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Form **990-PF**

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

▶ 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.lrs.gov/form990pf.

OMB No 1545-0052

For	calen	dar year 2045 or tax year beginning APR	1, 2015	, and ending	MAR 31, 2016	<u> </u>
Na	ne of	foundation			A Employer identificatio	n number
_J	• _ :	IRA AND NICKI HARRIS FO	UNDATION, IN	C	65-0805468	3
Nur	nber a	nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
		LER DONTEN ET AL 505 S		900	561-832-92	292
		own, state or province, country, and ZIP or foreign p			C if exemption application is	pending, check here
		T PALM BEACH, FL 33401			<u>-</u>	
G (Check	all that apply: Initial return		ormer public charity	D 1. Foreign organization	s, check here
		Final return	Amended return		Foreign organizations m check here and attach c	eeting the 85% test,
		Address change	Name change		1	
H (type of organization: X Section 501(c)(3) ex	xempt private roundation Other taxable private founda	ation	E If private foundation sta	
<u> </u>			ing method: X Cash	Accrual	under section 507(b)(1	
		, ,	ther (specify)	Accidal	F If the foundation is in a under section 507(b)(1	
•	•\$	Part II, coi (c), line 16)	ımn (d) must be on cash l	basis)	under section 507(b)(1)(b), check here
	art I	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	815,001.		N/A	
	2	Check If the foundation is not required to attach Sch. B				
1	3	Interest on savings and temporary cash investments	37.	37.		STATEMENT 1
2	4	Dividends and interest from securities	21,936.	21,936.		STATEMENT 2
<u></u>	5a	Gross rents				
	b	Net rental income or (loss)			-	
<u>_</u> 5	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	61,304.			
306 4 Revenue	b	assets on line 6a		61,304.	-	
3)UC 4 F	7	Capital gain net income (from Part IV, line 2)		01,304.		
מ	8	Net short-term capital gain Income modifications		<u>. </u>		
	102	Gross sales less returns and allowances				
		Less Cost of goods sold		<u> </u>		
		Gross profit or (loss)				
	1	Other income				
	12	Total Add lines 1 through 11	898,278.	83,277.		
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages			1	
s	1	Pension plans, employee benefits	1 100			1 100
Jses	16a	Legal fees STMT 3	1,188.	0,		1,188.
ē	b	Accounting fees STMT 4	5,000.	2,500	RECEIVE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
úi e	1.0	Other professional fees			7	
ŧ	17 18	Interest Taxes			AUG 1 2 201	 G
str	19	Depreciation and depletion				
<u> </u>	20				OGDEN, U	
Adr	21	Travel, conferences, and meetings				
þ	22	Printing and publications				
Operating and Administrative Expens	23	Other expenses STMT 5	133.	0.		133.
in in	24	Total operating and administrative				
i e		expenses Add lines 13 through 23	6,321.	2,500.		3,821.
O	25	Contributions, gifts, grants paid	814,000.		+	814,000.
	26	Total expenses and disbursements	000 201	2 500		017 001
	0-	Add lines 24 and 25	820,321.	2,500.		817,821.
	27		77,957.			
	1	Net investment income (if negative, enter -0-)	11,331.	80,777.		
		Adjusted net income (if negative, enter -0-)	-		N/A	
500		Trainers a net meeting to reader to come a 1		<u> </u>		- 000 PF

