33601			ARMY HOMELESS	
1AMPA, FE 33001			COMMUNITY IMPACT	
			GARDEN	25,000
SALVATION ARMY		PC	ANNUAL OPERATING FUND	
1603 N. FLORIDA AVENUE, PO BOX 2839				45 200
TAMPA, FL 33601				15,300
SARASOTA OPERA		₽C	ANNUAL OPERATING FUND	
61 N. PINEAPPLE AVE.				
SARASOTA, FL 34236	<u> </u>	<del>  -</del>		15,300
ST. ANDREW'S EPISCOPAL CHURCH		₽C	ANNUAL OPERATING FUND	
509 E. TWIGGS STREET				
TAMPA, FL 33602-3916	-	-		15,300
ST. JOSEPH'S HOSPITAL FOUNDATION		₽C	NICU-SERVO-I	
2700 W. DR. MARTIN LUTHER KING JR.			VENTILATOR & PANDA	
BLVD., SUITE 310 TAMPA, FL 33607	<u> </u>	<del> </del>	INFANT WARMERS	20,000
ST. JOSEPH'S HOSPITAL FOUNDATION		PC	NICU NURSES	
2700 W. DR. MARTIN LUTHER KING JR.			APPRECIATION	
BLVD., SUITE 310 TAMPA, FL 33607				321
Total from continuation sheets	<del></del>	-		

3 Grants and Contributions Paid During the Young Recipient	If recipient is an individual,	1	<del></del>	
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
ST. JOSEPH'S HOSPITAL FOUNDATION	i	PC	ANNUAL OPERATING FUND	
2700 W. DR. MARTIN LUTHER KING JR.				
BLVD., SUITE 310 TAMPA, FL 33607	<u> </u>			15,30
		70		
STETSON UNIVERSITY COLLEGE OF LAW		PC	ANNUAL OPERATING FUND	
1401 61ST AVENUE				15 30
GULFPORT, FL 33707		-		15,30
STRAZ CENTER FOR THE PERFORMING ARTS		₽C	EXPLORING SCIENCE AND	
		FC	<b>.</b>	
1010 NORTH W.C. MACINNES PL., PO BOX 518 TAMPA FL 33602-3720		1	NATURE PROGRAM SERIES	10 00
518 TAMPA, FL 33602-3720				10,00
STRAZ CENTER FOR THE PERFORMING ARTS		₽C	ANNUAL OPERATING FUND	
1010 NORTH W.C. MACINNES PL., PO BOX		[ ]	THE OF BRATTHO TOUR	
518 TAMPA, FL 33602-3720				15,30
				·
TAMPA CROSSROADS		PC	ANNUAL OPERATING FUND	
5120 N. NEBRASKA AVE.			l i	
TAMPA, FL 33603				15,30
TAMPA CROSSROADS		₽C	FOOD ASSISTANCE	
5120 N. NEBRASKA AVE.				
TAMPA, FL 33603	-			2,00
TAMPA GENERAL HOSPITAL FOUNDATION		PC	LABORATORY SERVICES	
PO BOX 1289 TAMPA, FL 33601				20,00
TAMPA GENERAL HOSPITAL FOUNDATION		PC	ANNUAL OPERATING FUND	
РО ВОХ 1289				
TAMPA, FL 33601				15,30
MANUAL MEMBADAL CONTRACT		ng.	HOLIDAY GIRE GIRE	
TAMPA METROPOLITAN AREA YMCA		PC	HOLIDAY GIFT-SULPHUR	
110 E. OAK AVENUE TAMPA, FL 33602			SPRINGS	27
MANUA MEMBODOLIMAN AREA VMOA		P.C.	N. F. W. VIDG	
TAMPA METROPOLITAN AREA YMCA		PC	N.E.W. KIDS:	
110 E. OAK AVENUE TAMPA, FL 33602			NUTRITION, EXERCISE AND WELLNESS FAMILY	
In. 11 33002			PROGRAM, LACOOCHEE	25,00
Total from continuation sheets	<del></del>	<u> </u>		25,00

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
TAMPA METROPOLITAN AREA YMCA		PC PC	ANNUAL OPERATING FUND	
110 E. OAK AVENUE TAMPA, FL 33602				45.00
IAMFA, FE 33002			<del></del>	15,30
TAMPA MUSEUM OF ART		PC	ANNUAL OPERATING FUND	
120 WEST GASPARILLA PLAZA				
TAMPA, FL 33602	-	<del> </del>		15,30
UNITED WAY OF TAMPA BAY		₽C	ANNUAL OPERATING FUND	
5201 W. KENNEDY BLVD., SUITE 600 TAMPA, FL 33609				15.20
IAMIA, 12 33003				15,30
UNIVERSITY OF FLORIDA FOUNDATION		PC	VETERINARY INTERNSHIP	
1938 W. UNIVERSITY AVE.				
GAINESVILLE, FL 32603-1735				55,00
UNIVERSITY OF FLORIDA FOUNDATION		PC	ANNUAL OPERATING FUND	
1938 W. UNIVERSITY AVE. GAINESVILLE, FL 32603-1735				
GAINESVIEDE, FE 32003-1733			-	15,300
UNIVERSITY OF SOUTH FLORIDA		PC	ANNUAL OPERATING FUND	
4202 EAST FOWLER AVENUE				
TAMPA, FL 33620-6200				15,300
UNIVERSITY OF TAMPA 401 W. KENNEDY BLVD.		PC	ANNUAL OPERATING FUND	
TAMPA, FL 33606				15,300
WEDU		₽C	ANNUAL OPERATING FUND	
1300 NORTH BLVD.			i	
TAMPA, FL 33607-5645				15,30
YMCA OF SARASOTA		₽C	ANNUAL OPERATING FUND	
ONE SOUTH SCHOOL AVENUE, SUITE 301			THOME OF EXALING FUND	
SARASOTA, FL 34237				15,300
		<u></u>		
Total from continuation sheets				

