Form **990-PF**

1612 EXTENDED TO NOVEMBER 15 **Return of Private Foundation**

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

AMENDED FORM 1990 PROFESSIONES

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf

	Ford	alen	dar year 2016 or tax year beginning		, and ending				
)	Nan	ne of	foundation				A Employer identification number		
/	BELLUCCI DEPAOLI FAMILY FOUNDATION INC.					13-3944033			
N	Num	ber a	nd street (or P O box number if mail is not delivered to street a	ddress)	Room	/suite	B Telephone number		
' \	_7	25	7 NW 4TH BOULEVARD, STE	199			352-318-13	86	
			own, state or province, country, and ZIP or foreign pore $NESVILLE$, $FL=32607$	ostal code			C If exemption application is pe	ending, check here	
			all that apply: Initial return	Initial return of a fo	ormer public charity		D 1 Foreign organizations	check here	
	u o	IICON	Final return	X Amended return	inner public onlanty			,	
			Address change	Name change			2 Foreign organizations me check here and attach cor	eting the 85% test, mputation	
	н с	heck	type of organization: X Section 501(c)(3) ex	empt private foundation			E If private foundation state	tus was terminated	
				Other taxable private founda			under section 507(b)(1)	(A), check here	
			arket value of all assets at end of year J Accounti	-	X Accrual		F If the foundation is in a		
	(fr		Part II, col. (c), line 16) 3 , 331 , 023 . (Part I, colum	her (specify)	acie l		under section 507(b)(1)	(B), check here	
1		rt I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investm	ent	(c) Adjusted net	(d) Disbursements	
			(The total of amounts in columns (b) (c) and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	iciit	income	for charitable purposes (cash basis only)	
•		1	Contributions, gifts, grants, etc , received	146,214.			N/A		
		2	Check I if the foundation is not required to attach Sch. B						
ල		3	Interest on savings and temporary cash investments	77.	0.5	77.		STATEMENT 1	
2018		4	Dividends and interest from securities	42,760.	26,5	85.		STATEMENT 2	
9		-	Gross rents			-			
(9 (7			Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10	3,664.	·				
APR	ē	b	Gross sales price for all assets on line 6a 317_,054.	3,001			E)	CFIVED	
	Ver	7	associa of fine od		3,6	64.	p	Ø	
	Rev	8	Net short-term capital gain			_		R 2 7 2018 3	
Ź		9	Income modifications Gross sales less returns				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	27 7030 8	
SCANNED		10a	and allowances					GDEN, UT	
Ž			Gross profit or (loss)						
٠,٠			Other income						
		12	Total Add lines 1 through 11	192,715.	30,3	26.			
		13	Compensation of officers, directors trustees, etc	38,500.		0.		38,500.	
		14	Other employee salaries and wages						
			Pension plans, employee benefits Lenal fees STMT 3	7,690.		0.		7,690.	
	ses	16a	Logar 1000	4,000.		0.		4,000.	
	Expense	0	Accounting fees STMT 4 Other professional fees STMT 5	19,436.	19,4			0.	
	Ē	17	Interest						
	atıv	18	Taxes STMT 6	295.	2	95.		0.	
	ııstr	19	Depreciation and depletion						
	Imir	20	Occupancy					<u> </u>	
	d Ac	21	Travel, conferences, and meetings					<u> </u>	
	an	22	Printing and publications Other expenses STMT 7	2,258.		0.		2,258.	
	ting		Total operating and administrative						
	perati		expenses Add lines 13 through 23	72,179.	19,7	31.		52,448.	
	Ö	25	Contributions, gifts, grants paid	150,000.				150,000.	
		26	Total expenses and disbursements	000 170	10 5	721		202 449	
			Add lines 24 and 25	222,179.	19,7	эт.		202,448.	
		27	Subtract line 26 from line 12	-29,464.					
			Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	25/1011	10,5	95.			
			Adjusted net income (if negative, enter -0-)				N/A		
								5 000 DE (0040)	

