

Form **990-PF**Department of the Treasury
Internal Revenue Service**Return of Private Foundation****or Section 4947(a)(1) Trust Treated as Private Foundation**

- Do not enter social security numbers on this form as it may be made public.
- Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

2016**Open to Public
Inspection****For calendar year 2016, or tax year beginning 01-01-2016 , and ending 12-31-2016**

Name of foundation P J CALLAHAN FOUNDATION INC		A Employer identification number 01-0687604
Number and street (or P O box number if mail is not delivered to street address) 333 SEVENTH AVENUE 11TH FLOOR		Room/suite
City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10001		
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change		B Telephone number (see instructions) (561) 366-9991
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		C If exemption application is pending, check here ► <input type="checkbox"/> D 1. Foreign organizations, check here ► <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ 3,759,629	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	189,827			
	2 Check ► <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	197	197	197	
	4 Dividends and interest from securities	20,171	20,171	20,171	
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	8,935			
	b Gross sales price for all assets on line 6a	121,093			
	7 Capital gain net income (from Part IV, line 2)		81,948		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)		14,905		
	12 Total. Add lines 1 through 11	219,130	117,221	20,368	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	8,000	0	0	8,000
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	10,000	10,000	10,000	0
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	550,456	40,456	50,456	0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	2,312	2,312	2,312	0
	24 Total operating and administrative expenses.				
	Add lines 13 through 23	570,768	52,768	62,768	8,000
	25 Contributions, gifts, grants paid	159,600			159,600
	26 Total expenses and disbursements. Add lines 24 and 25	730,368	52,768	62,768	167,600
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-511,238			
	b Net investment income (if negative, enter -0-)		64,453		
	c Adjusted net income (if negative, enter -0-)			0	

	Part II Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 Cash—non-interest-bearing				
	2 Savings and temporary cash investments		227,414	207,740	207,740
	3 Accounts receivable ►				
	Less allowance for doubtful accounts ►				
	4 Pledges receivable ►				
	Less allowance for doubtful accounts ►				
	5 Grants receivable				
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7 Other notes and loans receivable (attach schedule) ►				
	Less allowance for doubtful accounts ►				
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges				
	10a Investments—U S and state government obligations (attach schedule)				
	b Investments—corporate stock (attach schedule)		1,100,211	1,140,818	1,282,086
	c Investments—corporate bonds (attach schedule)				
	11 Investments—land, buildings, and equipment basis ►				
	Less accumulated depreciation (attach schedule) ►				
	12 Investments—mortgage loans				
	13 Investments—other (attach schedule)		273,308	362,468	353,414
	14 Land, buildings, and equipment basis ►				
	Less accumulated depreciation (attach schedule) ►				
	15 Other assets (describe ► _____)		803,018	181,687	1,916,389
	16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)		2,403,951	1,892,713	3,759,629
	17 Accounts payable and accrued expenses				
	18 Grants payable				
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable (attach schedule)				
	22 Other liabilities (describe ► _____)		0	0	
	23 Total liabilities (add lines 17 through 22)				
	Foundations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24 Unrestricted		2,403,951	1,892,713	
	25 Temporarily restricted				
	26 Permanently restricted				
	Foundations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 27 through 31.				
	27 Capital stock, trust principal, or current funds				
	28 Paid-in or capital surplus, or land, bldg , and equipment fund				
	29 Retained earnings, accumulated income, endowment, or other funds				
	30 Total net assets or fund balances (see instructions)		2,403,951	1,892,713	
	31 Total liabilities and net assets/fund balances (see instructions)		2,403,951	1,892,713	

Part 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	2,403,951
2 Enter amount from Part I, line 27a	2	-511,238
3 Other increases not included in line 2 (itemize) ►	3	0
4 Add lines 1, 2, and 3	4	1,892,713
5 Decreases not included in line 2 (itemize) ►	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	1,892,713

