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Fc.m 990-PF

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

2015

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.irs.gov/form990pf.

Open to Public Inspection

			ax year beginnin	g A	ug 1 , 2015	and ending Ju	1	31 . 2016	
Name of to			NDNECC C WI	NOUT	D INC		A	Employer identification num	ber
			NDNESS & KI rifmail is not delivered			Room/suite	В	65-0944876 Telephone number (see instru	ctions)
		TH AVENUE			•	330] _	(561) 689-255	
•		•	and ZIP or foreign post	al code			С	If exemption application is	anding chack hara
PALM						33480	٦	н ехетриоп аррисанот із і	residing, check here.
G Che	eck all	I that apply.	Initial return		Initial return of a forme	er public chanty	D	1 Foreign organizations, chec	tk here • • • • • ►
			Final return Address change		Amended return			2 Foreign organizations meet	ing the 85% test check
H Cha	ock to	pe of organizatio			Name change (c)(3) exempt private for		1	here and attach computation	n
	_ ′'		nonexempt charite			rivate foundation	E	If private foundation status	was terminated
Fair		t value of all assets a				ash X Accrual	-	under section 507(b)(1)(A),	check here
		ll, column (c), line 1		<u> </u>	Other (specify)	Adii Aji taada	F	If the foundation is in a 60-	month termination -
> \$		1,837	,240.		column (d) must be on a	ash basis.)	1	under section 507(b)(1)(B)	check here
Part I		nalysis of Re			(a) Revenue and	(b) Net investmen	,	(c) Adjusted net	(d) Disbursements
	E	xpenses (The	total of amounts ind (d) may not ne	n	expenses per books	income		income	for charitable
	sa	nnly equal the am	nounts in column (a)					purposes (cash basis only)
	, -	ee instructions))							(000: 000:00:00;
	1 2		is etc, received (altach sche						
	~	Ck ► X if the fox	undation is not required to at	ach Sch B		 			
	3	_	temporary cash investments						
	4	Orvidends and interest in B Gross rents	om securities		65,027.	65,02	27.	65,027.	
	1 .	D Net rental income						ļ	
R	6.	Of (loss)	ale of assets not on line 10		-152 555	L-6a Stmt		 	
E		O Gross sales price for assets on line 6a	78 1 0 CO		132,333.	L-0a Schic		 	
V E	7		ome (from Part IV, line 2				0.		
N	8	•	algaın						
U E	9	Income modification Gross sales less	ıs						
-	108	returns and allowances	1						
	ı	b Less Cost of goods sold						<u> </u>	
	١,	-	ach schedule)					 	
	11	Other income (attack	h schedule)					<u> </u>	
		See Line 11 St			2,641.	2,64		2,641.	
	+		through 11		-84,887.	67,60	58.	67,668.	
	13		ficers, directors, trustee: alanes and wages		<u> </u>	 		ļ -	
	15		layee benefits			t			
	1	•	chedule)					 	
Đ M] (b Accounting fees (att	tach sch)L-16b	Stmt.	3,750.			DEOFIL	/ED
i N			ach sch)					KLUEN	(=0,0
PS		interest		····				6	10
E Ť R R	18	Taxes (attach schedule) Depreciation (attach	(see kastrs) EX	CTSE.	1,277.			S OCT 17	2016
A A	'3	schedule) and deple							<u> </u>
¥ V	20	Occupancy				†		OGDEN	, UT
G E	21	Travel, conferences	=						
A E	22 23	Other expenses (att	ations			ļ			
E		See Line 23 St	· •		18,850.	18,7	39		
N S E	24	Total operating an	d administrative					1	
S	25	expenses. Add line Contributions, gilts, gran	-		23,877.	18,7	39.		10= 00
	26			• • • •	108,000.			 	108,000
		•	i		131,877.	18,7	39.	.]	108,000
	27							1	
		a Excess of revenue and disbursement			-216,764.				
	1	_	come (if negative, enter	0-)-	210,704.	48,9	29		
		C Adjusted net Incom	me (if negative, enter -0	-) - • ·		1		67,668.	
_									

a	t III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	2,011,976.
2	Enter amount from Part I, line 27a	2	-216,764.
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	1,795,212.
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (h), line 30	6	1 795 212