For	m 99	0-PF(2016) BELLUCCI DEPAOLI FAMILY			3944033 Page 2
Į.	ăñ.	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	
	ai,t;	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	1,762,000.	45,672.	
	2	Savings and temporary cash investments		1,732,913.	1,732,913.
	3	Accounts receivable		7.5	
	Ĭ	Less: allowance for doubtful accounts	4,283.		
		Pledges receivable			
ı	4	Less: allowance for doubtful accounts		<u> </u>	<u></u>
ı	i _				
	l	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	ł	disqualified persons			
	7	Other notes and loans receivable			<u> </u>
	Ì	Less: allowance for doubtful accounts			
s	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As		Investments - U.S. and state government obligations STMT 8	496,617.	208,040.	208,040.
		Investments - corporate stock STMT 9	1,050,801.	1,344,398.	1,344,398.
	l	Investments - corporate bonds STMT 10	62,907.	0.	0.
	l		02/30/1		
	111	Investments - land buildings and equipment basis		<u></u>	
	ł	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis			
	}	Less accumulated depreciation			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
	}	instructions. Also, see page 1, item !)	3,376,608.	3,331,023.	3,331,023.
	17	Accounts payable and accrued expenses	3,500.		
	18	Grants payable	80,000.		
	19	Deferred revenue			
ies	20	Loans from officers, directors, trustees, and other disqualified persons)
Ē	21	Mortgages and other notes payable			1
Liabilities	ſ				
_	22	Other liabilities (describe			
		The Little Water (add here 47 Absorb 00)	83,500.	0.	
_	23_	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here	03,300.	<u> </u>	,
	1	and complete lines 24 through 26 and lines 30 and 31	2 002 100	2 221 002	
ĕ	24	Unrestricted	3,293,108.	3,331,023.	j),
a	25	Temporarily restricted			}
Ва	26	Permanently restricted			
Net Assets or Fund Balances	1	Foundations that do not follow SFAS 117, check here			
Ŀ	1	and complete lines 27 through 31.			
þ	27	Capital stock, trust principal, or current funds		l	
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			{
Ass	29	Retained earnings, accumulated income, endowment, or other funds			
et	30	Total net assets or fund balances	3,293,108.	3,331,023.	
Z	"	Total not about of folio balanood			
	31	Total liabilities and net assets/fund balances	3,376,608.	3,331,023.	
Ξ				<u> </u>	<u> </u>
iP3	ant	Analysis of Changes in Net Assets or Fund Ba	nances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1	3,293,108.
	•	amount from Part I, line 27a		2	-29,464.
		r increases not included in line 2 (itemize) UNREALIZED (GAINS	3	120,094.
		lines 1, 2, and 3		4	3,383,738.
		eases not included in line 2 (itemize) PY ADJUSTMENT		5	52,715.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	3,331,023.
_					Form 990-PF (2016)

Form 990-PF (2016)

106.

95,186.

202,448.

7 Add lines 5 and 6

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.