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)			(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a BESSEMER TRUST COMPANY OF FLORIDA - DETAILS ON REQUEST					2016-12-31
b BESSEMER TRUST COMPANY OF FLORIDA - DETAILS ON REQUEST					2016-12-31
c BESSEMER #INV27U - LT CAPITAL GAIN DISTRIBUTION			P		
d LOSS FROM DOGWOOD K-1			P		
e GAIN FROM DOGWOOD K-1			P		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a 41,357		43,598	-2,241		
b 63,869		68,560	-4,691		
c 15,867			15,867		
d			-16,207		
e			89,220		
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from 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			
a			-2,241		
b			-4,691		
c			15,867		
d			-16,207		
e			89,220		
2 Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7		2	81,948	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8			3	-18,448

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

 Yes No

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	121,000	4,943,070	0 024479
2014	127,000	2,469,896	0 051419
2013	151,080	2,331,053	0 064812
2012	126,500	2,247,922	0 056274
2011	117,000	2,168,524	0 053954
2 Total of line 1, column (d)	. . . . .		2 0 250938
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	. . . . .		3 0 050188
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	. . . . .		4 3,574,022
5 Multiply line 4 by line 3	. . . . .		5 179,373
6 Enter 1% of net investment income (1% of Part I, line 27b)	. . . . .		6 645
7 Add lines 5 and 6	. . . . .		7 180,018
8 Enter qualifying distributions from Part XII, line 4	. . . . .		8 167,600

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)	1	1,289	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input type="checkbox"/> and enter 1% of Part I, line 27b			
c	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	0	
3	Add lines 1 and 2.	3	1,289	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	0	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	1,289	
6	Credits/Payments			
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	20,238	
b	Exempt foreign organizations—tax withheld at source	6b		
c	Tax paid with application for extension of time to file (Form 8868)	6c		
d	Backup withholding erroneously withheld	6d		
7	Total credits and payments Add lines 6a through 6d.	7	20,238	
8	Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ►	9		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ►	10	18,949	
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ► 18,949	Refunded ►	11	0

Part VII-A Statements Regarding Activities

1a	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?	Yes	No
1b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1b	No
1c	Did the foundation file Form 1120-POL for this year?	1c	No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ► \$ _____ 0 (2) On foundation managers ► \$ _____ 0		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____ 0		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	No
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? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	Yes
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	Yes
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ►FL		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i>	8b	Yes
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	No

Part 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 No

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 No

13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Yes

Website address ►N/A

14 The books are in care of ►JANOVER LLC Telephone no ►(212) 792-6300

Located at ►485 MADISON AVENUE NEW YORK NY

ZIP+4 ►10022

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. ► 15 □

16 At any time during calendar year 2016, 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 Yes No

See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes", enter the name of the foreign country ►

Part 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.

1a 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 No

(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? □ Yes No

(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? □ Yes No

(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? □ Yes No

(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)? □ Yes No

(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). □ Yes No

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)? Organizations relying on a current notice regarding disaster assistance check here. ► □ 1b

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 2016? 1c No

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 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? If "Yes," list the years ► 20____, 20____, 20____, 20____ □ Yes No

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) 2b

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____, 20____

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? □ Yes No

b If "Yes," did it have excess business holdings in 2016 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 2016). 3b

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a No

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 2016? 4b No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

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))? Yes No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? Yes No

(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). Yes No

(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 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 regarding disaster assistance check here. ►

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No
If "Yes," attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1. List all officers, directors, trustees, foundation managers and their compensation (see instructions).

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services. ► 0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

Describe the two largest program-related investments made by the foundation during the year, see instructions		Amount
1	_____	_____
	_____	_____
2	_____	_____
	_____	_____
All other program-related investments See instructions		_____
3	_____	_____
	_____	_____
Total. Add lines 1 through 3		► 0

Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations, see instructions)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	1,557,374
b	Average of monthly cash balances.	1b	154,686
c	Fair market value of all other assets (see instructions).	1c	1,916,389
d	Total (add lines 1a, b, and c).	1d	3,628,449
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	3,628,449
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	54,427
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,574,022
6	Minimum investment return. Enter 5% of line 5.	6	178,701

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign**Part XI** organizations check here ► and do not complete this part)

1	Minimum investment return from Part X, line 6.	1	178,701
2a	Tax on investment income for 2016 from Part VI, line 5.	2a	1,289
b	Income tax for 2016 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	1,289
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	177,412
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	177,412
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	177,412