	V Capπai Gains and L	osses for Tax on Investment	t Income			
	(a) List and describe t	he kind(s) of property sold (e.g., real e	estate,	P - Purchase	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day yr)
1a p	2-story brick warehouse; or common stock, 200 shares MLC Company) PUBLICLY TRADED SECURITIES PUBLICLY TRADED SECURITIES (e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis (h) Gain or (e) plus (f) miles applied or (e) plus (f) miles (f) plus					
d	ODDAODA AMADDO ODO					
е						
*****	(e) Gross sales price					
а	609,819		731	9.745		-129,926.
b						-22,629
c					-	-6,935
d	,					
е						
C	omplete only for assets showin	g gain in column (h) and owned by the	e foundation on 12/31/69		// Calos (Co	J (b)
	(i) F.M.V	· · · · · · · · · · · · · · · · · · ·	(k) Excess of col. (i)			
	as of 12/31/69	as of 12/31/69	over col (j), if any		than -0-) or Losses (f	ram col (h))
а						-129,926
ь					· ,	-22,629
С						-6,935
d						
е						
		☐ If nain_also e	enter in Part I line 7		1	
2 C	apital gain net income or (net o			· · · · ;	:	-159,490
3 N	et short-term capital gain or (lo	ss) as defined in sections 1222(5) and	1 (6):			2007.50
		, , ,	`	}		
ff in	gain, also enter in Part I, line 8 Part I line 8	, column (c) (see instructions). If (loss	s), enter -0-	٠ و		
in	Part I, line 8		<u>,</u>		<u> </u>	
in Paint	Part I, line 8 Qualification Under tional use by domestic private 1	r Section 4940(e) for Reduce foundations subject to the section 4940	d Tax on Net Investo	nent Incon	<u> </u>	
in Part	Part I, line 8 Part I, line 19 Part II line 19 Part I	r Section 4940(e) for Reduce foundations subject to the section 4940 s part blank.	d Tax on Net Investment of any year in the base p	nent Incon	ne	X No
in Partition op section /as the 'Yes,'	Part I, line 8 Part I I I I I I I I I I I I I I I I I I I	r Section 4940(e) for Reduce foundations subject to the section 4940 s part blank. on 4942 tax on the distributable amount y under section 4940(e). Do not complete the complete section 4940(e).	d Tax on Net Investment of any year in the base polete this part.	nent Incon	ne	X No
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Part V Excise Tax Based on Investment Income (Section 4940(s), 4940(s), 4940(s), or 4949 - see instructions	Form:	990-PF'(2015) ANIMAL SUPPORT KINDNESS & KINSHIP INC 65-0944876		Pa	age 4
Date of ruling or determination letter. b Comestic foundations that meet the section 4940(e) requirements in Part V. c All other domestic tourdations enter X et Part I, lime 27b. c All other domestic tourdations enter X et Part I, lime 27b. c All other domestic tourdations enter X et Part I, lime 27b. c All other domestic tourdations enter X et Part I, lime 27b. c All other domestic tourdations enter X et Part I, lime 27b. c All other all exception 511 (domestic section 4947(e)(1) trusts and traxable foundations only. Others enter -0-) 3 Add limes 1 and 2. 3 Add limes 1 and 2. 4 Subtitle A (income) tax (domestic section 4947(e)(1) trusts and taxable foundations only Others enter -0-) 4 Q. 5 Tax based on investment fromes. Subtract lime 4 from line 3. If zero or less, enter -0- 5 Tax based on investment fromes. Subtract lime 4 from line 3. If zero or less, enter -0- 5 Tax based on investment fromes. Subtract lime 4 from line 3. If zero or less, enter -0- 5 Tax based on investment fromes. Subtract lime 4 from line 3. If zero or less, enter -0- 5 Tax based to print and 2014 overpayment credited to 2015 5 Tax based to print and 2014 overpayment discipline and the subtract lime 4 from line 3. If zero or less, enter -0- 5 Tax based that positions for relationsh of time to file (Form 8868) 6 Confider Payments. 2 Tax based with application for relationsh of time to file (Form 8868) 6 Confider Payments. 2 Tax based that positionsh for relationsh to time to file (Form 8868) 7 Total credits and payments. Add lines 6 time to 10 file (Form 8868) 8 Territ any parently for underpoyment of estimated bas. Chock here 9 Tax due. If the total clines 5 and 8 time the based in the 2 relationsh to 20 file of the 20 file of 10 fil)		
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here. F X I and enter 15x of Part I, line 27b. c All other domestic foundations enter 2x of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b) 2 Tax under section 511 (domestic section 4947(e)(1) trusts and taxable foundations only. Others enter 4-0-1 3 Ad Bines 1 and 2. 