8 Enter qualifying distributions from Part XII, line 4

6 Enter 1% of net investment income (1% of Part I, line 27b)

	990-PF (2016) BELLUCCI DEPAOLI FAMILY FOUNDATION INC.	<u>13-3</u>	94403	3	Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	48 - s	ee instr	uction	is)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	.)			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				لــــا
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	_1		1	06.
	of Part I, line 27b				- 1
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				
	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			06.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4		1	0.
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5			00.
	Credits/Payments:				ł
	2016 estimated tax payments and 2015 overpayment credited to 2016 6a Ch				ł
	Exempt foreign organizations - tax withheld at source The part with explication for extension of time to file (Form 8000)				ł
	Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld 6d 6d	. 1			
	Backup withholding erroneously withheld Total credits and payments. Add lines 6a through 6d TAX PAID W/ O.R. 1,892.	7		1 8	92.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8		1,0	<u> </u>
	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		1.7	86.
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax	11			0.
	rt 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	ın		Yes	No
	any political campaign?		18		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)	?	1b	$\overline{}$	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published		<u> </u>		\Box
	distributed by the foundation in connection with the activities.			, (· <u>·</u>	
C	Did the foundation file Form 1120-POL for this year?		10		X
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 .		l		1 , 1
е	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?		2		X
	If "Yes," attach a detailed description of the activities.		.	in the second	,
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		<u> </u>		لبينا
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		_3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	37 /			X
_ b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/			X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	 -	┼╧┐
^	If "Yes," attach the statement required by General Instruction T.		}	Ì	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or		1	1	}
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state 	law	i	ł	1 1
	remain in the governing instrument?	avv	6	X	┼
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7		
•	bid the foundation have at least \$0,000 in assets at any time outling the year. If thes, complete mart if, coi. (c), and mart XV		·	+	$t \neg \tau$
R a	Enter the states to which the foundation reports or with which it is registered (see instructions)		ļ	1	1 1
ou.	NY		-		
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		-		
J	of each state as required by General Instruction G? If "No," attach explanation		86	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calen	dar	P		
-	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		X
			Form 9	90-PF	(2016)

Form 990-PF (2016)

3b

4a

N/A

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2016.)

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

623551 11-23-16

orm 990-PF (2016) BELLUCCI DEPAOLI FAMILY FOUNDATION		13-394	4033 Page
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, F	lighly	
3 Five highest-pàid independent contractors for professional services. If none, enter "N	NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Typ	e of service	(c) Compensation
NONE			
	}		
	Ì		
	1		
	<u> </u>		
Total number of others receiving over \$50,000 for professional services			<u> </u>
Partix A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce	al information such as ed, etc.	the	Expenses
1 N/A			
2			
3			
·			
			
			•
Partix B Summary of Program-Related Investments		 	
Describe the two largest program-related investments made by the foundation during the tax year on line	es 1 and 2.		Amount
1 N/A			
2			
	· 		
All other program-related investments. See instructions.			
3	 -		
			
			
Total. Add lines 1 through 3			0
Total, And mice I tillough a manufacture of the man			Form 990-PF (2016
			(201)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	dation	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
·	Average monthly fair market value of securities	1a	1.478.145.
b	Average of monthly cash balances	1b	1,478,145. 1,935,874.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	10	3,414,019.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation) 1e 1		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,414,019.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	51,210.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,362,809.
6	Minimum investment return Enter 5% of line 5	6	168,140.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certair	<u></u>
	foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	168,140.
2a	Tax on investment income for 2016 from Part VI, line 5	```	
b	Income tax for 2016. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	106.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	168,034.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	168,034.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	168,034.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	な世	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	202,448.
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:		
а	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	202,448.
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	5	106.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	202,342.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years.	ualifies f	for the section

Form **990-PF** (2016)

623581 11-23-16

d Excess from 2015 e Excess from 2016

Form 990-PF (2016)

