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

Department of the Treasury  
Internal Revenue Service

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

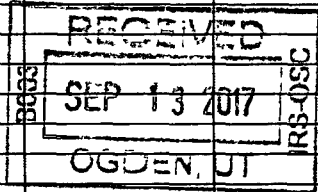
Open to Public Inspection

For calendar year 2016 or tax year beginning , 2016, and ending , 20

Name of foundation <b>BUFFALO BILLS FOUNDATION, INC.</b>		A Employer identification number <b>16-1291395</b>
Number and street (or P O box number if mail is not delivered to street address) <b>1 BILLS DRIVE</b>	Room/suite	B Telephone number (see instructions) <b>716-648-1800</b>
City or town, state or province, country, and ZIP or foreign postal code <b>ORCAHRD PARK, NY 14127-2237</b>		C If exemption application is pending, check here <input type="checkbox"/>
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 type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
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		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

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)	1,369,798			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)				
	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)					
12 <b>Total.</b> Add lines 1 through 11	1,369,798	0	0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	31			
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	456,743	0	0	28,493
	24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23	456,774	0	0	28,493
	25 Contributions, gifts, grants paid	298,110			298,110
26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	754,884	0	0	326,603	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	614,914				
b Net investment income (if negative, enter -0-)		0			
c <b>Adjusted net income</b> (if negative, enter -0-)				0	

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<b>Part II Balance Sheets</b>		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
<b>Assets</b>	<b>1</b>	Cash—non-interest-bearing . . . . .	179,582	691,618	691,618
	<b>2</b>	Savings and temporary cash investments . . . . .	0	0	0
	<b>3</b>	Accounts receivable ▶ Less: allowance for doubtful accounts ▶			
	<b>4</b>	Pledges receivable ▶ Less: allowance for doubtful accounts ▶	0	102,175	102,175
	<b>5</b>	Grants receivable . . . . .			
	<b>6</b>	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b>	Other notes and loans receivable (attach schedule) ▶ Less: allowance for doubtful accounts ▶			
	<b>8</b>	Inventories for sale or use . . . . .			
	<b>9</b>	Prepaid expenses and deferred charges . . . . .	0	69	69
	<b>10a</b>	Investments—U.S. and state government obligations (attach schedule)			
	<b>b</b>	Investments—corporate stock (attach schedule) . . . . .			
	<b>c</b>	Investments—corporate bonds (attach schedule) . . . . .			
	<b>11</b>	Investments—land, buildings, and equipment, basis ▶ Less: accumulated depreciation (attach schedule) ▶			
	<b>12</b>	Investments—mortgage loans . . . . .			
	<b>13</b>	Investments—other (attach schedule) . . . . .			
	<b>14</b>	Land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) ▶			
<b>15</b>	Other assets (describe ▶ )				
<b>16</b>	<b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I) . . . . .	179,582	793,862	793,862	
<b>Liabilities</b>	<b>17</b>	Accounts payable and accrued expenses . . . . .	70,000	69,366	
	<b>18</b>	Grants payable . . . . .			
	<b>19</b>	Deferred revenue . . . . .			
	<b>20</b>	Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b>	Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b>	Other liabilities (describe ▶ )			
<b>23</b>	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	70,000	69,366		
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/></b> <b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	<b>24</b>	Unrestricted . . . . .			
	<b>25</b>	Temporarily restricted . . . . .			
	<b>26</b>	Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/></b> <b>and complete lines 27 through 31.</b>				
	<b>27</b>	Capital stock, trust principal, or current funds . . . . .			
	<b>28</b>	Paid-in or capital surplus, or land, bldg., and equipment fund			
	<b>29</b>	Retained earnings, accumulated income, endowment, or other funds	109,582	724,496	
<b>30</b>	<b>Total net assets or fund balances</b> (see instructions) . . . . .	109,582	724,496		
<b>31</b>	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	109,582	724,496		