4 Subbite A (income) tax (domestic section 4947(e)(1) trusts and taxable foundations only. Others enter 4-0-1 5 Tax based on investment Income. Subtract line 4 from line 3. If zero or less, enter 4-0-1 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter 4-0-1 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter 4-0-1 5 Excepting foreign organizations - tox withheld at source 6 b 6 Excepting foreign organizations - tox withheld at source 6 b 1 Exempt foreign organizations - tox withheld at source 6 b 1 Exempt foreign organizations - tox withheld at source 6 b 1 Excepting foreign organizations - tox withheld at source 6 b 1 Excepting foreign organizations - tox withheld at source 6 b 1 Exempt foreign organizations - tox withheld at source 6 b 1 Exempt foreign organizations - tox withheld at source 6 b 1 Excepting foreign organizations - tox withheld at source 6 b 1 Exempt foreign organizations - tox withheld at source 6 b 1 Exempt foreign organizations - tox withheld at 50 ft. 2 Exempt foreign organizations - tox withheld at 50 ft. 3 Exempt foreign organizations - tox withheld at 50 ft. 4 Exempt foreign organizations - tox withheld at 50 ft. 5 Total credits and payments. So are 6 bath 6 - tox organizations - 6 b 1 Exempt foreign organizations - tox withheld at 50 ft. 5 Total credits tox diseases and lines 5 and 8, enter 6 the anount overpall 6 b 1 Total credits tox organizations of the section 4 50 ft. 1 Exempt foreign organizations - 5 tox organizations of the source organization of the source organization of the source organization organization organization organization or	1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1		_	
check here .		Date of ruling or determination letter. (attach copy of letter if necessary — see instrs)			
c All other domestic foundations enter 7% of line 270: Exempt foreign organizations enter 4% of Part I, line 12, cell (b) 2 Tax under section 511 (domestic scotton 4947(a)(1) trusts and taxable foundations only. Others enter 49-) 3 Add lines 1 and 2. 4 Subtitle A (noticeme) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter 49-) 4 0.0. 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Circlists Symmatic a 2015 estimated law pinks and 2014 overpayment credited to 2015 5 Exempt foreign organizations — tax withheld at source 6 Tax pad with application for extension of time to file (Form 8868) 6 Exempt foreign organizations — tax withheld at source 6 Tax pad with application for extension of time to file (Form 8868) 6 Exempt foreign organizations — tax withheld at source 7 Total credits and payments. Add lines 6 is through 60 8 Enter any penalty for underpayment of estimated tax. Check here 9 Tax due. If the total clines 5 and 8 is more has file 7, rects amount ower. 9 Tax due. If the total clines 5 and 8 is more has file 7, rects amount ower. 9 Tax due. If the total clines 5 and 8 is more has file 7, rects amount ower. 10 Overpayment. If the 7 is more than the total d lines 5 and 8, eties file amount overpald 10 Overpayment. If the 7 is more than the total d lines 5 and 8, eties file amount overpald 10 During the tax year, did the foundation attempt to influence any netional, state, or local legislation or did it participate or intervier in any political campingator? 1 During the tax year, did the foundation attempt to influence any netional, state, or local legislation or did it participate or intervier in any political campingator? 1 During the tax year, did the foundation attempt to influence any netional, state, or local legislation or did it participate or intervier in any political campingator? 1 During the tax year, did the foundation attempt to influence any netional, state, or local legislation or did it parti	b	Domestic foundations that meet the section 4940(e) requirements in Part V,		4	89.
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8 Enter any penalty for underpayment of estimated tax. Check here				` *	
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Part VII-A Statements Regarding Activities Yes No					
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oun	1990-PF (2015) ANIMAL SUPPORT KINDNESS & KINSHIP INC 65-094487	5	Pa	age 5
	t 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		X
12	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)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address			
14	The books are in care of MARCIELA RAMOS Telephone no. (561)	689	255	3
	TOOK IN TOOK IN TABLE			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	• • •	. •	
	<u> </u>		Yes	No
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	,03	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		N/. 1	<u> </u>
	File Form 4720 If any Item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 8	During the year did the foundation (either directly or indirectly): (1) Farage in the cale or each age, or leaves of property with a discussified name?			
	(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?		*	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?		! ! !	
	(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.)			
1	b 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)?	1 b		
	Organizations relying on a current notice regarding disaster assistance check here			
•	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 before the first day of the tax year beginning in 2015?	10		×
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?			}
	If 'Yes,' list the years ▶ 20 _ , 20 _ , 20	1		
	b Are 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)	2 b	-	V
	c if the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	1	 	<u> </u>
	► 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?			
	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 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.)	- 3 b	-	
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		х
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	46		х
BA	A F	orm 99	0-PF	2015)

