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

OMB No 1545-0052 2015

► 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/form990pf.

Departme Internal R	nt of the evenue	Treasury Service	► Information	about For	m 990-PF and its separate i	nstructions is at www	irs.	gov/form990pf.	Open to Public Inspection
For cal	endar	year 2015, or	tax year beginni	ng	, 2015	, and ending		,	
Name of f	oundatio	on			•	•	A	Employer identification	n number
		indation ]	Inc per if mail is not delivered	d to otroot o	addman)	Room/suite	<u> </u>	46-4802331	
		<u>indrews At</u>		u w sueet e	iduless)	300	В	Telephone number (see	
City or tov	vn, state	or province, country	y, and ZIP or foreign po	stal code	· · · · · · · · · · · · · · · · · · ·	1300		(934) /12-	<u> </u>
Wilt	on M	Manors			FL	33311	C	If exemption applicate	on is pending, check here - 🟲
G Che	eck all	that apply:	Initial return		Initial return of a form	er public charity	۵	4 Foreign organizations	, check here
			Final return		Amended return		٦	i i oreign organizations	, check fiele
			Address char	ige [	Name change			2 Foreign organizations	meeting the 85% test, check putation
H Che	eck typ	oe of organizati	on: X Sec	ction 501	(c)(3) exempt private for	undation	1	nere and allacir comp	uladon
	Sec	tion 4947(a)(1)	) nonexempt chari	table tru:	st Other taxable p	rivate foundation	E	If private foundation s	tatus was terminated
		value of all assets				ash X Accrual		under section 507(d)(	1)(A), check here <b>&gt;</b>
-		I, column (c), line	•		Other (specify)		F		a 60-month termination
<b>►</b> \$			5,165.	(Part I,	column (d) must be on c	ash basis )	<u> </u>	under section 507(b)(	1)(B), check here •
Part I			Revenue and		(a) Revenue and	(b) Net investmen	nt	(c) Adjusted net	(d) Disbursements
	COL	lumns (b), (c), a	e total of amounts and (d) may not ne	: IN 9C6S-	expenses per books	income		income	for charitable purposes
&D	sai	rily equal the ar se instructions):	mounts ın column	(a)				1	(cash basis only)
2018 	(SE	<u> </u>	-) ants, etc, received (attach sch	orbito)	86,300.	-		<del> </del>	
	2		anas, euc, received (autach sch foundation is not required to a		00,300.	<del></del>		<del> </del>	
្ ៕	-	Ш	·						
J	3	-	d temporary cash investments						
33.	5 2		from securities						
	1 -	Net rental income							
() o	6.2	Or (loss) · · · ·	sale of assets not on line 10						
		Gross sales price f	for all					-	
≶₹	7	assets on line 6a Capital gain net inc	come (from Part IV, line	2)					<del></del>
\$ N	8	· -	otal gain	-					
֓֞֞֞֜֞֜֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	9		ons						
M) E	10 a	Gross sales less returns and							
	Ь	allowances Less Cost of	·						
		goods sold	etlach schedule)						
	11		ich schedule)				1	OFFINE	=
	' '	•	Golf tourna		182,168.			MEGLIA	
	12	Total. Add lines	1 through 11 · · · ·		268,468.		4		
	13	Compensation of o	officers, directors, trustee	es, etc · ·			2	SEP 2 1 7	gie Ia
	14	Other employee :	salaries and wages				-	00,	OC.
	15	-	ployee benefits				1 45		
A		-	schedule)				1	MENTEN.	
D M	_	• •	ittach sch)L-16b		2,503.		[]~-		
O K	`		ttach sch)						<del></del>
PS	17		e)(see insirs) Taxes and		271	<del> </del>		<del> </del>	<del></del>
E T	19	Depreciation (attac			271.			<del>                                     </del>	
A Â			letion						
N V	20								
_	21		es, and meetings						
A E N X D P	22 23	Other expenses (a	ations					<del> </del>	<del></del>
D P	23	See Line 23 S	•		83,627.	1			
N S	24	Total operating as			33,327.	1		1	
E S		expenses. Add Im	es 13 through 23		86,401.				
			ants paid - · · · · ·		56,000.				56,000.
	26	•	nd disbursements.	. <b></b>	142,401.				56,000.
	27	Subtract line 26 fro			142,401.	<del> </del>			30,000.
		Excess of revenu	e over expenses			1			
			its • • • • • •		126,067.			ļ	
			come (if negative, enter			<b>_</b>			
	C	Adjusted net inco	ome (if negative, enter -(	)-)	l			1	