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	167,600
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
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).	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	167,600
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.	6	167,600
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years			

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				177,412
2 Undistributed income, if any, as of the end of 2016			0	
a Enter amount for 2015 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2016				
a From 2011.	10,116			
b From 2012.	15,326			
c From 2013.	124,209			
d From 2014.	7,559			
e From 2015.	121,000			
f Total of lines 3a through e.	278,210			
4 Qualifying distributions for 2016 from Part XII, line 4 ► \$ 167,600			0	
a Applied to 2015, 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 2016 distributable amount.				167,600
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	9,812			9,812
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	268,398			
b Prior years' undistributed income Subtract 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 2015 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017.				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)	0			
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions)	304			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a.	268,094			
10 Analysis of line 9				
a Excess from 2012.	15,326			
b Excess from 2013.	124,209			
c Excess from 2014.	7,559			
d Excess from 2015.	121,000			
e Excess from 2016.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a	If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. ►			
b	Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)			
2a	Enter the lesser of the adjusted net income from Part I or the minimum 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.			
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, 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 (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ► if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or email address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments.					
3 Interest on savings and temporary cash investments			14	197	
4 Dividends and interest from securities.			14	20,171	
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory			18	8,935	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e).		0		29,303	
13 Total. Add line 12, columns (b), (d), and (e).					29,303

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

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 the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting foundation to a noncharitable exempt organization of

(1) Cash. . .

(1) Sales of assets to a noncharitable exempt organization.

(2) Purchases of assets from a noncharitable exempt organization.

(3) Rental of facilities, equipment, or other assets.

(4) Reimbursement arrangements.

(5) Loans or loan guarantees.

(6) Performance of services or membership or fundraising solicitations.

Sharing of facilities, equipment, mailing lists, other assets, or paid employees.

	Yes	No
a(1)		No
a(2)		No
b(1)		No
b(2)		No
b(3)		No
b(4)		No
b(5)		No
b(6)		No
1c		No

d If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations

described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign 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.

* * * * *

2017-11-10

* * * * *

May the IRS discuss this return
with the preparer shown below
(see instr.)? Yes No

**Sign
Here**

**Paid
Preparer
Use Only**

Paid Preparer Use Only	Print/Type preparer's name ELLIOTT GLASS	Preparer's Signature	Date 2017-11-10	Check if self-employed ► <input type="checkbox"/>	PTIN P00157549
	Firm's name ► JANOVER LLC				Firm's EIN ► 11-3258497
	Firm's address ► 485 MADISON AVE - 9TH FLOOR NEW YORK, NY 10022				Phone no (212) 792-6300

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week (c) devoted to position	(d) Compensation (If not paid, enter -0-)	(e) Contributions to employee benefit plans and deferred compensation	(f) Expense account, (g) other allowances
PATRICIA CALLAHAN 333 SEVENTH AVENUE 11TH FLOOR NEW YORK, NY 10001	DIRECTOR 10 00	2,000	0	0
CAROLYN CALLAHAN 333 SEVENTH AVENUE 11TH FLOOR NEW YORK, NY 10001	DIRECTOR 10 00	0	0	0
LINDA FARLEY 333 SEVENTH AVENUE 11TH FLOOR NEW YORK, NY 10001	FUND MANAGER 10 00	2,000	0	0
DONALD SULLIVAN 333 SEVENTH AVENUE 11TH FLOOR NEW YORK, NY 10001	DIRECTOR 10 00	3,000	0	0
CHRISTINE CALLAHAN 333 SEVENTH AVENUE 11TH FLOOR NEW YORK, NY 10001	DIRECTOR 10 00	1,000	0	0