		AMILY FOUND			944033 Page 10
PartiXIV Private Operating Fo			A, question 9)	N/A	
1 a If the foundation has received a ruling or		, , ,	ļ		
foundation, and the ruling is effective for	2016, enter the date of	the ruling	▶ ـ		
b Check box to indicate whether the found		ng foundation described i		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	41.0045	Prior 3 years	T	↓
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed		 	 	ļ	
b 85% of line 2a		 	 	 -	
c Qualifying distributions from Part XII,				ļ	
line 4 for each year listed		<u> </u>	 	ļ	ļ
d Amounts included in line 2c not			1		Ì
used directly for active conduct of					
exempt activities		 	 	ļ	ļ <u>.</u>
e Qualifying distributions made directly					
for active conduct of exempt activities.		ļ			
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the		 	 	 	
alternative test relied upon:		ļ			
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		Į	ļ		
securities loans (section					ŀ
512(a)(5)), or royalties)			 	 	ļ <u></u>
(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	mation (Comple	te this part only i	f the foundation I	had \$5 000 or mo	re in assets
at any time during the			i the roundation i	1αα φο,σσο στ τησ	16 111 033613
1 Information Regarding Foundation				·	
a List any managers of the foundation who	*	than 2% of the total contr	ubutions received by the	foundation before the clos	se of any tax
year (but only if they have contributed m			ibalions received by the	obnication colors and cros	o or any tax
NONE					
b List any managers of the foundation who	own 10% or more of th	e stock of a corporation (or an equally large portio	n of the ownership of a pa	artnership or
other entity) of which the foundation has					
NONE					
2 Information Regarding Contribution	on, Grant, Gift, Loan,	Scholarship, etc., Pro	ograms:		
Check here 🕨 🔲 if the foundation of					
the foundation makes gifts, grants, etc. (<u>d.</u>
a The name, address, and telephone numb		he person to whom applic	cations should be address	sed:	
KEVIN O'LEARY, 352-31		a			
7257 NW 4TH BOULEVARI					
b The form in which applications should be DESCRIPTION OF PROGRA		tion and materials they sh	iould include:		
c Any submission deadlines:					
NONE	auch on hu no	al arago, abaritable fields	kinds of institutions or a	ther factors:	
d Any restrictions or limitations on awards NONE	, such as by geographic	ai ai eas, charlladie helds,	KINGS OF HISHIGHOUS, OF O	uici ideluis.	
					
623601 11-23-16					Form 990-PF (2016)

Page 11

BELLUCCI DEPAOLI FAMILY FOUNDATION INC.

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year CREIGHTON UNIVERSITY GENERAL OPERATING N/A РC 2500 CALIFORNIA PLAZA SUPPORT OMAHA, NE 68178 100,000. JOHN P SCHLEGEL CENTER FOR SERVICE N/A ÞС GENERAL OPERATING AND JUSTICE SUPPORT 2500 CALIFORNIA PLAZA, SUITE 2067 OMAHA, NE 68178 25,000. LA SCUOLA D'ITALIA N/A PC GENERAL OPERATING 12 E 96 STREET SUPPORT NEW YORK, NY 10128 10,000. РC THE CRUDEM FOUNDATION N/A GENERAL OPERATING 362 SEWALL STREET SUPPORT LUDLOW, MA 01056 5,000. ÞС GENERAL OPERATING AMERICAN ASSOCIATION KNIGHTS OF MALTA h/a 1011 1ST AVENUE SUPPORT NEW YORK, NY 10022 5,000. SEE CONTINUATION SHEET(S) 150,000. ➤ 3a Total b Approved for future payment NONE 3b Total

Form 990-PF (2016)

Part XVI-A	Analysis of Income-Producing Activitie	S

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income	Exclu			
enter gross amounts unless otherwise molcated.	(a)	(b)	(c) Exclu-	(d)	(e) Related or exempt	
4 Dengerom position roughly	Business code	Amount	sion	Amount	function income	
1 Program service revenue	Loue		-	 		
<u> </u>	-		 			
b			 			
c	_		├	 	. 	
d	-		 -			
e	-					
f	_		<u> </u>			
g Fees and contracts from government agencies		 	<u> </u>			
2 Membership dues and assessments	<u> </u>		<u> </u>			
3 Interest on savings and temporary cash	1	1		1		
investments	<u> </u>	 - 	14			
4 Dividends and interest from securities			14			
5 Net rental income or (loss) from real estate:	1.362.55	NAME OF THE PARTY	500	4,1	(1) 出版》與	
a Debt-financed property						
b Not debt-financed property						
6. Net rental income or (loss) from personal						
property	1		1		•	
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory	i		18	3,664.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:						
	1		l	}		
a			 			
0	-		<u> </u>			
c	-		 			
d	_					
12 Subtotal. Add columns (b), (d), and (e)		0.	1	46,501.	0.	
13 Total. Add line 12, columns (b), (d), and (e)	(and desired the second	<u>_</u>	برادههما ا	13	46 504	
(See worksheet in line 13 instructions to verify calculations.)				13	20/3011	
Toes worksheet in line to instructions to verify calculations.)						