433 B

<u>For</u>	m 99	0-PF (2015) J. IRA AND NICKI HARRIS		INC. 65-	U8U5468 Page 2
D	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	<u> </u>
	ar <u>t</u>	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	169.	145,420.	145,420.
	1	Savings and temporary cash investments	80,822.	55,908.	55,908.
		• 1	00,022.	33,3001	33,300.
	3	Accounts receivable ►			
	1	Less: allowance for doubtful accounts ▶			
	4	Pledges receivable -			
	1	Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			-
	`			i	
	l _	disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ĕ	10a	Investments - U.S. and state government obligations			
		Investments - corporate stock STMT 6	624,455.	582,075.	986,100.
	1 .		<u> </u>	302,0,30	300,1000
	1	Investments - corporate bonds			
	11	Investments - land, buildings and equipment basis			
	ĺ	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	-	Land, buildings, and equipment; basis ▶			
	' 7	Less accumulated depreciation			
		<u></u>	897,480.	897,480.	453,459.
	ì		037,400.	037,400.	433,433.
	16	Total assets (to be completed by all filers - see the	1 600 006	1 500 000	1 640 005
		instructions. Also, see page 1, item I)	1,602,926.	1,680,883.	1,640,887.
	17	Accounts payable and accrued expenses	1,000.	1,000.	
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ē					
Ē	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)			
	ŀ		1 000	1 000	
_	23	Total liabilities (add lines 17 through 22)	1,000.	1,000.	
	1	Foundations that follow SFAS 117, check here			
	ŀ	and complete lines 24 through 26 and lines 30 and 31			
ès	24	Unrestricted			
ũ	25	Temporarily restricted			
ala	1	, ,			
9	26	Permanently restricted Foundations that do not follow SFAS 117, check here			
Š		,			
Net Assets or Fund Balances		and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds	1,601,926.	1,679,883.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
e	30	Total net assets or fund balances	1,601,926.	1,679,883.	
Z	اندا	Total liet assets of fullo parances	1,001,019	2,0.3,000	
	l		1,602,926.	1,680,883.	
_	31	Total liabilities and net assets/fund balances		1,000,003.	
F	art	III Analysis of Changes in Net Assets or Fund B	alances		
				· ··	
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1	1,601,926.
2	•	r amount from Part I, line 27a		2	77,957.
_		ir increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	1,679,883.
				5	0.
		reases not included in line 2 (itemize)	slump (h) line 00		
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	oiumn (a), iine 30	6	1,679,883.
					Form 990-PF (2015)

	RA AND NICKI HA			<u>N,</u>	INC.	6	<u>5-080</u>	5468	Page 3
(a) List and descri	be the kind(s) of property sold (e.g ehouse; or common stock, 200 shs	., real estate,	<u> </u>	(b) H	ow acquired Purchase Donation	(c) Date (mo., d	acquired lay, yr.)	(d) Da (mo., d	te sold ay, yr.)
1a 5000 UNITS TOWN	EBANK PORTSMOUT	H VA		-	P	05/1	2/11	10/2	2/15
b									_,
C									
d									
e		_I	_	<u> </u>	,				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				ain or (loss s (f) minus ((g)	·
a 103,685.		,	42,38	1.				61	<u>,304.</u>
b				_					
C				_					
d				-		<u>-</u> -			
Complete only for assets showing	gain in column (h) and owned by	the foundation	on 12/31/60			N Coupe (C	ol. (h) gain		
Complete only for assets showing	(j) Adjusted basis	1	cess of col. (I)			l. (k), but r	not less thar	n -0-) or	
(i) F.M.V. as of 12/31/69	(i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any		Losses	(from col. (h))				
a						_		61	,304.
b									
С									
d	·								
<u>e</u>									
Constal anim not speame or (not one	If gain, also enter	in Part I, line	7	}	2			61	,304.
2 Capital gain net income or (net cap			17	가	2	· · · · · · · · · · · · · · · · · · ·		01	, 304.
3 Net short-term capital gain or (loss		ıd (6);		7	- 1				
If gain, also enter in Part I, line 8, of the line 1, line 8, of the line 1, line 8	column (c).				3		N/A		
Part V Qualification Ur	nder Section 4940(e) for	Reduced	Tax on Net	Inve	stment In	come			
(For optional use by domestic private If section 4940(d)(2) applies, leave thi Was the foundation liable for the secti If "Yes," the foundation does not quality	s part blank. on 4942 tax on the distributable am	nount of any y	ear in the base per					Yes	X No
	ach column for each year; see the ir		•	ntries.					
(a) Base period years	(b)			(c)			Dietrik	(d) oution ratio	
Base period years Calendar year (or tax year beginnin	Administration and the contraction	tributions	Net value of no		able-use assets	. .	col. (b) div	ided by col.	(c))
2014	95	4,856.		1,	599,938	3.		. 5	96808
2013	1,67	3,297.		2,	187,329).		7	64996
2012		<u>5,436.</u>			482,828				<u>44541</u>
2011		<u>8,764.</u>			397,870				<u>70647</u>
2010	60	<u>1,511.</u>		2,	265,718	3.		. 2	<u>65484</u>
2 Total of line 1, column (d)						2		2.3	42476
3 Average distribution ratio for the 5	-year base period - divide the total (on line 2 by 5,	or by the number	of yea	rs				
the foundation has been in existen	ce if less than 5 years					3		4	<u>68495</u>
4 Enter the net value of noncharitable	e-use assets for 2015 from Part X,	line 5				4	-	1,696	,816.
5 Multiply line 4 by line 3						5		794	<u>,950.</u>
6 Enter 1% of net investment income	e (1% of Part I, line 27b)					6			808.
7 Add lines 5 and 6						7		795	<u>,758.</u>
8 Enter qualifying distributions from	Part XII, line 4					8		817	,821.
	line 7, check the box in Part VI, line	1b, and comp	plete that part usin	g a 1%	tax rate.				
See the Part VI instructions.							<u>_</u>	000	DE :00 :=
523521 11-24-15							F	orm 990-	PF (2015)