Form 990-PF (2015) ANIMAL SUPPORT KIN	DNESS & KINSHIE	INC	65-094	4876	Page 6		
Part VII-B Statements Regarding Activities	es for Which Form	4720 May Be Requ	uired (continued)				
5 a During the year did the foundation pay or incur an							
(1) Carry on propaganda, or otherwise attempt to	influence legislation (se	ction 4945(e))?	· · · · · · Yes X	No			
(2) Influence the outcome of any specific public e on, directly or indirectly, any voter registration	lection (see section 4955 drive?	5); or to carry	Yes X	No			
(3) Provide a grant to an individual for travel, stud			Yes X	No	İ		
(4) Provide a grant to an organization other than a chantable, etc, organization described in section 4945(d)(4)(A)? (see instructions)							
(5) Provide for any purpose other than religious, educational purposes, or for the prevention o	chantable, scientific, liter f cruelty to children or an	ary, or imals?	· · · · Yes X	No	,		
b If any answer is 'Yes' to 5a(1)-(5), did any of the I described in Regulations section 53.4945 or in a (see instructions)?	current notice regarding	disaster assistance		5 b			
Organizations relying on a current notice regarding							
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsibi	foundation claim exempti	on from the	· · · · Yes	No			
If 'Yes,' attach the statement required by Regulati	ons section 53.4945-5(d).			-		
6 a Did the foundation, during the year, receive any fi on a personal benefit contract?				No			
b Did the foundation, during the year, pay premium If 'Yes' to 6b, file Form 8870.	s, directly or indirectly, o	n a personal benefit cont	ract · · · · · · · · · · · · · · · · · · ·	6 ы	×		
7 a At any time during the tax year, was the foundate							
b If 'Yes,' did the foundation receive any proceeds							
Part VIII Information About Officers, Di and Contractors	rectors, Trustees,	Foundation Manag	gers, Highly Paid E	mployees	š, 		
1 List all officers, directors, trustees, foundation	n managers and their c	ompensation (see insti	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) Expense other all	e account, lowances		
JOHN J RAYMOND, JR							
125 WORTH AVENUE PALM BEACH FL 33480	PRESIDENT 4.00	0.	0.		0.		
HELEN WILKES		i					
1435 N OCEAN WAY	VICE PRESIDENT						
PALM BEACH FL 33480	0.00	0.	0.		0.		
LINDA HIRSCH							
44 COCOANUT ROW	SECT/TREASURER						
PALM BEACH FL 33480	3.00	0.	0.		0.		
See Information about Officers, Directors, Trustees, Etc.							
		0.	0.		0.		
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1 – see i	nstructions). if none, e	nter 'NONE.'	1		
(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) Expense other a	e account, llowances		
NONE							
	ļ						
	ļ			 			
	ļ			 			
Total number of other employees paid over \$50,000			'	+	None		
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None