<b>Part III Analysis of Changes in Net Assets or Fund Balances</b>			
<b>1</b>	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) . . . . .	<b>1</b>	109,582
<b>2</b>	Enter amount from Part I, line 27a . . . . .	<b>2</b>	614,914
<b>3</b>	Other increases not included in line 2 (itemize) ▶	<b>3</b>	
<b>4</b>	Add lines 1, 2, and 3 . . . . .	<b>4</b>	724,496
<b>5</b>	Decreases not included in line 2 (itemize) ▶	<b>5</b>	
<b>6</b>	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	<b>6</b>	724,496

**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.)
<b>1a</b>				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
(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)	
<b>a</b>				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
<b>a</b>				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
<b>2</b> 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 }		<b>2</b>	
<b>3</b> 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			<b>3</b>	

**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?  Yes  No  
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year; see the 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			
2014			
2013			
2012			
2011			

<b>2</b> Total of line 1, column (d)	<b>2</b>	
<b>3</b> 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	<b>3</b>	
<b>4</b> Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	<b>4</b>	
<b>5</b> Multiply line 4 by line 3	<b>5</b>	
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	
<b>7</b> Add lines 5 and 6	<b>7</b>	
<b>8</b> Enter qualifying distributions from Part XII, line 4 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.	<b>8</b>	

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

<b>1a</b>	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)			
<b>b</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	<b>1</b>		<b>0</b>
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>		
<b>3</b>	Add lines 1 and 2	<b>3</b>		<b>0</b>
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>		
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-	<b>5</b>		<b>0</b>
<b>6</b>	<b>Credits/Payments:</b>			
<b>a</b>	2016 estimated tax payments and 2015 overpayment credited to 2016	<b>6a</b>		<b>69</b>
<b>b</b>	Exempt foreign organizations—tax withheld at source	<b>6b</b>		
<b>c</b>	Tax paid with application for extension of time to file (Form 8868)	<b>6c</b>		<b>0</b>
<b>d</b>	Backup withholding erroneously withheld	<b>6d</b>		
<b>7</b>	Total credits and payments. Add lines 6a through 6d	<b>7</b>		<b>69</b>
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>		
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	<b>9</b>		<b>0</b>
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	<b>10</b>		<b>69</b>
<b>11</b>	Enter the amount of line 10 to be: <b>Credited to 2017 estimated tax</b> <b>69</b> <b>Refunded</b>	<b>11</b>		<b>0</b>

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> 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?		✓
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the 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>		✓
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year?		✓
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: <b>(1)</b> On the foundation. ▶ \$ _____ <b>(2)</b> On foundation managers. ▶ \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ _____		
<b>2</b> 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>	✓	
<b>3</b> 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>		✓
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?		✓
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?		✓
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>		✓
<b>6</b> 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?	✓	
<b>7</b> 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>	✓	
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ <b>NY</b>		
<b>b</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 <i>General Instruction G</i> ? <i>If "No," attach explanation</i>	✓	
<b>9</b> 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>		✓
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	✓	

**Part VII-A Statements Regarding Activities (continued)**

		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)		✓
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)		✓
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>WWW.BUFFALOBILLS.COM</u>	✓	
14	The books are in care of ► <u>JOSHUA R. DZIURLIKOWSKI</u> Telephone no. ► <u>716-648-1800</u> Located at ► <u>1 BILLS DRIVE, ORCHARD PARK, NY</u> ZIP+4 ► <u>14127-2237</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here. <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . ► <u>15</u>		
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? . . . . . See the instructions for exceptions and filing requirements for FinCEN Form 114. 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.

		Yes	No
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? . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? ( <b>Exception.</b> 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.) . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 . . . . . ► <input type="checkbox"/>	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	✓
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? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20____, 20____, 20____, 20____		
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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	✓
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	✓

**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)?  Yes  No  
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?  Yes  No  
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?  Yes  No

**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).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE ATTACHMENT				

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

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NO PERSON IS PAID FOR PROFESSIONAL SERVICES				NONE
<b>Total</b> number of other employees paid over \$50,000				NONE

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

<b>3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."</b>		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
.....		<b>NONE</b>
.....		
.....		
.....		
.....		
<b>Total number of others receiving over \$50,000 for professional services</b> . . . . . ▶		<b>NONE</b>

**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.		Expenses
<b>1</b>	.....	
<b>2</b>	.....	
<b>3</b>	.....	
<b>4</b>	.....	