	990-PF (2015) J. IRA AND NICKI HARRIS FOUND. TVI Excise Tax Based on Investment Income (Section 494)	<u>АТІО</u> Ю(а), 4	N, IN 1940(b),	<u>C.</u> 4940(e), or 4	65-1 1948 -	08054 see ins	68 tru	ctio	Page 4 ns)
	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔙 and e)					
	Date of ruling or determination letter: (attach copy of letter if ne							_	
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here		and enter 1	%	1			8	08.
	of Part I, line 27b								
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 49			ol. (b). 丿					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. C	Others en	ter -0-)		2	-			<u>0.</u>
3 /	Add lines 1 and 2				3_			<u> 8 </u>	08.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. (Others er	nter -0-)		4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				5		_	8	08.
	Credits/Payments:	i	1	0.50					
	2015 estimated tax payments and 2014 overpayment credited to 2015	6a		863.	-				
	Exempt foreign organizations - tax withheld at source	6b			-				
	Tax paid with application for extension of time to file (Form 8868)	_6c							
	Backup withholding erroneously withheld	<u>6d</u>			{ _			_	
	Total credits and payments. Add lines 6a through 6d				7			8	<u>63.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ached		_	8				
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed				9				
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			I	10				<u>55.</u>
	Enter the amount of line 10 to be: Credited to 2016 estimated tax TVII-A Statements Regarding Activities		55	• Refunded ►	11				0.
		alation a	- d.d.t.aa.	nate or interior			-13	V 00	No
	During the tax year, did the foundation attempt to influence any national, state, or local legi-	Siation of	r did it partii	sipate of intervent	; 1[]	-	\neg	163	
	any political campaign?	(inotruotion	a for the definition	.\0		a	-	X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo					<u> </u>	b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities ar	ia copie	es or arry ri	iateriais publism	eu or				
	distributed by the foundation in connection with the activities					١,			v
	Did the foundation file Form 1120-POL for this year? Enter the amount (if any) of tax on political expenditures (section 4955) imposed during th	o voar					С		X
	(1) On the foundation. > \$ 0. (2) On foundation managers			0.					
	Enter the reimbursement (if any) paid by the foundation during the year for political expend	o. p iiture tav	ımnosed or		-				
	managers. > \$ 0 .	marc tax	iiiposca oi	1 louridation		1			
	Has the foundation engaged in any activities that have not previously been reported to the	IRS?					2	}	х
	If "Yes," attach a detailed description of the activities.					 -	-		
	Has the foundation made any changes, not previously reported to the IRS, in its governing	ınstrume	ent, articles	of incornoration, (nr			ĺ	l
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change		, a	ooo. p o. ao,			3		х
	Did the foundation have unrelated business gross income of \$1,000 or more during the year						a	-	X
	If "Yes," has it filed a tax return on Form 990-T for this year?				N	/2	b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year	?				,	5		X
	If "Yes," attach the statement required by General Instruction T						Ť		
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	either:				1		ł	
	By language in the governing instrument, or					İ		}	
	By state legislation that effectively amends the governing instrument so that no mandato	ry directi	ons that co	nflict with the state	e law			İ	
	remain in the governing instrument?						<u>;</u>	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co.	mplete i	Part II, col.	(c), and Part XV	/		,	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instruction FL	ons) ►							
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					_8	b	Х	
	Is the foundation claiming status as a private operating foundation within the meaning of si				endar				
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"					9	<u> </u>		<u> </u>
10_	Did any persons become substantial contributors during the tax year? if "Yes," attach a sched	lule listing	their names a	nd addresses		1			<u>X</u>
						Form 9	ìQΛ.	.PF/	/2015\