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
AMERICAN HEART ASSN 2300 CENTRE PARK WEST W PALM BEACH, FL 33401	NONE	501(C)(3)	GENERAL	1,000
AMERICAN CANCER SOCIETY 132 W 32ND ST NEW YORK, NY 10001	NONE	501(C)(3)	GENERAL	5,000
ARMORY ART CENTER 1700 PARKER AVE W PALM BEACH, FL 33401	NONE	501(C)(3)	GENERAL	1,000
AUTISM PROJECT OF PALM BEACH COUNTY 5800 CORPORATE WAY WEST PALM BEACH, FL 33407	NONE	501(C)(3)	GENERAL	1,000
BRAIN AND BEHAVIOR RESEARCH FNDN 90 PARK AVENUE 16TH FLOOR NEW YORK, NY 10016	NONE	501(C)(3)	GENERAL	1,000
Total				159,600
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
BRENDAN DUGAN SCHOLARSHIP FUND CO ST FRANCIS COLLEGE 180 REMSEN ST BROOKLYN HEIGHTS, NY 11201	NONE	501(C)(3)	GENERAL	5,000
BROOKLYN PHILHARMONIA CHORUS 124 HENRY ST BROOKLYN, NY 11201	NONE	501(C)(3)	GENERAL	1,000
CARIDAD CENTER 8645 W BOYNTON BEACH BLVD BOYNTON BEACH, FL 33437	NONE	501(C)(3)	GENERAL	1,000
CATHOLIC CHARITIES OF DIOCESE BATON ROUGE 1800 S ACADIAN THRUWAY BATON ROUGE, LA 70808	NONE	501(C)(3)	GENERAL	5,000
CATHOLIC CHARITIES PALM BEACH COUNTY 9995 N MILITARY TRAIL PALM BEACH GARDENS, FL 33410	NONE	501(C)(3)	GENERAL	2,000
Total				159,600
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
CENTER FOR FOOD ACTION 192 W DEMAREST AVE ENGLEWOOD, NJ 07631	NONE	501(C)(3)	GENERAL	1,000
CFPMMCIMPACT THE PALM BEACHES 261 NW 13TH STREET BOCA RATON, FL 33432	NONE	501(C)(3)	GENERAL	1,100
CHARITY NAVIGATOR 139 HARRISTOWN RD STE 201 GLEN ROCK, NJ 07452	NONE	501(C)(3)	GENERAL	1,000
CHURCH OF ST FRANCIS OF ASSISI 135 WEST THIRTY-FIRST STREET NEW YORK, NY 10001	NONE	501(C)(3)	GENERAL	1,000
COLUMBIA UNIVERSITY PANCREATIC CANCER RESEARCH 622 WEST 113TH STREET NEW YORK, NY 10025	NONE	501(C)(3)	GENERAL	1,000
Total ►				159,600
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
CYSTIC FIBROSIS FOUNDATION 700 S DIXIE HWY 100 HOLLAND, MI 49423	NONE	501(C)(3)	GENERAL	1,000
DANNY AND RON'S RESCUE 12161 KEN ADAMS WAY 110BB WELLINGTON, FL 33414	NONE	501(C)(3)	GENERAL	1,000
FARMWORKERS COORD COUNCIL PB COUNTY 1123 CRESTWOOD BLVD LAKE WORTH, FL 33460	NONE	501(C)(3)	GENERAL	1,000
FOOD BANK FOR NEW YORK CITY 39 BROADWAY 10TH FLOOR NEW YORK, NY 10006	NONE	501(C)(3)	GENERAL	2,000
FOOD BANK FOR WESTCHESTER 39 BROADWAY 10TH FL NEW YORK, NY 10006	NONE	501(C)(3)	GENERAL	1,000
Total ►				159,600
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
FOX SHELTER 111 EAST 117TH STREET NEW YORK, NY 10035	NONE	501(C)(3)	GENERAL	1,000
FRESH AIR FUND 633 THIRD AVE 14TH FL NEW YORK, NY 10017	NONE	501(C)(3)	GENERAL	1,000
FRIENDS OF VIETNAM VETS 55 WATER ST NEW YORK, NY 10041	NONE	501(C)(3)	GENERAL	2,000
GLADES HEALTHCARE 230 S BARFIELD HWY PAHOKEE, FL 33476	NONE	501(C)(3)	GENERAL	1,000
HABITAT FOR HUMANITY - PB COUNTY 6578 N MILITARY TRAIL 303 W PALM BEACH, FL 33407	NONE	501(C)(3)	GENERAL	2,000
Total				159,600
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