**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		Amount
<b>1</b>	.....	
<b>2</b>	.....	
<b>3</b>	All other program-related investments. See instructions	
<b>Total. Add lines 1 through 3</b> . . . . . ▶		

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities . . . . .	<b>1a</b>	<b>0</b>
<b>b</b>	Average of monthly cash balances . . . . .	<b>1b</b>	<b>300,778</b>
<b>c</b>	Fair market value of all other assets (see instructions) . . . . .	<b>1c</b>	<b>NONE</b>
<b>d</b>	<b>Total</b> (add lines 1a, b, and c) . . . . .	<b>1d</b>	<b>300,778</b>
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets . . . . .	<b>2</b>	<b>NONE</b>
<b>3</b>	Subtract line 2 from line 1d . . . . .	<b>3</b>	<b>300,778</b>
<b>4</b>	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see instructions) . . . . .	<b>4</b>	<b>4,512</b>
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	<b>296,266</b>
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5 . . . . .	<b>6</b>	<b>14,813</b>

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

<b>1</b>	Minimum investment return from Part X, line 6 . . . . .	<b>1</b>	<b>14,813</b>
<b>2a</b>	Tax on investment income for 2016 from Part VI, line 5 . . . . .	<b>2a</b>	<b>0</b>
<b>b</b>	Income tax for 2016. (This does not include the tax from Part VI.) . . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b . . . . .	<b>2c</b>	<b>0</b>
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1 . . . . .	<b>3</b>	<b>14,813</b>
<b>4</b>	Recoveries of amounts treated as qualifying distributions . . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4 . . . . .	<b>5</b>	<b>14,813</b>
<b>6</b>	Deduction from distributable amount (see instructions) . . . . .	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 . . . . .	<b>7</b>	<b>14,813</b>

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26 . . . . .	<b>1a</b>	<b>326,603</b>
<b>b</b>	Program-related investments—total from Part IX-B . . . . .	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes . . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required) . . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule) . . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	<b>326,603</b>
<b>5</b>	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) . . . . .	<b>5</b>	
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 . . . . .	<b>6</b>	<b>326,603</b>

**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
<b>1</b> Distributable amount for 2016 from Part XI, line 7 . . . . .				<b>14,813</b>
<b>2</b> Undistributed income, if any, as of the end of 2016:				
<b>a</b> Enter amount for 2015 only . . . . .				
<b>b</b> Total for prior years: 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2016:				
<b>a</b> From 2011 . . . . .	252,779			
<b>b</b> From 2012 . . . . .	311,498			
<b>c</b> From 2013 . . . . .	272,846			
<b>d</b> From 2014 . . . . .	307,698			
<b>e</b> From 2015 . . . . .	170,323			
<b>f</b> Total of lines 3a through e . . . . .	1,315,144			
<b>4</b> Qualifying distributions for 2016 from Part XII, line 4: ▶ \$ <u>326,603</u>				
<b>a</b> Applied to 2015, but not more than line 2a . . . . .				
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions) . . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions) . . . . .	311,790			
<b>d</b> Applied to 2016 distributable amount . . . . .				14,813
<b>e</b> Remaining amount distributed out of corpus . . . . .				
<b>5</b> Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a).)				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 . . . . .	1,626,934			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b . . . . .		0		
<b>c</b> 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 . . . . .				
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2015. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017 . . . . .				0
<b>7</b> 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) . . . . .				
<b>8</b> Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . . . .	252,779			
<b>9</b> Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a . . . . .	1,374,155			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2012 . . . . .	311,498			
<b>b</b> Excess from 2013 . . . . .	272,846			
<b>c</b> Excess from 2014 . . . . .	307,698			
<b>d</b> Excess from 2015 . . . . .	170,323			
<b>e</b> Excess from 2016 . . . . .	311,790			

**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 foundation is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Tax year				(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					0
<b>b</b> 85% of line 2a . . . . .	0	0	0	0	0
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					0
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					0
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .	0	0	0	0	0
<b>3</b> Complete 3a, b, or c for the alternative test relied upon:					
<b>a</b> "Assets" alternative test—enter:					
<b>(1)</b> Value of all assets . . . . .					0
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . .					0
<b>b</b> "Endowment" alternative test—enter % of minimum investment return shown in Part X, line 6 for each year listed . . . . .					0
<b>c</b> "Support" alternative test—enter:					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					0
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) . . . . .					0
<b>(3)</b> Largest amount of support from an exempt organization . . . . .					0
<b>(4)</b> Gross investment income . . . . .					0

**Part XV Supplementary Information (Complete this part only if the foundation 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).)