Pε	art VII-A Statements Regarding Activities (continued)			
			Yes	No
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		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	١.,		
40	If "Yes," attach statement (see instructions)	12	v	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	Х	
14	The books are in care of ► CALER, DONTEN ET AL. Telephone no. ► 561-8	32-9	292	
17	Located at ▶ 505 S. FLAGLER DR. STE. 900, WEST PALM BEACH, FL ZIP+4 ▶3		<u> </u>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		İ	
_	foreign country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		Yes	Na
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		res	NO
18	a During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			Ī
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			Ī
	a disqualified person?			Ī
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			Ī
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			Ī
	(5) Transfer any income or assets to a disqualified person (or make any of either available			ı
	for the benefit or use of a disqualified person)?	1		Ī
	(6) Agree to pay money or property to a government official? (Exception Check "No"	İ		ı
	if the foundation agreed to make a grant to or to employ the official for a period after			ı
	termination of government service, if terminating within 90 days.) Yes X No			
	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)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	10		
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		İ	
	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)):			
a	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? Yes X No		Ì	
	If "Yes," list the years \(\sum_{			
į,	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.) N/A	2b		
	the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
t	b 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		į	
	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,	0.		
4.	Form 4720, to determine if the foundation had excess business holdings in 2015) N/A Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b 4a		
	b Did the foundation invest during the year any amount in a mariner that would jeopardize its charitable purpose that	-7a		
•	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		х
		orm 99 0	-PF	

Form 990-PF (2015) J. IRA AND NICKI HARRIS	FOUNDATION,	INC.	65-08054	58 Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				-
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	es X No	
(2) Influence the outcome of any specific public election (see section 4955); or	r to carry on, directly or indi			
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	>	Ye	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
4945(d)(4)(A)? (see instructions)		Y6	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or			
the prevention of cruelty to children or animals?		Ye	es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ler the exceptions described	in Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A 5	b
Organizations relying on a current notice regarding disaster assistance check h	ere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it maint	ained		
expenditure responsibility for the grant?			es 🔲 No	
If "Yes," attach the statement required by Regulations section 53 4945	5-5(d)			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?		Y6	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		6	b 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	helter transaction?	Y6	es X No	_
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A 7	b
Part VIII Information About Officers, Directors, Trusto	ees, Foundation M	anagers, Highly	y	
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their		1	Lana	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	enter -0-)	compensation	allowances
SEE STATEMENT 8		. 0.	0.	0.
			ĺ	
		<u> </u>	L	
2 Compensation of five highest-paid employees (other than those inc		e, enter "NONE."	(d) Contributions to	(a) Evpapas
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	(e) Expense account, other allowances
	devoted to position	,,,	compensation	allowances
NONE				
·			1	
		1		
			ļ <u>-</u>	
	<u></u>			
	L			
Total number of other employees paid over \$50,000				0
			Form	990-PF (2015)

Form 990-PF (2015) J. IRA AND NICKI HARRIS FOUNDATION, INC. Part VIII Information About Officers, Directors, Trustees, Foundation Managers Paid Employees, and Contractors (continued)	65-080 , Highly	<u> 15468 Page 7</u>
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Ty	ype of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	as the	Expenses
1		
SEE STATEMENT 9		0.
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 <u>N/A</u>		
2 N/A		0.
		0.
All other program-related investments. See instructions. 3 N/A		
		0.
Total Add lines 1 through 3		Λ.