Par	FII 1	Balance Sheets Attached schedul	es and amounts in the description for end-of-year amounts only )	Beginning of year	End of	<del></del>
<u>. u.</u>				(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		13,775.	70,165.	70,165.
	2	Savings and temporary cash investi	ments			
	3	Accounts receivable	►			
		Less: allowance for doubtful accour	its •			
	4	Pledges receivable	·· •75,000.			
		Less: allowance for doubtful accour	nts		75,000.	75,000.
	5	Grants receivable				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	6	Receivables due from officers, directors, tru disqualified persons (attach schedule) (see	istees, and other instructions)		•	
	7	Other notes and loans receivable (attach so				
A		Less: allowance for doubtful accour				- <del></del>
A S S E T	8	Inventories for sale or use			· · · · · · · · · · · · · · · · ·	
Ĕ	9	Prepaid expenses and deferred cha			<del></del>	
T S		·	-			
5		Investments — U.S. and state governobligations (attach schedule)	<i></i>			
	1	Investments — corporate stock (attach sch	· · · · · · · · · · · · · · · · · · ·			
		: Investments — corporate bonds (attach sch	redule)			
	11	Investments — land, buildings, and equipment: basis	•			
		Less accumulated depreciation (attach schedule)				
	12	Investments - mortgage loans				
	13	Investments - other (attach schedu	ile)			
	14	Land, buildings, and equipment: bas	sis 🏲			
		Less. accumulated depreciation (attach schedule)				
		Other assets (describe				
	16	Total assets (to be completed by a see the instructions. Also, see page	Il filers —	13,775.	145,165.	145,165.
Ė	17	Accounts payable and accrued expe	enses	2,120.	7,443.	
Ä	18	Grants payable			,	
B	19	Deferred revenue				
ŀ	20	Loans from officers, directors, trustees, & of	ther disqualified persons			
ī	21	Mortgages and other notes payable (attach	schedule)			
Ţ	22		)	· - ·		
Ė						
<u>s</u>	23	Total liabilities (add lines 17 through Foundations that follow SFAS 11		2,120.	7,443.	
		and complete lines 24 through 26	and lines 30 and 31.			
N F E U	1	Unrestricted				
ËÜ	25	Temporarily restricted				
, D	26	Permanently restricted				
A B S A L A		Foundations that do not follow Stand complete lines 27 through 31	FAS 117, check here · F X			
EL	27	Capital stock, trust principal, or curr	ent funds			
SN	28	Paid-in or capital surplus, or land, bldg , and				
C O E	29	Retained earnings, accumulated income, er	· · ·	11,655.	137,722.	
RS	30	Total net assets or fund balances		11,655.	137,722.	
	31	Total liabilities and net assets/fur	nd balances			
	<u> </u>	(see instructions)		13,775.	145,165.	
Par	t III   /	Analysis of Changes in Net	Assets or Fund Balance	es		
1	Total	net assets or fund balances at begin of-year figure reported on prior year's	ning of year - Part II, column (	a), line 30 (must agree w	ith	11,655.
2	Enter	amount from Part I, line 27a			2	126,067.
						120,007.
4	A44 I	increases not included in line 2 (itemize) . ines 1, 2, and 3	· · ·	. <b></b>		137,722.
_	n		_			131,144.
6	Total	ases not included in line 2 (itemize) net assets or fund balances at end c	of year (line 4 minus line 5) — D	art II. column (b) line 20	6	127 700
<u> </u>	iotal	net assets of futility baldiffices at effo t	your (into 4 minus line 5) — Pi	art is, column (b), iiiie 30		137,722.

·						
Form 990-PF (2015) Moss Fou	ndation Inc			4	16-4802331	Page
Part IV劇 Capital Gains and	Losses for Tax on Investme	nt Income				
(a) List and describe	e the kind(s) of property sold (e.g., rea se; or common stock, 200 shares MLC	l estate,	(b) How ac P Purch D Dona	nase	(C) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1 a						<u></u>
b						
С						
d						
е						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale			(h) Gain or (e) plus (f) mil	
а						
b						
С						<u> </u>
d						
e		<u> </u>				
Complete only for assets show	ring gain in column (h) and owned by the	he foundation on 12/31/69			(f) Gains (Col	(h)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		g th:	ain minus col (k), bu an -0-) <b>or L</b> osses (fro	ut not less
a						
b						
С						
d						
е						
2 Capital gain net income or (net	If (loss), ent	enter in Part I, line 7 ter -0- in Part I, line 7	•	2		<u> </u>
If gain, also enter in Part I, line	(loss) as defined in sections 1222(5) ar • 8, column (c) (see instructions). If (los	ss), enter -0-				
			• • •	3		
	er Section 4940(e) for Reduc			<u>ome</u>		<del></del>
(For optional use by domestic private If section 4940(d)(2) applies, leave the	e foundations subject to the section 49	40(a) tax on net investment i	ncome.)			
	•					
	tion 4942 tax on the distributable amou	• • • • • • • • • • • • • • • • • • • •	eriod?	• • •	· · · · L Yes	∐No
<del></del>	ify under section 4940(e). Do not comp	<del></del>				
	in each column for each year; see the i	instructions before making ar	ny entries.			
(a) Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use ass	ets	(col.	(d) Distribution (b) divided by co	
2014	0.					
2013						
2012						
2011						
2010						
2 Total of line 1, column (d)				2		,
3 Average distribution ratio for th number of years the foundation	ne 5-year base period — divide the tota n has been in existence if less than 5 y	I on line 2 by 5, or by the years		3		
4 Enter the net value of nonchar	itable-use assets for 2015 from Part X,	, line 5		4		0.
5 Multiply line 4 by line 3				5		
6 Enter 1% of net investment inc	come (1% of Part I, line 27b)			6		
7 Add lines 5 and 6				7		