Form 990-PF (2015)

Total. Add lines 1 through 3

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Part Minimum Invest see instructions.	tment Return (All domestic foundations must complete this part. Foreig)	n found	dations,
Fair market value of assets Average monthly fair market	not used (or held for use) directly in carrying out charitable, etc, purposes et value of secunities	1 a	1,610,917.
	alances	1 b	232,716.
	er assets (see instructions)	1 c	
	c)	1 d	1,843,633.
	rage or other factors reported on lines 1a and 1c		
(attach detailed explanation	ı)	. 1	
2 Acquisition indebtedness ap	pplicable to line 1 assets	2	
3 Subtract line 2 from line 1d		3	1,843,633.
4 Cash deemed held for char (for greater amount, see ins	itable activities. Enter 1-1/2% of line 3 structions)	4	27,654.
5 Net value of noncharitable	e-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,815,979.
	ı m. Enter 5% of line 5	6	90,799.
	mount (see instructions) (Section 4942(j)(3) and (j)(5) private operating gn organizations check here and do not complete this part.)	founda	ations
1 Minimum investment return	from Part X, line 6	1	90,799.
2 a Tax on investment income	for 2015 from Part VI, line 5		-
	does not include the tax from Part VI.)	1.1	
		2 c	489.
3 Distributable amount before	e adjustments. Subtract line 2c from line 1	3	90,310.
4 Recoveries of amounts trea	ated as qualifying distributions	4	
		5	90,310.
	e amount (see instructions)	6	
7 Distributable amount as a	adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	90,310.
Part XII Qualifying Dist	ributions (see instructions)		
Amounts paid (including ad a Expenses, contributions, gi	dministrative expenses) to accomplish charitable, etc, purposes: ifts, etc — total from Part I, column (d), line 26	ર્્ેં 1 a	108,000.
b Program-related investmen	nts — total from Part IX-B	1 b	0.
2 Amounts paid to acquire as	ssets used (or held for use) directly in carrying out chantable, etc, purposes $\dots \dots$	2	
3 Amounts set aside for spec a Suitability test (prior IRS ap	cific chantable projects that satisfy the pproval required)	3 a	
	ch the required schedule)	3 b	
	Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	108,000.
5 Foundations that qualify ur Enter 1% of Part I, line 27b	nder section 4940(e) for the reduced rate of tax on net investment income to (see instructions)	5	489.
	ibutions. Subtract line 5 from line 4	6	107,511.
Note. The amount on line	6 will be used in Part V, column (b), in subsequent years when calculating whether the fo	undation	
BAA			Form 990-PF (2015)

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				90,310.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only		ļ	0.	
b Total for prior years 20 , 20 , 20				
3 Excess distributions carryover, if any, to 2015			-	
a From 2010	1			
b From 2011 0 .				
c From 2012 0 .				
d From 2013 0 .				
e From 2014				
f Total of lines 3a through e	21,039.			
4 Qualifying distributions for 2015 from Part	21,039.			
XII, line 4 \$ 108,000. a Applied to 2014, but not more than line 2a				
a Applied to 2014, but not more stair time 24				
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			· · · · · · · · · · · · · · · · · · ·	90,310.
e Remaining amount distributed out of corpus	17,690.			
5 Excess distributions carryover applied to 2015		l		
(If an amount appears in column (d), the same amount must be shown in column (a).)				
Same amoone made be shown in oxidini (a).)				
Enter the net total of each column as indicated below:	,			,
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	38,729.	ļ		
b Pnor years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of pnor 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		0.		
e Undistributed income for 2014 Subtract line 4a from				
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2015 Subtract lines 4d and 5 from line 1. This amount must be				_
distributed in 2016		 		0.
Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Electron may be required — see instructions)				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	38,729.			
10 Analysis of line 9	<u>-</u>			
a Excess from 2011 0 .			1	
b Excess from 2012 0 .	ĺ			
© Excess from 2013 0 .	†		1	
d Excess from 2014			ŀ	
e Excess from 2015				
PAA 17,090.		.1 	!	Form 900 PE (2015)