Form **990-PF** (2015)

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

Form **990-PF** (2015)

,821.

808.

013.

3a 3b

4

5

6

a Suitability test (prior IRS approval required)

income. Enter 1% of Part I, line 27b

b Cash distribution test (attach the required schedule)

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,		·		
line 7 2 Undistributed income, if any, as of the end of 2015				84,033.
a Enter amount for 2014 only			0.	
b Total for prior years:				
b rotal for prior yours.		0.		
3 Excess distributions carryover, if any, to 2015:	1			
a From 2010 488, 293.				
b From 2011 770,696.				
c From 2012 731, 493.				
d From 2013 1,564,989.				
e From 2014 874,877.				
f Total of lines 3a through e	4,430,348.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ►\$ 817,821.				
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				84,033.
e Remaining amount distributed out of corpus	733,788.	,		<u> </u>
5 Excess distributions carryover applied to 2015	0.			0.
(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	5,164,136.			
b Prior years' undistributed income. Subtract	1 1			
line 4b from line 2b	,	0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				-
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				<u> </u>
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	488,293.			
9 Excess distributions carryover to 2016				
Subtract lines 7 and 8 from line 6a	4,675,843.			
10 Analysis of line 9:				
a Excess from 2011 770,696.				
b Excess from 2012 731,493.				
c Excess from 2013 1,564,989.				
d Excess from 2014 874,877.				
e Excess from 2015 733,788.				Co 000 DE (0045)

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Part XIV Private Operating F		ARRIS FOUN.			05468 Page 1
				N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for		-	▶ └	40.40(-)(0) ==	40(.)(5)
b Check box to indicate whether the found		ng roundation described	Prior 3 years	4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
income from Part I or the minimum	(4) 2010	(0)2014	(0) 2010	(0) 2012	(c) rotar
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed			li .		
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the	- : - : - : - : : : : : : : : : : : : :				-
alternative test relied upon; a "Assets" alternative test - enter;					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest,		ļ			
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		<u> </u>			
Part XV Supplementary Info			if the foundation	had \$5,000 or mo	re in assets
at any time during		ructions.)			
1 Information Regarding Foundationa List any managers of the foundation when the foundation is a single factor of the foundation of the foundation when the foundation is a factor of the foundation of the foundation when the factor of the foundation is a factor of the factor of t		than 2% of the total co	atributions received by the	foundation before the clos	e of any tay
year (but only if they have contributed i	more than \$5,000). (See s	section 507(d)(2).)	in buttons received by the	Touridation boloro the elec-	o or any tax
NONE					
b List any managers of the foundation wh			(or an equally large portion	on of the ownership of a pa	rtnership or
other entity) of which the foundation ha	is a 10% of greater liftere	SI.			
NONE	Sien Count Citt Loon	Cabalavahin ata I)		
2 Information Regarding Contribut Check here ➤ X if the foundation the foundation makes gifts, grants, etc.	only makes contributions	to preselected charitabl	e organizations and does n		
a The name, address, and telephone num					
a The name, address, and telephone han	ibor of a mail address of	and pordon to amon ap			
b The form in which applications should	be submitted and informa	ation and materials they	should include:		
c Any submission deadlines:				 .	
d Any restrictions or limitations on award	is, such as by geographic	al areas, charitable field	s, kinds of institutions, or o	other factors:	
•					
523601 11-24-15					Form 990-PF (2015)

3 Grants and Contributions Paid During the Y		Pormont	-	
Recipient	If recipient is an individual.			-
	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	status of recipient		
a Paid during the year				
SEE LIST ATTACHED				
		<u></u>		814,000.
Total			► 3a	814 000
b Approved for future payment				
NONE		Ì		
				
Total			<u>▶ 3b</u>	0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated t	ousiness income		section 512, 513, or 514	(e)
•	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a b c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.	- 0000				
f					
				_	, <u></u>
					
			1 1 1	27	
			14	21,936.	
·	-		14	21,930.	
					