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Form	990-PF (2015) Moss Foundation Inc	46-4	802	331		Р	age 4
Par		- see	instru	ıctions	;)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here · · · · I and enter 'N/A' on line 1						]
	Date of ruling or determination letter (attach copy of letter if necessary — see instrs)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	- • •	1				
	check here . ► and enter 1% of Part I, line 27b						
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2				
3	Add lines 1 and 2		3				0.
A	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	1	4				<del>.</del>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		5			-	0.
6	Credits/Payments:						<u> </u>
_	2015 estimated tax pmts and 2014 overpayment credited to 2015						
	Exempt foreign organizations — tax withheld at source 6 b						
	Tax paid with application for extension of time to file (Form 8868) 6 c	0.					
	Backup withholding erroneously withheld	<u> </u>	į				
7	Total credits and payments. Add lines 6a through 6d		7	-	-		
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8	-			<del></del>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9		-		0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10			•	0.
11	Enter the amount of line 10 to be. Credited to 2016 estimated tax						<del></del>
	t VII-A Statements Regarding Activities		•••				
						Yes	No
та	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?			• • •	1 a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?				1 ь		х
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials public or distributed by the foundation in connection with the activities.	lished					
c	Did the foundation file Form 1120-POL for this year?				1 c		<u></u> _
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			<u> </u>	1		<u> </u>
	(1) On the foundation • \$ (2) On foundation managers • \$						1
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed of foundation managers • \$	ח					
•	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		J
2	If Yes,' attach a detailed description of the activities	• • •	• • •	1			X
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles						
•	of incorporation, or bylaws, or other similar instruments? If Yes, attach a conformed copy of the changes			[	3	. Х	L
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			$\cdots$	4 a		Х
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?			[	4 b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			$\cdots$	5		<u> </u>
	If 'Yes,' attach the statement required by General Instruction T.			1	- 1		l
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:						
	By language in the governing instrument, or				- 1		
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that co with the state law remain in the governing instrument?</li> </ul>	nflict			6	X	J
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col (c), and Part XV				7	X	<del></del>
	Enter the states to which the foundation reports or with which it is registered (see instructions)			-			
	FL - Florida	_		-	ŀ		
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			-			ļ j
	(or designate) of each state as required by General Instruction G'? If 'No,' attach explanation			• • •	8 b		Х
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete	1942(j Part )	(IV .		9	X	
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their na and addresses				10	х	
BAA							2015)

Form	n 990-PF (2015) Moss Foundation Inc 46-4802	331	Р	age 5
Pai	rt VII-A Statements Regarding Activities (continued)		,	
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		х
	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)			Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
44	Website address			
1-4	Located at 2101 N Andrews Ave #300 Wilton Manors Ft. 7/P+4 33311	4) _/12	-396	9
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here		. <b>-</b>	П
	and enter the amount of tax-exempt interest received or accrued during the year			ريا
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, secunties, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country			
Par	rt VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 If any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
7 8	During the year did the foundation (either directly or indirectly)	_ 1		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	°		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X N (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X N			
	(F) Transfer and income a great to a description of a great state of a little and a	Ĭ		
	for the benefit or use of a disqualified person)?	0		
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
t	o If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1ь		
	Organizations relying on a current notice regarding disaster assistance check here			
ď	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?	1c	,	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			
ŧ	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?	•		
ţ	The there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)  (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions.)	2b		х
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.  > 20, 20, 20			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	lo		
ŧ	o If 'Yes,' did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.)	3b	- :	_
<b>4</b> a	a Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?			х
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?			- X
BAA		Form 99		