Part XIV Private Operating Foundation	ons (see instru	ctions and Part			N/A
1 a If the foundation has received a ruling or deter	mination letter that	it is a private opera	iting foundation, and	the ruling	
is effective for 2015, enter the date of the ruling b Check box to indicate whether the foundation is	•		thed in section	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year	ig louridation descr	Prior 3 years	1 43420/(0) 01	1 1 13 12 11 (3)
income from Part I or the minimum investment return from Part X for each year listed	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
b 85% of line 2a					
© Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter:					1
(1) Value of all assets			<u> </u>	<u> </u>	ļ
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			ļ	ļ	
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	1	
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income Part XV Supplementary Information (l			<u> </u>
 Information Regarding Foundation Manage List any managers of the foundation who have close of any tax year (but only if they have con N/A b List any managers of the foundation who own a partnership or other entity) of which the four N/A 	e contributed more than tributed more than 10% or more of the	s \$5,000). (See sec	tion 507(d)(2).)	·	
N/A					
2 Information Regarding Contribution, Grant Check here if the foundation only maker requests for funds. If the foundation makes gis complete items 2a, b, c, and d.	kes contributions to fts, grants, etc (see	preselected charite instructions) to ind	able organizations ar lividuals or organizat	ions under other con-	
a The name, address, and telephone number of JOHN J RAYMOND JR	r e-mail address of	the person to whor	n applications should	l be addressed:	
125 WORTH AVENUE, STE 330 PALM BEACH	FL 3348	0 /5	61) 659-8661		
b The form in which applications should be sub-					
WE REQUEST A COPY OF THEIR 5				E PURPOSE OF	THEIR REQUES
c Any submission deadlines: - THERE ARE NO SUBMISSION DEA	ADLINES				
d Any restrictions or limitations on awards, such SUBMISSIONS MUST BE IN COME				utions, or other factor	s
MAA	те	EA0310 10/13/15			Form 990-PF (201

Part XV | Supplementary Information (continued)

3 Grants and Contributions Paid During the Y	If recipient is an individual,	I	T	
Recipient	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business) a Paid during the year	Substantial Contributor	 		
PAWS 4 LIBERTY		1		
8939 PALOMINO DRIVE		501 (C) (3)		
LAKE WORTH FL 3346	7		ANIMAL CARE	24,000.
NEW HORIZONS SERVICE DOGS				•
1590 LAUREL PARK COURT	ł	501 (C) (3)	{	1
ORANGE CITY FL 3276	3	''''	ANIMAL CARE	24,000.
GODS CREATURES GREAT & SMALL		j]	}
10629 ANDERSON LANE		501 (C) (3)		
LAKE WORTH FL 3346	7	1	ANIMAL CARE	12,000.
PURRZILLA CAT RESCUE	1		4	
9608 ARBOR MEADOW DRIVE		501 (C) (3)		24.000
BOYNTON BEACH FL 3343]	ANIMAL CARE	24,000.
FURRY FRIENDS/PATTERSON VETERINAR	Y	503 (0) (3)		
401 MAPLEWOOD DRIVE	_ [501 (C) (3)		24,000.
JUPITER FL 3345	8)		ANIMAL CARE	24,000.
		}		
			\$	
		}		
			}	
		İ		
	1	1		
		ļ	}	
		,		
			1	
Total		<u> </u>	33	100.000
b Approved for future payment	· · · · · · · · · · · · · · · · · · ·			108,000
	1			
			İ	
		Ì		1
	,	j	}	
	{	{	{	
	}	1	1	-
	1		}	
	1		j	
	1	}		
	}	1	· t	
		1		1
			}	