	-				·
• • •					.
					
			18	61,304.	
11 Other revenue:					
a	_				
d					
	_				
12 Subtotal. Add columns (b), (d), and (e)			0.	83,277.	0.
	_			13	83,277.
		nplishment of	Exempt Pu	ırposes	
▼ the foundation's exempt purposes (other the foundation) of the foundation of t				importantly to the accomp	olishment of
1 N/A					
	_				
					.
					
		-	··		
		 			
				•	
					··· •

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Form 990-PF (2015) J. IRA AND NICKI HARRIS FOUNDATION, INC. 65-0805468

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of									Yes	No
	(other than section 501(c)				I organiza	ations?				
a Transfers from the reporting foundation to a noncharitable exempt organization of:										
(1) Cash								1a(1)		<u>X</u>
	(2) Other assets									<u> </u>
b Other tran										
	(1) Sales of assets to a noncharitable exempt organization									<u> </u>
	hases of assets from a nor		organization					1b(2)		X
` '	al of facilities, equipment,							1b(3)		<u>X</u>
	bursement arrangements							1b(4)		X
	is or loan guarantees ormance of services or me	mbarahin ar fundras	cina colicitatio	ne				1b(5) 1b(6)		<u>X</u>
. ,	of facilities, equipment, ma	•	-					10(0)		$\frac{\mathbf{x}}{\mathbf{x}}$
_	wer to any of the above is	-			ould alwa	vs show the fair r	narket value of the no		ets	
	es given by the reporting fo								010,	
	d) the value of the goods, (,		,		
(a) Line no	(b) Amount involved			exempt organization	า	(d) Description	of transfers, transactions	s, and sharing arr	angeme	nts
	· · · · · · · · · · · · · · · · · · ·		N/A							
						-				
_								····		
							· · · -			
		-						-		
										
-										
 -										
2a le the fou	indation directly or indirect	tly affiliated with or r	related to one	or more tax-exempt	ornanizat	tions described		.		
	n 501(c) of the Code (other	· -			or garnica			Yes	X	l No
	omplete the following sch		,(0), 0 000.							
	(a) Name of org		··· - .,	(b) Type of organiz	ation		(c) Description of rela	tionship	-	
•	N/A									
						•				
			_							
						····				
	r penalties of perjury, i declare to belief it is true, correct, and con-							May the IRS d	scuss th	his
Sign Here	1/1/	11 1		. /				return with the	see inst	7)?
1 🛌	* Victor	— A · A	Quis			PRESI	DENT	X Yes	L.,	No
Sig	nature of officer of trustee		Dranarario o	Date	Ir	Title	Check If P	TIN		
	Print/Type preparer's na	liit	Preparer's si	ignature		Date	,, —, ,	1.114		
Paid	TOUTS M. C	OUDN -	(_	•	JUL 2 7 2016		P00021	057	
Preparer	LOUIS M. C Firm's name ► CAL		N, LEV	INE ET AL	, P.	Δ.	Firm's EIN ► 59			
Use Only		ET, DOMLE		TIVITO I ALL	, F.	₽	I I I I I I I I I I I I I I I I I I I	20312	υI	
	Firm's address ► 50	5 SOUTH F	LAGLER	DR. #900						
		ST PALM B		FL 33401-			Phone no. 561	-832-9	292	
	. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						,	Form 990		2015)
									•	,

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.lrs.gov/form990 .

OMB No 1545-0047

Name of the organization

Employer identification number

Organization type (check one)	ection:	65-0805468
Filers of:	ection:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
C	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
Ε	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
• =	overed by the General Rule or a Special Rule. (8), or (10) organization can check boxes for both the General Rule and a Special Rul	e See instructions
General Rule		
•	ing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling e contributor. Complete Parts I and II. See instructions for determining a contributor's	· · · · · · · · · · · · · · · · · · ·
Special Rules		
sections 509(a)(1) and any one contributor,	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, oduring the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amound 1 Complete Parts I and II.	or 16b, and that received from
year, total contribution	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a ns of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or educa elty to children or animals Complete Parts I, II, and III	
year, contributions ex is checked, enter her purpose Do not com	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a clusively for religious, charitable, etc., purposes, but no such contributions totaled more the total contributions that were received during the year for an exclusively religious, plete any of the parts unless the General Rule applies to this organization because it setc., contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box charitable, etc ,
but it must answer "No" on Pacertify that it does not meet the	is not covered by the General Rule and/or the Special Rules does not file Schedule B art IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Foe filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