FORM 990-PF INTERE	ST ON SAVIN	NGS AND TEN	IPORA	RY C	ASH IN	IVESTMENTS	STATEMEN	VT 1
SOURCE  USAMERIBANK  TOTAL TO PART I, LINE 3		REVE	(A) REVENUE PER BOOKS		(B) NET INVESTMENT INCOME		(C) IT ADJUSTED NET INCOME	
			44	2.		442.		
			442.		442.			
FORM 990-PF	DIVIDENDS	AND INTER	EST	FROM	SECUR	ITIES	STATEMEN	NT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		REV	A) ENUE BOOKS	(B) NET INVES MENT INCO		C) JSTED INCOME
AMORTIZATION ADJ	-131,232.		0.	-13	1,232.	-131,23	12.	
#02062 MERRILL LYNCH	161,922.		0.	16	1,922.	161,92	22.	
#02062 MERRILL LYNCH	1,125.	1,12	15.		0.		0.	
#02062	79,971.		0.	7	9,971.	79,97	1.	
MERRILL LYNCH #02062	29,043.		0.	2	9,043.	29,04	.3.	
MERRILL LYNCH #02062	5,318.		0.	!	5,318.		0.	
MERRILL LYNCH #02062 OID	2,660.		0.	:	2,660.	2,66	0.	
MERRILL LYNCH SUPP. #02062	53,274.		0.	5:	3,274.	53,27	4.	
TO PART I, LINE 4	202,081.	1,12	5.		0,956.	·	<del></del>	<del></del> :
								<u></u>
FORM 990-PF		LEGAL	FEE	S			STATEMEN	т 3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) INVI T INC		(C) ADJUSTED NET INCOM		TABLE
LEGAL FEES		320.			240.			80.
TO FM 990-PF, PG 1,	LN 16A	320.		-	240.		<del></del>	80.
							<del></del>	

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	1,500.	1,125.		375.	
TO FORM 990-PF, PG 1, LN 16B	1,500.	1,125.		375.	
FORM 990-PF C	THER PROFES	SIONAL FEES	S	TATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
MERRILL LYNCH MANAGEMENT FEE MERRILL LYNCH INVESTMENT EXPENSES	152,758. 5,650.	152,758. 5,650.		0.	
TO FORM 990-PF, PG 1, LN 16C	158,408.	158,408.		0.	
FORM 990-PF	TAX	ES	S	TATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PAYROLL TAX FOREIGN TAXES	8,125. 6,690.	0. 5,286.		8,125.	
TO FORM 990-PF, PG 1, LN 18	14,815.	5,286.		8,125.	

FORM 990-PF	OTHER E	XPENSES		STATEMENT 7	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTEI NET INCOM	
DUES & SUBSCRIPTIONS INSURANCE WEBSITE DESIGN & MAINTENANCE MISCELLANEOUS	5,726. 2,663. 269. 605.		0. 0. 0.		5,726. 2,663. 269. 605.
TO FORM 990-PF, PG 1, LN 23	9,263.		0.		9,263.
FORM 990-PF U.S. AND S	TATE/CITY G	·	OBL	GATIONS	STATEMENT 8
DESCRIPTION	GOV'		вос	K VALUE	FAIR MARKET VALUE
US AND STATE GOVERNMENT OBLIG	ATIONS X		2	,852,518.	2,891,243.
TOTAL U.S. GOVERNMENT OBLIGAT	IONS		2	,852,518.	2,891,243.
TOTAL STATE AND MUNICIPAL GOV	ERNMENT OBL	IGATIONS			
TOTAL TO FORM 990-PF, PART II	, LINE 10A		2	,852,518.	2,891,243.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT 9
DESCRIPTION			вос	K VALUE	FAIR MARKET VALUE
STOCKS INCL UNSETTLED PURCHAS	ES		6	,764,731.	8,290,054.
TOTAL TO FORM 990-PF, PART II	, LINE 10B		6	,764,731.	8,290,054.

FORM 990-PF	CORPORATE BONDS		STATEMENT 10
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CORPORATE BONDS		1,989,411.	2,008,765.
TOTAL TO FORM 990-PF, PART	II, LINE 10C	1,989,411.	2,008,765.
FORM 990-PF	OTHER INVESTMENTS		STATEMENT 11
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
A/R SPLIT DOLLAR LIFE CONTR	ACT COST	246,012.	246,012.
TOTAL TO FORM 990-PF, PART	II, LINE 13	246,012.	246,012.