HACKENSACK UNIVERSITY MEDICAL CENTER FOUNDATION 160 ESSEX STREET STE 101 LODI, NJ 07644	NONE	501(C)(3)	GENERAL	2,000
HISTORICAL SOCIETY OF PALM BEACH COUNTY PO BOX 4364 WEST PALM BEACH, FL 33402	NONE	501(C)(3)	GENERAL	1,000
HOLY APOSTLES SOUP KITCHEN 296 NINTH AVE NEW YORK, NY 10001	NONE	501(C)(3)	GENERAL	1,000
HOME FOR OUR TROOPS 6 MAIN STREET TAUNTON, MA 02780	NONE	501(C)(3)	GENERAL	1,000
HOME SAFE 2840 6TH AVENUE SOUTH LAKE WORTH, FL 33461	NONE	501(C)(3)	GENERAL	1,000
Total ►				159,600
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
HOPE CENTER PO BOX 6 LEXINGTON, KY 40588	NONE	501(C)(3)	GENERAL	1,000
HOPE FOR THE WARRIOR 1335 STE E WESTERN BLVD JACKSONVILLE, NC 28546	NONE	501(C)(3)	GENERAL	1,000
HOPE RURAL SCHOOL INC 15929 SW 150TH STREET INDIANTOWN, FL 34956	NONE	501(C)(3)	GENERAL	2,500
IMMACULATE HEART ACADEMY 500 VAN EMBURGH AVE TOWNSHIP OF WASHINGTON, NJ 07676	NONE	501(C)(3)	GENERAL	3,000
JULIA'S BUTTERFLY FOUNDATION 637 WYCKOFF AVE 285 WYCKOFF, NJ 07481	NONE	501(C)(3)	GENERAL	2,500
Total				159,600
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
JUPITER MEDICAL CENTER FOUNDATION 1210 S OLD DIXIE HWY JUPITER, FL 33458	NONE	501(C)(3)	GENERAL	2,000
KRAVIS CENTER FOR PERFORMING ARTS 701 E OKEECHOBEE BLVD WEST PALM BEACH, FL 33401	NONE	501(C)(3)	GENERAL	2,000
LEUKEMIA & LYMPHOMA SOCIETY 4360 NORTHLAKE BLVD SUITE 109 PALM BEACH GARDENS, FL 33410	NONE	501(C)(3)	GENERAL	2,500
LITTLE FRIENDS AUTISM CENTER 140 N WRIGHT STREET NAPIERVILLE, IL 60540	NONE	501(C)(3)	GENERAL	5,000
LITTLE SISTERS OF THE POOR JEANNE JUGAN RESIDENCE 2999 SCHURZ AVE BRONX, NY 10465	NONE	501(C)(3)	GENERAL	1,000
Total ►				159,600
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
LORD'S PLACE 2808 N AUSTRALIAN AVE WEST PALM BEACH, FL 33407	NONE	501(C)(3)	GENERAL	1,000
MATTHEW DUDGEON FUND PO BOX 19 CHESTER, NY 10918	NONE	501(C)(3)	GENERAL	2,000
MEMORIAL SLOAN-KETT CANCER CTR 1275 YORK AVENUE NEW YORK, NY 10021	NONE	501(C)(3)	GENERAL	2,000
MERILLON ATHLETIC ASSOCIATION 2300 MARCUS AVE NEW HYDE PARK, NY 11042	NONE	501(C)(3)	GENERAL	1,000
MISCELLANEOUS CHURCHES 500 S AUSTRALIAN AVENUE WEST PALM BEACH, FL 33401	NONE	501(C)(3)	GENERAL	12,500
Total ►				159,600
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
MULTIPLE MYELOMA RESEARCH FOUNDATION 383 MAIN AVENUE 5TH FLOOR NORWALK, CT 06851	NONE	501(C)(3)	GENERAL	1,000
NEW JERSEY CHORAL SOCIETY PO BOX 367 RIDGEWOOD, NJ 07451	NONE	501(C)(3)	GENERAL	1,000
NEW YORK PRESBYTERIAN HOSPITAL 525 EAST 68TH STREET NEW YORK, NY 10065	NONE	501(C)(3)	GENERAL	2,500
NEW YORK WEILL CORNELL MED CTR 1300 YORK AVE BOX 314 NEW YORK, NY 10065	NONE	501(C)(3)	GENERAL	2,500
NORTON MUSEUM OF ART 1451 SOUTH OLIVE AVENUE WEST PALM BEACH, FL 33401	NONE	501(C)(3)	GENERAL	1,000
Total ►				159,600
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
OASIS 59 MILL STREET PATERSON, NJ 07501	NONE	501(C)(3)	GENERAL	1,000