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

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
+	
	
	Form 990-PF (2

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No 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: X 1a(1) (1) Cash X (2) Other assets 1a(2) **b** Other transactions:

(1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) 1b(3) (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements 16(4) 16(5) (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations 16(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

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

colum	in (a) the value of the goods,	other assets, or services received.	
(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		N/A	
	,		
			<u> </u>
		<u></u>	
ın sec		tly affiliated with, or related to, one or more tax-exempt organi r than section 501(c)(3)) or in section 527?	zations described Yes X No
D II TES	s. complete the following Scri	Euuic.	

_D_II	Yes, complete the following schedule.			
	(a) Name of organization	(b) Type of organization	(c) Description of re	elationship
	N/A			
Sign	Under penytties of persecy, I declare that make examined this return, including and being it is true, correct, and complete Doctaration of preparer (other than			May the IHS discuss this return with the preparer shown below (see just 17

	and be	during of officer or trustee		ased on all informa		nas any knowledge	May the IHS discuss this return with the preparer shown below (see instr.)? X Yes No.
Paid	7	Print/Type preparer's name BRIAN VARLEY	Preparer's conature BRIAN VARLES	4	Date 01/18/18	Check if self- employed	PTIN P00506863
Prepa Use O		Firm's name ► PKF O'CONNOF	R DAVIES, LLF	?/)		Firm's EIN ► 2	7-1728945
		Firm's address ► 300 TICE BC WOODCLIFF I	OULEVARD, SUI LAKE, NJ 0767			Phone no. 20	1-712-9800
							Form 990-PF (2016)

Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	A
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
RCHDIOCESE OF NY 011 1ST AVENUE	N/A	PC	GENERAL OPERATING SUPPORT	ļ
EW YORK, NY 10022			BUFFORI	5,0
		 		
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Schedule B

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

Department of the Treasury-Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

2016

Name of the organization

Employer identification number

	BELLUCCI DEPAOLI FAMILY FOUNDATION INC.	13-3944033
Organization typ	e (check one)	
Filers of:	Section:	
Form 990 or 990-	EZ 501(c)() (enter number) organization	
	4947(a)(1) nonexempt chantable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	anization is covered by the General Rule or a Special Rule. ion 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special R	ule See instructions.
	rganization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling from any one contributor. Complete Parts I and II. See instructions for determining a contributo	
Special Rules		
sections any one	rganization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% suppor 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amorm 990-EZ, line 1 Complete Parts I and II.	, or 16b, and that received from
year, tot	rganization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from all contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or education of cruelty to children or animals. Complete Parts I, II, and III.	-
year, coi is check purpose	rganization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ntributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled red, enter here the total contributions that were received during the year for an exclusively religion. Don't complete any of the parts unless the General Rule applies to this organization because it, charitable, etc., contributions totaling \$5,000 or more during the year.	more than \$1,000 If this box us, charitable, etc.,
but it must answe	nization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (er "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 sn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	•

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

BELLUCCI DEPAOLI FAMILY FOUNDATION INC.

13-3944033

Parti	Contributors (See instructions) Use duplicate copies of Part I if additional	I space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ELEANOR B. BELLUCCI IRREV TRUST 701 E. 60TH ST. N. MC 1182 SIOUX FALLS, SD 57104	\$ 28,112.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	RICHARD J BELLUCCI MARITAL TRUST 701 E. 60TH ST. N. MC 1182 SIOUX FALLS, SD 57104	\$118,102.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Payroll Noncash Poncash Complete Part II for noncash contributions

Employer identification number

BELLUCCI DEPAOLI FAMILY FOUNDATION INC.