Form 990-PF (2015)

Form 990-PF (2015) Moss Foundation Ir			46-480	02331	Page 6					
Part VII-B   Statements Regarding Activit		n 4720 May Be Req	uired (continued)							
5 a During the year did the foundation pay or incur a	ny amount to:									
(1) Carry on propaganda, or otherwise attempt t	•	` "	···· Yes X	No						
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?										
(3) Provide a grant to an individual for travel, stu	idy, or other similar purpo	oses?	Yes X	No						
(4) Provide a grant to an organization other than a charitable, etc, organization described in section 4945(d)(4)(A)? (see instructions)										
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes X No										
b If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?										
Organizations relying on a current notice regardi				1						
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	foundation claim exemplifity for the grant?	tion from the		No No						
If 'Yes,' attach the statement required by Regula				'						
6 a Did the foundation, during the year, receive any on a personal benefit contract?				]No						
b Did the foundation, during the year, pay premium	ns, directly or indirectly, o	on a personal benefit con	tract?	6b	X					
If 'Yes' to 6b, file Form 8870 7 a At any time during the tax year, was the foundati	on a narty to a prohibitor	t tay shalter transaction?	□ves □	lua						
b If 'Yes,' did the foundation receive any proceeds										
Part VIII Information About Officers, D										
and Contractors	irectors, Trustees,	roundation mana	gers, nigiliy Palu I	Imployee	:5,					
1 List all officers, directors, trustees, foundation	n managers and their c	compensation (see Inst	ructions).							
(a) Name and address	(b) Title, and average hours per week devoted to position	(c)Compensation (If not paid, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation		e account, llowances					
Robert C. Moss			·· · · · · · · · · · · · · · · · · ·	<u> </u>						
1736 SE 13th Street	President									
Ft Lauderdale FL 33316	3.00	0.	0.		0.					
Alberto P. Miranda										
800 Brickell Ave Ste 1500 Miami FL 33131	Secretary 3.00	0.	_		0					
Joanna Clarkson	3.00	<u>U.</u>	0.	<del> </del>	0.					
2656 NE 27th Ter	Treasurer		•							
Ft Lauderdale FL 33306	3.00	0.	0.		0.					
12 0000	3.00			<del> </del>						
				İ						
				<u> </u>						
2 Compensation of five highest-paid employee										
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expens other a	e account, llowances					
None				<del>                                     </del>	<del> </del>					
			·							
				<u> </u>						
				<u> </u>						
		<u>-</u>	<u> </u>							
				<u> </u>						
Total number of other employees paid over \$50,000 .	<u> </u>	<del> </del>			None					

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3 Five highest-paid independent contractors for profession		ie, enter 'NONE.'	
(a) Name and address of each person paid more than \$5	0,000 <b>(b)</b> Type	of service	(c) Compensation
None			
·			
Total number of others receiving over \$50,000 for professional sen	rices		Nor
Part IX-A Summary of Direct Charitable Activities			
Fait IX-A Summary of Direct Chantable Activities			,
lst the foundation's four largest direct chantable activities during the tax year Inc rganizations and other beneficiaries served, conferences convened, research pa	ude relevant statistical information such as the pers produced, etc	number of	Expenses
1 The foundation conducts an annual qo			
attended by 150 individuals and supp	orted_by_over_40		
organizations.			83,629
2			
3			
	<del></del>		
4			•
			· · · · · · · · · · · · · · · · · · ·
Part IX-B	ents (see instructions)		
Describe the two largest program-related investments made by the	foundation during the tax year on lines	s 1 and 2.	Amount
1			
2			
All other program related investments. See instructions			
All other program-related investments. See instructions.			
<b>*</b>			
Total. Add lines 1 through 3			
BAA			Form <b>990-PF</b> (201

Form 990-PF (2015) Moss Foundation Inc	46-4802	
Part X Minimum Investment Return (All domestic foundations must complete this see instructions.)	part. Foreign fou	ndations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes a Average monthly fair market value of securities	1a	•
b Average of monthly cash balances		0.
C Fair market value of all other assets (see instructions)		0.
d Total (add lines 1a, b, and c)		0.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c	14	<u> </u>
(attach detailed explanation)	j	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d		0.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)		
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	<u> </u>	
6 Minimum investment return. Enter 5% of line 5		0.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) privat	e operating found	
and certain foreign organizations check here	is part.)	
1 Minimum investment return from Part X, line 6	1	
2 a Tax on investment income for 2015 from Part VI, line 5		
b Income tax for 2015. (This does not include the tax from Part VI.)		
C Add lines 2a and 2b	11	
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	
4 Recoveries of amounts treated as qualifying distributions		
5 Add lines 3 and 4	L	
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
Part XII Qualifying Distributions (see instructions)		_
1 Amounts paid (including administrative expenses) to accomplish chantable, etc, purposes:	1a	56,000
a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26		56,000.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out chantable, etc, purposes		<del>.</del>
	<del>                                     </del>	
3 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)		
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line		56,000.
	· · · · · · · · · · · · · · <del>· · · · ·</del>	30,000.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4		56,000.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating valualifies for the section 4940(e) reduction of tax in those years.	-	n
BAA		Form 990-PF (2015)