OPPORTUNITY INC 1713 QUAIL DRIVE W PALM BEACH, FL 33409	NONE	501(C)(3)	GENERAL	3,000
PALM BEACH COUNTY FOOD BANK 525 GATOR DRIVE LATANA, FL 33462	NONE	501(C)(3)	GENERAL	1,000
PALM BEACH DAY ACADEMY 241 SEAVIEW AVENUE PALM BEACH, FL 33480	NONE	501(C)(3)	GENERAL	10,000
PALM BEACH DRAMAWORKS 322 BANYAN BLVD WEST PALM BEACH, FL 33401	NONE	501(C)(3)	GENERAL	1,000
Total ►				159,600
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
PALM BEACH POPS 500 AUSTRALIAN AVENUE 100 WEST PALM BEACH, FL 33401	NONE	501(C)(3)	GENERAL	2,000
PALM BEACH SYMPHONY 44 COCOANUT ROW M207B PALM BEACH, FL 33480	NONE	501(C)(3)	GENERAL	1,000
PASSION FOR PAWS 500 S AUSTRALIAN AVE 120 WEST PALM BEACH, FL 33401	NONE	501(C)(3)	GENERAL	500
PLACE FOR HOPE 9078 ISAIAH LANE PALM BEACH GARDENS, FL 33418	NONE	501(C)(3)	GENERAL	1,000
PROJECT CHILDREN PO BOX 933 GREENWOOD LAKEN, NY 10925	NONE	501(C)(3)	GENERAL	4,500
Total ►				159,600
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
REED ACADEMY 25 POTASH ROAD OAKLAND, NJ 07436	NONE	501(C)(3)	GENERAL	1,000
SACRED HEART SCHOOL 410 N M STREET LAKE WORTH, FL 33460	NONE	501(C)(3)	GENERAL	1,000
SAFADELL UNITED BANK 180 ROYAL PALM WAY PALM BEACH, FL 33480	NONE	501(C)(3)	GENERAL	1,000
SEAMARK RANCH 3631 SEAMARK RANCH ROAD FL-16 GREEN COVE SPRINGS, FL 32043	NONE	501(C)(3)	GENERAL	1,000
SISTERS OF ST JOSEPH 1725 BRENTWOOD RD BRENTWOOD, NY 11717	NONE	501(C)(3)	GENERAL	1,500
Total				159,600
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
SO FLA HITMEN TRAVEL BASEBALL 15459 WHISPERING WILLOW DR WELLINGTON, FL 33414	NONE	501(C)(3)	GENERAL	3,000
ST ANDREWS SCHOOL 3900 JOG ROAD BOCA RATON, FL 33434	NONE	501(C)(3)	GENERAL	2,500
ST PATRICK CHUCH 13591 PROSPERITY FARMS ROAD PALM BEACH GDNS, FL 33410	NONE	501(C)(3)	GENERAL	1,000
ST ANN'S CHURCH - GOLF OUTING 25 EASTERN AVE OSSINING, NY 10562	NONE	501(C)(3)	GENERAL	1,000
ST ANN'S CHURCH - WPB 310 N OLIVE AVENUE W PALM BEACH, FL 33401	NONE	501(C)(3)	GENERAL	1,000
Total				159,600
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
ST ANN'S CHURCH 25 EASTERN AVE OSSINING, NY 10562	NONE	501(C)(3)	GENERAL	1,000
ST FRANCIS BREADLINE 144 WEST 32ND STREET NEW YORK, NY 10001	NONE	501(C)(3)	GENERAL	1,000
ST FRANCIS COLLEGE 180 REMSEN STREET BROOKLYN HEIGHTS, NY 11201	NONE	501(C)(3)	GENERAL	15,000
TUESDAYS CHILDREN 390 PLANDOME RD SUITE 217 MANHASSET, NY 11030	NONE	501(C)(3)	GENERAL	1,500
TYLER DEGNEN EDUCATION FUND MORGAN STANLEY ATTENTION STEPHEN SYSLO 1200 EAST RIDGEWOOD AVENUE RIDGEWOOD, NJ 07540	NONE	501(C)(3)	GENERAL	1,000
Total				159,600
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
UNITED NEGRO COLLEGE FUND 8260 WILLOW OAKS CORP DRIVE FAIRFAX, VA 22031	NONE	501(C)(3)	GENERAL	1,000
URSULINE SCHOOL 1354 NORTH AVENUE NEW ROCHELLE, NY 10804	NONE	501(C)(3)	GENERAL	3,000
WXEL PUBLIC TV PO BOX 6607 W PALM BEACH, FL 33405	NONE	501(C)(3)	GENERAL	1,000
Total				159,600
3a				