13-3944033

artill N	Ioncash Property (See instructions) Use duplicate copies of Par	t II if additional space is needed	
(a) No. rom art l	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
a) lo. om	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
a) lo. om art l	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_ -		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_ _		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. om art 1	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
			990, 990-EZ, or 990-PF) (2

Page 4 Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Employer identification number Name of organization BELLUCCI DEPAOLI FAMILY FOUNDATION INC 13-3944033 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 пкалиш completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF INTERE	ST ON SAVIN	IGS AND	TEMPOR	ARY C	ASH IN	VESTMENTS	SI	PATEMENT 1	
SOURCE					NET IN	(B) INVESTMENT INCOME		(C) ADJUSTED NET INCOME	
WELLS FARGO				77. 77.					
TOTAL TO PART I, LINE 3			77.			77.			
FORM 990-PF	DIVIDENDS	AND IN	TEREST	FROM	SECUR	ITIES	SI	'ATEMENT 2	
SOURCE	GROSS AMOUNT	CAPI' GAI DIVID	NS	REV!	A) ENUE BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOME	
WELLS FARGO- 1354 WELLS FARGO- 7375	22,386. 20,374.		0.	=		22,386. 4,199.			
TO PART I, LINE 4	42,760.		0.	4:	2,760.	26,58	5.		
FORM 990-PF		LE	GAL FE	ES				'ATEMENT 3	
DESCRIPTION		(A) EXPENSE PER BOOK		(B) I INVI NT INC		(C) ADJUSTED NET INCOM		(D) CHARITABLE PURPOSES	
LEGAL FEES		7,6	90.	0.		 		7,690.	
TO FM 990-PF, PG 1, LN 16A		7,6	90.	0.			- <u> </u>	7,690.	
FORM 990-PF		ACCOUNTING FEES				STATEMENT 4			
DESCRIPTION		(A) EXPENSE: PER BOOK		(B) T INVI NT INC		(C) ADJUSTED NET INCOM		(D) CHARITABLE PURPOSES	
ACCOUNTING FEES		4,0	00.		0.			4,000.	
TO FORM 990-PF, PG	1, LN 16B	4,0	00.		0.			4,000.	
	===						—	**	

FORM 990-PF C	THER PROFES	SIONAL FEES	S	TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
ADVISORY FEES ADR FEES	19,400. 36.			0.
TO FORM 990-PF, PG 1, LN 16C	19,436.	19,436.		0.
FORM 990-PF	TAX	ES	S	TATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES	295.	295.		0.
TO FORM 990-PF, PG 1, LN 18 =	295.	295.		0.
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
NYS FILING FEES OFFICE SUPPLIES	275. 1,983.			275. 1,983.
TO FORM 990-PF, PG 1, LN 23	2,258.	0.		2,258.

FORM 990-PF U.S. AND STATE/C	ITY GOV	VERNMENT	OBLIGATIONS	STATEMENT 8
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
MUNICIPAL BONDS		х	208,040.	208,040.
TOTAL U.S. GOVERNMENT OBLIGATIONS		-		
TOTAL STATE AND MUNICIPAL GOVERNMEN	T OBLI	GATIONS -	208,040.	208,040.
TOTAL TO FORM 990-PF, PART II, LINE	10A	=	208,040.	208,040.
FORM 990-PF COR	PORATE	STOCK		STATEMENT 9
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
EQUITIES		_	1,344,398.	1,344,398.
TOTAL TO FORM 990-PF, PART II, LINE	10в	=	1,344,398.	1,344,398.
			·	
FORM 990-PF COR	PORATE	BONDS		STATEMENT 10
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
DESCRIPTION CORPORATE BONDS		-	BOOK VALUE	FAIR MARKET