## Part XIII Undistributed Income (see instructions)

1. Distributable amount for 2015 from Parl XI. line 7			(a) Corpus	(b) Years prior to 2014	(c) 2014	<b>(d)</b> 2015
B Enter amount for 2014 only   0	1	Distributable amount for 2015 from Part XI,				
b Total for pitar years 20 _ 20 _ 20 _ 30 _ 30 _ 35 _ 35 = 35 = 35 = 35 = 35 = 35 = 35	2	Undistributed income, if any, as of the end of 2015				
3 Excess distributions carpyose, If any, to 2015 a From 2010		Benter amount for 2014 only			0.	
a From 2010						
b From 2011		· · · · · · · · · · · · · · · · · · ·				
6 From 2012		<u> </u>				
d From 2013						
F Total of lines 3a through e						
Total of lines 3a through e		<del></del>				
4 Qualifying distributions for 2015 from Part XII, line 4:						
XII. Inte 4: P. S. S. 5.00.  a Applied to 2014, but not more than line 2a.  b Applied to undistributed income of prior years (Election required — see instructions).  c Treated as distributions out of corpus (Election required — see instructions).  d Applied to 2015 distributable amount  e Remaining amount distributed out of corpus  5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount mast be shrown in column (a), the same amount mast be shrown in column (a), the same amount mast be shrown in column (a), the same amount mast be shrown in column (a), the same amount mast be shrown in column (a), the same amount mast be shrown in column (a), the same amount mast be shrown in column (a), the same amount mast be shrown in column (a), the same amount mast be shrown in column (a), the same amount mast be shrown in column (a), the same amount mast be shrown in column (a), the same amount mast be shrown in column (a), the same amount of prior years' undistributed income to visich a notice of deficiency has been previously assessed  d Subtract line 6c from line 6b. Taxable amount — see instructions  d Subtract line 6c from line 6b. Taxable amount — see instructions  o. e Indistributed income for 2015. Subtract line 4a from line 2a. Taxable amount — see instructions  o  f Undistributed income for 2015. Subtract line 4a from line 2a. Taxable amount — see instructions  o  f Line strained as distributions out of corpus to satisfy requirements imposed by section 170(b) (1) (1) (7 or 44(2)(3)) (Election may be required — see instructions)  o  Excess distributions carryover form 2010 not applied on line 5 or line 7 (see instructions)  o  Excess from 2011  o  b Excess from 2011  o  c Excess from 2013  o  d Excess from 2014  o  Excess from 2015  o  d Excess from 2015  o  excess from 2015  o  c Excess from 2015  o  d Excess from 2015  o  c Exce			50,000.			<del></del> -
a Applied to 2014, but not more than line 2a.  b Applied to undistributed income of prior years (Election required — see instructions).  c Treated as distributions out of corpus (Election required — see instructions).  d Applied to 2015 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryer applied 2015.  (If an amount appears in column (a), the same amount must be shown in column (a).)  6 Enter the net total of each column as indicated below: a Corpus Add lines 3/, 4c, and 4e Subtract line 5 106,000.  b Prior years' undistributed income. Subtract 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 assessed d Subtract line 6c from line 8b. Taxable amount — see instructions  c Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount — see instructions  f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016.  7 Amounts treated as distributions out of your corpus to statisty required 424(2)(1) profession may be required — see instructions)  8 Excess distributions carryover from 2010 not applied on line 5 or line? (see instructions) 0. 9 Excess distributions carryover from 2010 not applied on line 5 or line? (see instructions) 0. 9 Excess from 2011 0. 10 Analysis of line 9: 10 Excess from 2014 11 Oc. 12 Excess from 2014 13 Oc. 14 Excess from 2014 15 Oc. 16 Excess from 2015 16 Excess from 2015 17 Oc. 18 Excess from 2015 18 Excess from 2015 19 Oc. 19 Excess from 2015 10 Exc	4	· · · .				
b Applied to undistributed income of prior years (Election required – see instructions).  c Treated as distributions out of corpus (Election required – see instructions).  d Applied to 2015 distributable amount						
(Election required – see instructions)						
(Election required — see instructions)	ı					
e Remaining amount distributed out of corpus  5 Excess distributions carryover applied to 2015  (If an amount appears in column (d), the same amount must be shown in column (a).)  6 Enter the net total of each column as indicated below:  a Corpus Add lines 3f. 4c, and 4e Subtract line 5  b Prior years' undistributed income. Subtract line 4b from line 2b.  c Enter the amount of prior years' undistributed income for which a notice of deficiency has been insued, or on which the section 4942(a) tax has been previously assessed  d Subtract line 6c from line 6b. Taxable amount – see instructions.  e Undistributed income for 2014 Subtract line 4a from line 2a. Taxable amount – see instructions.  f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016  7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required – see instructions).  8 Excess distributions carryover from 2010 not applied on line 5 or line? (see instructions).  9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a.  106,000.	•	Treated as distributions out of corpus (Election required – see instructions)				
5 Excess distributions carryover applied to 2015 . (If an amount appears in column (a), the same amount must be shown in column (a).)  6 Enter the net total of each column as indicated below: a Corpus Add lines 31, 4c, and 4e Subtract line 5		•••				
(If an amount appears in column (a), the same amount must be shown in column (a).)  6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5		, ,	56,000.			
Indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5	5	(If an amount appears in column (d), the	·····			
b Prior years' undistributed income. Subtract 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 assessed.  d Subtract line 6c from line 6b. Taxable amount — see instructions	_	indicated below:	106.000.			
line 4b from line 2b	ı	Prior years' undistributed income. Subtract				
income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	•	line 4b from line 2b		0.		
amount — see instructions	•	income for which a notice of deficiency has been issued, or on which the section 4942(a)				
e Undistributed income for 2014 Subtract line 4a from line 2a. Taxable amount — see instructions	•			,		
Inne 2a. Taxable amount — see Instructions						
4d and 5 from line 1. This amount must be distributed in 2016	•				0.	······································
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)	f	4d and 5 from line 1. This amount must be				0.
applied on line 5 or line 7 (see instructions)	7	corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election				
Subtract lines 7 and 8 from line 6a	8	Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	0.			
10 Analysis of line 9:  a Excess from 2011	9					
b Excess from 2012	10	Analysis of line 9:				
<b>c</b> Excess from 2013 0. <b>d</b> Excess from 2014 50,000. <b>e</b> Excess from 2015 56,000.	ε	Excess from 2011 0 .		<b>[</b>		
d Excess from 2014	t	P Excess from 2012				
e Excess from 2015	•	Excess from 2013 0 .				
	C	Excess from 2014 50,000.				
		···				