Part XVI-A Analysis of Income-Producing Activities

nter gross	amounts unless otherwise indicated.	Unrelated business income Exclu			section 512, 513, or 514	(-)		
·		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions)		
1 Prog	ram service revenue	 	· · · · · · · · · · · · · · · · · · ·	code				
ь b				+-+				
Č								
d		1	· · · · · · · · · · · · · · · · · · ·	1				
е								
1								
g Fees	and contracts from government agencies							
2 Men	bership dues and assessments							
3 Intere	st on savings and temporary cash investments							
4 Divid	ends and interest from securities		· 	14	65,027.			
5 Net	ental income or (loss) from real estate							
	-financed property							
b Not	febt-financed property							
	ental income or (loss) from personal property							
	r investment income			14	2,641.			
	or (loss) from sales of assets other than inventory			18	-152,555.			
	ncome or (loss) from special events							
	s profit or (loss) from sales of inventory			-+				
	r revenue.							
a		 						
b		ļ	<u> </u>					
d			 			<u> </u>		
e		 						
-	total. Add columns (b), (d), and (e)	 		+	-84,887.			
	al. Add line 12, columns (b), (d), and (e)					-84,887		
	sheet in line 13 instructions to verify calculations							
ParteX\	Relationship of Activities to the	e Accomp	lishment of Exe	mot Purnos	ses			
Line No	Explain below how each activity for which inc	come is report	ed in column (e) of Pa	art XVI-A contr	buted importantly to	the		
▼	accomplishment of the foundation's exempt p	ourposes (oth	er than by providing fi	unds for such p	ourposes) (See instru	uctions.)		
A/N								
				· · · · · · · · · · · · · · · · · · ·				
		 						
								
	 							
	 							
	 							
								
	 	···-						
	<u> </u>							
	+				·····			
	 							
	+							
	 					·		
	 							
	 							

Form 990-PF (2015)

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		xempt Organ	izations							Yes	No
de	scnbed	ganization directly in section 501(c) o political organizat	or indirectly engage of the Code (other the	e in any of the in an section 50	following with an 1(c)(3) organizati	other o	organization in section 527,			192	140
	_		foundation to a nor	icharitable eve	mnt organization	of:					1
					. •				1 a (1)		х
									1 a (2)		X
		sactions.									
			chantable exempt of	organization					1 b (1)	i l	х
			•	-							Х
(3)	Renta	l of facilities, equi	oment, or other asse	ets					1 b (3)		Х
(4)	Reiml	oursement arrange	ements						1 b (4)		Х
			es						1 b (5)		X
			s or membership or						1 b (6)		Х
c Sh	anng o	f facilities, equipm	ent, mailing lists, otl	ner assets, or p	oaid employees.				1 c	L	X
the an	y transa	, other assets, or s action or sharing a	services given by th mangement, show i	e reporting fou n column (d) th	ndation If the for ne value of the go	undation ods, oth	received less that ner assets, or sen		ın		
(a) Line	no	(b) Amount involved	(c) Name of n	oncharitable exen	npt organization	(a) Description of trans	sfers, transactions, and s	snaring arran	gement	5
	-										
			 			 					
		· 	- 	· · · · · · · · · · · · · · · · · · ·							
			_			<u> </u>					
						 					
			- 						·		
			 	·		┼──					
			 					<u></u>			
de	escribed 'Yes,' c	I in section 501(c) omplete the follow	ing schedule.	than section 50	01(c)(3)) or in sec	tion 527	······································			s X	No .
	(a)	Name of organiza	tion	(b) Type	e of organization		(c) Description of rela	tionship		
							 		 		
	Under pe	enatties of perjury, I deci	are that I have examined t	his return, including	accompanying sched	ules and si	tatements, and to the bo	ast of my knowledge and b	elief, it is true,	 -	
Sign	correct,	and complete. Declaration	on of preparer (other than t	axpayer) is based o	on all information of wi	ich prepar	er has any knowledge		May the	IRS disc	7188
Here	<i>\</i>	W G.			100,007,416	•	DIDEGEOR		this retu	m with the	ne
•	Signal	ture of officer or trustee			09/01/16 Date		DIRECTOR Title		(see lost	inctions)) }
	L	Print/Type preparer's n	name	Preparers		7	Date	Check X if	PTIN	Yes	No
שיים				4 h"	() MMH	#	. 09/21/16	Check X if	P0121	en a a	i
Paid Propa		PAUL MISHK		M CDA	- mad	424	103/51/10	T	432539		
Prepa Use C		Firm's address	PAUL MISHKI 4249 NW 64T					00-1	72233		
J36 C	· · · · y]	BOCA RATON	· PEITAT		FL 3	3496	Phone no. (56)	.) 245-	7401	3