TY 2016 Accounting Fees Schedule

Name: P J CALLAHAN FOUNDATION INC**EIN:** 01-0687604

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
JANOVER LLC	10,000	10,000	10,000	0

TY 2016 Investments Corporate Stock Schedule

Name: P J CALLAHAN FOUNDATION INC

EIN: 01-0687604

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CORPORATE STOCK	1,140,818	1,282,086

TY 2016 Investments - Other Schedule

Name: P J CALLAHAN FOUNDATION INC**EIN:** 01-0687604

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
OLD WESTBURY FIXED INCOME	AT COST	362,468	353,414

TY 2016 Other Assets Schedule

Name: P J CALLAHAN FOUNDATION INC**EIN:** 01-0687604

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
FRACTIONAL INT - DOGWOOD LP	803,018	181,687	1,916,389

TY 2016 Other Expenses Schedule

Name: P J CALLAHAN FOUNDATION INC
EIN: 01-0687604

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT SERVICE FEE	2,306	2,306	2,306	0
MISCELLANOUS	6	6	6	0

TY 2016 Taxes Schedule

Name: P J CALLAHAN FOUNDATION INC**EIN:** 01-0687604

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FLORIDA FRANCHISE TAX	61	61	61	0
FOREIGN TAXES	395	395	395	0
UBI TAXES	500,000	0	0	0
NYS TAXES	10,000	0	10,000	0
FEDERAL TAXES - 990PF EXCISE TAX	40,000	40,000	40,000	0

Schedule B
(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

OMB No 1545-0047

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

2016**Name of the organization**
P J CALLAHAN FOUNDATION INC**Employer identification number**
01-0687604**Organization type (check one)****Filers of:****Section:**

Form 990 or 990-EZ

501(c)() (enter number) organization
 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

Form 990-PF

527 political organization
 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**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other 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 33¹ 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, charitable, 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, charitable, 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 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization P J CALLAHAN FOUNDATION INC		Employer identification number 01-0687604	
Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THE PETER J CALLAHAN CHAR LEAD TRUST	\$ 179,827	Person <input checked="" type="checkbox"/>
	222 ROYAL PALM WAY		Payroll <input type="checkbox"/>
	PALM BEACH, FL33480		Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	PETER J CALLAHAN 2415 CASA DE MARBELLA DR	\$ 10,000	Person <input checked="" type="checkbox"/>
	PALM BEACH GARDENS, FL33410		Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions)			

Name of organization P J CALLAHAN FOUNDATION INC		Employer identification number 01-0687604	
Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed			
(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
		\$	
(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
		\$	

Name of organization
 P J CALLAHAN FOUNDATION INC

Employer identification number
 01-0687604

Part III *Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____*
 Use duplicate copies of Part III if additional 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, and ZIP 4 Relationship of transferor to transferee

(e) Transfer of gift
 Transferee's name, address, and ZIP 4 Relationship of transferor to transferee

(e) Transfer of gift
 Transferee's name, address, and ZIP 4 Relationship of transferor to transferee

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 Transferee's name, address, and ZIP 4 Relationship of transferor to transferee