Form 990-PF (2015) Moss Foundation Inc

PartXVI Supplementary Information (continued)

3 Grants and Contributions Paid During the You		ine rayinen	I I	
Recipient	If recipient is an individual, show any relationship to any foundation manager or	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year				
Handy, Inc. 501 NE 8 St			Assistance with at-risk children.	
Ft Lauderdale FL 33304		PC	ac-113k chilidien.	30,000.
The Eric Trump Foundation			Raise funds for	23, 3333
725 Fifth Ave 16th Floor		:	St Jude Children's	
New York NY 10022		PC	Research Hospital	10,000.
Humane Society of Broward			Provide shelter, aid,	
2070 Griffin Road Fort Lauderdale FL 33312		DC.	& adoption to animals	F 000
Fort Lauderdale FL 33312 Operation Lift Hope		PC	& educate the community.  To end veteran	5,000.
PO Box 579			and family homelessness	
Fort Lauderdale FL 33302		PC	in the community.	10,000.
Children's Miracle Network Hospitals			To raise funds for	,
205 West 700 South			children's hospitals	
Salt Lake City UT 84101		PC	and medical research.	1,000.
			<u> </u>	
b Approved for future payment	<u> </u>	<u>.</u>	3a	56,000.
		1		
	İ			
	I	1	ı	

#### Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.		Unrelated business income		Exclude	d by section 512, 513, or 514	(e)	
		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions.)	
1 Pro	gram service revenue.			code			
a							
b		_			-,		
c	<del>_</del>						
d				ļ. <u>.                                   </u>			
e							
f							
g Fee	s and contracts from government agencies						
2 Mei	mbership dues and assessments						
3 Inter	est on savings and temporary cash investments						
4 Divi	dends and interest from securities						
5 Net	rental income or (loss) from real estate:						
a Det	ot-financed property						
b Not	debt-financed property		v ·				
6 Net	rental income or (loss) from personal property			<u> </u>			
	er investment income		-			· · · · · · · · · · · · · · · · · · ·	
8 Gair	or (loss) from sales of assets other than inventory						
	income or (loss) from special events		·	<u> </u>		98,539.	
	ss profit or (loss) from sales of inventory		-	<del>                                     </del>		, , , , , , , , , , , , , , , , , , ,	
	er revenue:						
а							
ь							
				· · · · · · · · · · · · · · · · · · ·			
d						<del></del>	
44	ototal. Add columns (b), (d), and (e)					98,539.	
13 Tot	atotal. Add columns (b), (d), and (e)	L		<u> </u>	13	98,539.	
	sheet in line 13 instructions to verify calculations				· · · · · · · · · · · · · · · · · · ·	30,333.	
	<del></del>	·	<del></del>				
Part XV	/I-B Relationship of Activities to the	Accomp	lishment of Exemp	ot Purp	oses		
Line No	. Explain below how each activity for which inco	me is report	ed in column (e) of Part	XVI-A co	ontributed importantly to t	he	
▼	accomplishment of the foundation's exempt po	urposes (other	er than by providing fund	s for suc	ch purposes). (See instru	ctions.)	
9	Golf tournament - this is an annual ev	ent that n	romotes awareness of	the c	paritable purpose of	the foundation	
	- OUZ GOUZNAMONE ENZO ZO AN ANNAGZ CV	<u> p</u>	Tomocco Guareness of		MIICADIC PAIPOSC OI	the roundacton;	
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					<del></del>		

Form 990-P		oundation			46-4802		Pa	ge <b>13</b>
Part XVII	Information Reg Exempt Organiz	garding Tra cations	nsfers To and Transaction	ns and	Relationships With Noncha	ritable		
4 Dudith	a accompation disactly a	r indicathi and	age in any of the following with ai	u othor o	-conjugation		Yes	No
descri	bed in section 501(c) of to political organization	the Code (other	er than section 501(c)(3) organiza	tions) or i	n section 527,			
a Trans	fers from the reporting for	oundation to a	noncharitable exempt organizatio	n of <sup>.</sup>				<u> </u>
(1) C	ash					1 a (1)		Х
(2) O	ther assets					1 a (2)		Х
<b>b</b> Other	transactions <sup>,</sup>							
(1) S	ales of assets to a noncl	hantable exem	pt organization		<i></i>	1 b (1)		_X_
(2) P	urchases of assets from	a noncharitable	e exempt organization			1 b (2)		Х
(3) R	ental of facilities, equipn	nent, or other a	ssets			1 b (3)		X
(4) R	eimbursement arrangen	nents				1 b (4)		Х
(5) Lo	oans or loan guarantees	. <b></b> .				1 b (5)		Х
(6) P	erformance of services of	or membership	or fundraising solicitations			1 b (6)		Х
c Sharir	ng of facilities, equipmen	nt, mailing lists,	other assets, or paid employees			1 c		Х
		angement, sho	w in column (d) the value of the g of noncharitable exempt organization	oods, oth	received less than fair market value i er assets, or services received.  Description of transfers, transactions, and si		gements	s
	, ,			<del>  `</del>	·		<u> </u>	
	_							
,								
—								
descri	bed in section 501(c) of	the Code (other	d with, or related to, one or more er than section 501(c)(3)) or in sec	tax-exem tion 527?	pt organizations	. Yes	x	No
	(a) Name of organization		(h) Time of account		(a) Decembra of select		•	
	(a) Name of organization	11	(b) Type of organization		(c) Description of relati	unsnip		
<del></del>								

BAA	
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Sign

Here

Paid

**Preparer** 

**Use Only** 

Signatu

e of officer or trustee

Firm's name

Firm's address

Print/Type preparer's name

May the IRS discuss this return with the preparer shown below (see instructions)?

Yes

P00236818

(954) 480-9477

Lawrence N. Reynolds

FL

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

Date

Preparer's signature

REYNOLDS & PICCIANO LLC

812 SE 8TH AVE

DEERFIELD BEACH

Treasurer

Check

Phone no

self-employed

Firm's EIN > 01-0789745

Date

33441-5610

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

Schedule of Contributors

OMB No 1545-0047

2015

Department of the Treasury Internal Revenue Service

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

Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number 46-4802331 Moss Foundation Inc Organization type (check one): Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt chantable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. To ran organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, chantable, etc., contributions totaling \$5,000 or more during the year