Name of organization

Employer identification number

J. IRA AND NICKI HARRIS FOUNDATION, INC.

65-0805468

Part I	· Contributors (see instructions) Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MAIZE AND BLUE CHARITABLE TRUST 220 SUNRISE AVENUE, SUITE 210 PALM BEACH, FL 33480	\$ 815,001.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Onncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Complete Part II for noncash contributions)

Name of organization

Employer identification number

J. IRA AND NICKI HARRIS FOUNDATION, INC.

65-0805468

1	ncash Property (see instructions) Use duplicate copies of Property (see instructions)	an in additional space is fleeded.		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$	<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		 \$		

Name of org	anization (2015)		Employer identification number
J. IRA Part III	 the year from any one contributor Complete of completing Part III, enter the total of exclusively religious 	ributions to organizations described in columns (a) through (e) and the followings, charitable, etc., contributions of \$1,000 or les	65-0805468 section 501(c)(7), (8), or (10) that total more than \$1,000 for g line entry. For organizations is for the year (Enter this info once)
(a) Na	Use duplicate copies of Part III if addition	al space is needed.	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
-	Transferee's name, address, at	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, al		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
[Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee

J. Ira & Nicki Harris Foundation, Inc.

Charitable Contributions - F.Y.E. March 31, 2016 EIN: 65-0805468

Date	Organization	City/State	Amount
04/17/15	Lost Tree Village Charitable Foundation	North Palm Beach FL	500
05/13/15	Central Europe Center for Research and	Silver Spring, MD	15,000
	Documentation (Centropa)		
	(via RazooDonations org)		
06/18/15	Sid Jacobson Jewish Community Center (JCC)	East Hills, NY	2,500
07/27/15	Society of the Four Arts	Palm Beach, FL	10,000
11/25/15	Dana-Farber Cancer Institute	Palm Beach, FL	10,000
12/22/15	Hazelden Betty Ford Foundation	Center City, MN	25,000
02/23/16	Hope for Depression Research Foundation	New York, NY	1,000
02/26/16	University of Michigan	Ann Arbor, MI	375,000
02/29/16	University of Michigan	Ann Arbor, MI	375,000
	TOTAL CONTRIBUTIONS PAID*		814,000

*ALL CONTRIBUTIONS WERE MADE TO THE GENERAL PURPOSE FUND OF PUBLIC CHARITABLE ORGANIZATIONS THAT WERE CLASSIFIED UNDER SECTION 501(c)(3) OF THE INTERNAL REVENUE CODE

FORM 990-PF INTEREST	ON SAVII	NGS AND TEM	PORARY	CASH IN	IVESTMENTS	STATEMENT	1	
SOURCE		REVE	(A) REVENUE PER BOOKS		(B) IVESTMENT ICOME	(C) ADJUSTED NET INCOME		
INTEREST ON CREDIT BA	ALANCE		37.		37.			
TOTAL TO PART I, LINE	3				37.			
FORM 990-PF	DIVIDEND	S AND INTER	EST FR	OM SECUR	RITIES	STATEMENT	2	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) (B) REVENUE NET INVEST- PER BOOKS MENT INCOME			- ADJUSTED	
DIVIDENDS	21,936	•	0.	21,936.	21,93	36.		
TO PART I, LINE 4	21,936	•	0.	21,936.	21,93	36.		
FORM 990-PF		LEGAL	FEES			STATEMENT	3	
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTEI NET INCOM			
HODGSON RUSS LLP	_	1,188.		0.		1,18	8.	
TO FM 990-PF, PG 1, I	LN 16A =	1,188.		0.		1,18	8.	
FORM 990-PF		ACCOUNTI	NG FEE	S		STATEMENT	4	
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) INVEST- INCOME	(C) ADJUSTEI NET INCOM			
CALER, DONTEN, LEVIN	E ET AL	5,000.		2,500.		2,50	0.	
	_						0.	