Form 990-PF Part I, Line 6a

Net Gain or Loss From Sale of Assets

2015

me		Employer identification Number
NIMAL SUPPORT KINDNESS & K	INSHIP INC	65-0944876
Asset Information:		
Description of Property: PUB	LICLY TRADED SECURITIES	. <u> </u>
Date Acquired: .	How Acquired:	
Date Sold	Name of Buyer:	
Sales Price: . 1,060,505.	Cost or other basis (do not reduce by depreciation) 1	.213.060.
Sales Expense	Valuation Method:	
Total Gain (Loss): -152	555. Accumulation Depreciation:	
Description of Property:		
Date Acquired:	How Acquired	
Date Sold:	Name of Ruyer:	
Sales Price:	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method:	
Total Gain (Loss):	Accumulation Depreciation:	
Description of Property.	· · · · · · · · · · · · · · · · · · ·	
Date Acquired:	How Acquired:	
Date Sold	Name of Buyer	
Sales Price:	Cost or other basis (do not reduce by depreciation)	
Sales Evenese	Valuation Method:	
Total Gain (Loss):	Accumulation Depreciation:	
Description of Property:		
Date Acquired:	How Acquired	
Date Sold	Name of Buyer:	
Sales Price:	Cost or other basis (do not reduce by depreciation)	
Sales Expense	1 f = 1 - 4 6 f = 41 d -	
Total Gain (Loss):	Accumulation Depreciation	
Description of Property:		· · · · · · · · · · · · · · · · · · ·
Date Acquired:	How Acquired	
Date Sold.	How Acquired Name of Buyer:	
Sales Price:	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method.	
Total Gain (Loss):	Accumulation Depreciation:	
Description of Property.		
Date Acquired:	How Acquired	
Date Sold	Name of Buyer:	· · · · · · · · · · · · · · · · · · ·
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method:	· · · · · · · · · · · · · · · · · · ·
Total Gain (Loss):	Accumulation Depreciation:	
Description of Property:	·	
Date Acquired:	How Acquired	
Date Sold:	Name of Buyer	
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method:	
Total Gain (Loss).	Accumulation Depreciation	
Description of Property:		
Date Acquired .	How Acquired	······································
Date Sold:	Name of Buyer:	
Sales Price:	Cost or other basis (do not reduce by depreciation)	
Sales Expense	- Valuation Method:	
Total Gain (Loss):	Accumulation Depreciation:	
	·	

Form 990-PF, Page 1, Part I, Line 11 Line 11 Stmt

Rev/Exp Book	Net Inv Inc	Adj Net Inc
14,150.	14,150.	14,150.
981.	981.	981.
-12,490.	-12,490.	-12,490.
	14,150. 981.	14,150. 14,150. 981. 981.

Total 2,641. 2,641. 2,641.

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

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Chanty Disb
INVESTMENT MGMT FEES	18,739.	18,739.		
SERVICE FEES	111.			

Total <u>18,850.</u> <u>18,739.</u>

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

		<u> </u>		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person . X Business . MICHAEL GRAHAM				
125 SOUTH LAKE DRIVE	DIRECTOR			
PALM BEACH FL 33480	3.00	0.	0.	0.
Person . X Business .				
LINDA GORE				
610 XANADU PLACE	DIRECTOR	_	,	_
JUPITER FL 33477 Person . X Business .	4.00	0.	0.	0.
MARCIELA RAMOS				
1967 BREAKERS POINT WAY	DIRECTOR			
WEST PALM BEACH FL 33411	2.00	0.	0.	0.
Person . X Business .				
NANCY SLEUMAN			ĺ	
7830 NILE RIVER ROAD	DIRECTOR]	
WEST PALM BEACH FL 33472	3.00	0.	0.	0.
Person . X Business .		}	i	
JUDY E HENSLEY	2700000			
5409 WOODS WEST DRIVE	DIRECTOR	_	_	1
LAKE WORTH FL 33463	2.00	0.	0.	0.

Total

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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
PAUL MISHKIN, CPA	TAX AND ACCOUNTING	3,750.			

Total

3,750.