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

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2015)	Page	1 of 3 of Part
Name of org		' '	r identification number
Moss E	Coundation Inc	46-48	302331
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space	is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Moss Construction Inc		Person X Payroll
	2101 North Andrews Ave	\$85,000.	Noncash
	Wilton Manors FL 33311		(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	C_Davis_Electric_Inc		Person X Payroll
	1701 SW 100th Ter	\$ <u>10,500.</u>	Noncash
	Miramar FL 33025		(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Power Design Inc		Person X
	11600 Ninth Street North	\$ <u>8,000.</u>	Noncash
	Saint Petersburg FL 33716		(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Lotspeich Co of FL Inc		Person X
	6351 NW 28th Way Ste A	\$ <u>25,500.</u>	Noncash
	Fort Lauderdale FL 33309		(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	May, Meacham & Davell		Person X
	1 Financial Plaza #2602	\$ <u>5,000.</u>	Noncash
	Fort Lauderdale FL 33394		(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	Hudson Family Foundation		Person X Payroll
	300 N. Dean Road, Suite 5 - #163	\$ <u>6,500.</u>	Noncash
	Auburn AL 36830		(Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2015)	Page	2 of 3 of Part I			
Name of org		1 ' '	r Identification number			
	Foundation Inc		302331			
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
7	Tropic Mechanical Contractors		Person X Payroll			
	2176 NW 82nd Ave	\$ <u>6.500</u> .	Noncash			
	Doral FL 33122		(Complete Part II for noncash contributions)			
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
8	Aon Foundation		Person X Payroll			
	P.O. Box 81200	\$ <u>5,000.</u>	Noncash			
	Chicago IL 60681		(Complete Part II for noncash contributions.)			
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
9	S&S Painting and Waterproofing		Person X			
	2801 Powerline Road	\$ <u>5,500</u> .	Payroll Noncash			
	Pompano Beach FL 33069		(Complete Part II for noncash contributions.)			
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
10.	Florida Concrete Unlimited		Person X Payroll			
	14094 Sw 142 Ave	\$ <u>5.000</u> .	Noncash			
	Miami FL 33186		(Camplete Dark II for			
	Miami		(Complete Part II for noncash contributions)			
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions				
(a) Number	(b)	Total	(d) Type of contribution  Person			
Number	(b) Name, address, and ZIP + 4  Drywall Contractors	Total	(d) Type of contribution			
Number	(b) Name, address, and ZIP + 4  Drywall Contractors	Total contributions	Type of contribution  Person X  Payroll			
Number	(b) Name, address, and ZIP + 4  Drywall Contractors  17891 S Dixie Hwy #105	Total contributions	rioncash contributions )  (d) Type of contribution  Person X Payroll Noncash  (Complete Part II for			
Number	(b)  Name, address, and ZIP + 4  Drywall Contractors  17891 S Dixie Hwy #105  Miami FL 33157  (b)	\$ 5 00 .	rioncash contributions )  (d) Type of contribution  Person X Payroll Noncash (Complete Part II for noncash contributions )  (d) Type of contribution  Person X			
11_ (a) Number	Name, address, and ZIP + 4  Drywall Contractors  17891 S Dixie Hwy #105  Miami FL 33157  Name, address, and ZIP + 4	\$ 5 00 .	Type of contribution  Person X Payroll Noncash (Complete Part II for noncash contribution)  (d) Type of contribution			
11 -  (a) Number	Name, address, and ZIP + 4  Drywall Contractors  17891 S Dixie Hwy #105  Miami FL 33157  Name, address, and ZIP + 4  Cemex	\$5_00 .  (c) Total contributions	roncash contributions )  Type of contribution  Person X Payroll			

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Page

	B (Form 990, 990-EZ, or 990-PF) (2015)	3 of 3 of Part I	
Name of org	r Identification number		
	Contributors (see instructions). Use duplicate copies of Part I if additional space		302331
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>13</u> _	Steel Fabricators LLC  721 NE 44 St  Oakland Park FL 33334	\$ <u>5,</u> 500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14.	Moraca Builders Inc  250 NW 4 Diagonal  Boca Raton FL 33432	\$ <u>5,</u> 500.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
BAA	TEEA0702 10/12/15	Schedule B (Form 9	190, 990-EZ, or 990-PF) (2015)

Moss Foundation Inc 46-4802331 1

Additional Information

Form 990-PF Line 8

The state of Florida does not require the filing of Form 990-PF.

Moss Foundation Inc

46-4802331

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Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt	
Other expenses:	Rev/E
Outer expenses.	I Kevie

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Golf course fee	14,182.			
Meals expense	9,545.			
Golfer gift bag exp	29,859.			
Raffle items	16,259.			
Event planning	7,633.			
Promotion	2,813.			
Trophies	2,649.			
Miscellaneous	687.			

Total

83,627.

Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Crowe Horwath Reynolds & Picciano	Accounting Tax preparation	253. 2,250.			

Total

2,503.