FORM 990-PF	OTHER E	XPENSES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
AMEX ANNUAL FEE FILING FEES	72. 61.		0.			72. 61.
TO FORM 990-PF, PG 1, LN 23	133.		0.		133.	
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	6
DESCRIPTION			вос	OK VALUE	FAIR MARKE' VALUE	r
30,000 SHRS- WATERSTONE FINANCIAL INC. 30,000 SHRS- TOWNEBANK			325,734. 410,4 256,341. 575,7			
TOTAL TO FORM 990-PF, PART II, LIN				582,075.	986,1	00.
FORM 990-PF	OTHER	ASSETS			STATEMENT	7
DESCRIPTION		NING OF K VALUE		OF YEAR OK VALUE	FAIR MARKE	r
JOHN HANCOCK LIFE INSURANCE		897,480. 897,480.		897,480.	453,459.	
TO FORM 990-PF, PART II, LINE	± 15	897,480. 897,480.		453,4	453,459.	

		OF OFFICERS, DIRECTORS FOUNDATION MANAGERS			
NAME AND ADDRESS	TITLE AND AVRG HRS/WK			EXPENSE	
JACQUELINE HARRIS HOCHBERG 220 SUNRISE AVE, STE. 210 PALM BEACH, FL 33480	VICE-PRES/SEC/ 0.00	DIRECTOR 0.	0.	0.	
NICKI HARRIS 220 SUNRISE AVE, STE. 210 PALM BEACH, FL 33480	PRES/DIRECTOR 0.00	0.	0.	0.	
JONATHAN M HARRIS 220 SUNRISE AVE, STE. 210 PALM BEACH, FL 33480	TREASURER/DIRE 0.00	CTOR 0.	0.	0.	
DAVID MOORE 220 SUNRISE AVE, STE. 210 PALM BEACH, FL 33480	DIRECTOR 0.00	0.	0.	0.	
BRUCE MOSKOWITZ 220 SUNRISE AVE, STE. 210 PALM BEACH, FL 33480	DIRECTOR 0.00	0.	0.	0.	
CRAIG SHADUR 220 SUNRISE AVE, STE. 210 PALM BEACH, FL 33480	DIRECTOR 0.00	0.	0.	0.	
SHERRY BARRAT 220 SUNRISE AVE, STE. 210 PALM BEACH, FL 33480	DIRECTOR 0.00	0.	0.	0.	
TOTALS INCLUDED ON 990-PF, PAGE	2 6, PART VIII	0.	0.	0.	

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT

ACTIVITY ONE

PLEASE NOTE, THE FOUNDATION IS NOT INVOLVED IN ANY DIRECT CHARITABLE ACTIVITIES. ITS PRIMARY PURPOSE IS TO SUPPORT, BY CONTRIBUTIONS, OTHER ORGANIZATIONS EXEMPT UNDER INTERNAL REVENUE CODE SECTION 501(C)(3).

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 1

0.

GENERAL EXPLANATION

STATEMENT 10

FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

PART XV- LINE 2 - SUPPLEMENTAL INFORMATION

EXPLANATION:

THE ORGANIZATION'S PRIMARY ACTIVITY IS TO SUPPORT, BY CONTRIBUTIONS, OTHER ORGANIZATIONS QUALIFYING FOR EXEMPTION UNDER 501(C)(3) OF THE INTERNAL REVENUE CODE. THE TRUSTEES CHOOSE THESE ORGANIZATIONS BASED UPON THEIR KNOWLEDGE OF THE ORGANIZATION'S ACTIVITIES. NO CONTRIBUTIONS, GRANTS, GIFTS, LOANS, OR SCHOLARSHIPS ARE MADE TO INDIVIDUALS. THE ORGANIZATION DOES NOT PRESENTLY RECEIVE APPLICATIONS OR CONDUCT PROGRAMS FOR DONATIONS IN ITS ACTIVITIES.