**NO MANAGER HAS CONTRIBUTED MORE THAN \$5,000.00**

- 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.

**THE FOUNDATION OWNS NO STOCK**

- 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 e-mail address of the person to whom applications should be addressed:

**MS. GRETCHEN GEITTER, ONE BILLS DRIVE, ORCHARD PARK, NY 14127-2237**

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

**SEE ATTACHMENT**

- c** Any submission deadlines:

**APRIL 29, 2016**

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

**CONTRIBUTIONS ARE GENERALLY RESTRICTED TO TAX EXEMPT NEW YORK ORIENTED PROGRAMS PREFERRED**

**Part XV** **Supplementary Information** (continued)

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

Recipient Name and address (home or business)	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
<p><b>a</b> <i>Paid during the year</i></p> <p>SEE STATEMENT ATTACHED</p>				<p><b>298,110</b></p>
<p><b>Total</b> . . . . . ▶</p>				<p><b>3a</b> <b>298,110</b></p>
<p><b>b</b> <i>Approved for future payment</i></p>				
<p><b>Total</b> . . . . . ▶</p>				<p><b>3b</b></p>





**Schedule B**

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

**Schedule of Contributors**

OMB No 1545-0047

**2016**

▶ 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](http://www.irs.gov/form990).

Name of the organization

Employer identification number

**BUFFALO BILLS FOUNDATION, INC.**

**16-1291395**

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**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 property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, 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. Don't 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 isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization <b>BUFFALO BILLS FOUNDATION, INC.</b>	Employer identification number <b>16-1291395</b>
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**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	<b>BUFFALO BILLS, LLC</b> ----- <b>1 BILLS DRIVE</b> ----- <b>ORCHARD PARK, NY 14127-2237</b> -----	\$ 212,090	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
2	<b>NFL FOUNDATION</b> ----- <b>345 PARK AVENUE</b> ----- <b>NEW YORK, NY 10154</b> -----	\$ 148,416	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
3	<b>TEAMMATES FOR KIDS FOUNDATION</b> ----- <b>1900 WAZEE STREET, SUITE 205</b> ----- <b>DENVER, CO 80202</b> -----	\$ 14,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
4	<b>ZACH BROWN</b> ----- <b>1 BILLS DRIVE</b> ----- <b>ORCHARD PARK, NY 14127-2237</b> -----	\$ 6,025	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
5	<b>MARCELL DAREUS</b> ----- <b>1 BILLS DRIVE</b> ----- <b>ORCHARD PARK, NY 14127-2237</b> -----	\$ 85,052	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
6	<b>ANTHONY DIXON</b> ----- <b>1 BILLS DRIVE</b> ----- <b>ORCHARD PARK, NY 14127-2237</b> -----	\$ 24,185	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization <b>BUFFALO BILLS FOUNDATION, INC.</b>	Employer identification number <b>16-1291395</b>
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**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
7	JONATHAN DOWLING 1 BILLS DRIVE ORCHARD PARK, NY 14127-2237	\$ 6,600	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	JEROME FELTON 1 BILLS DRIVE ORCHARD PARK, NY 14127-2237	\$ 15,474	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	SEANTREL HENDERSON 1 BILLS DRIVE ORCHARD PARK, NY 14127-2237	\$ 24,765	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	JERRY HUGHES 1 BILLS DRIVE ORCHARD PARK, NY 14127-2237	\$ 12,605	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	CARDALE JONES 1 BILLS DRIVE ORCHARD PARK, NY 14127-2237	\$ 5,690	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	DENARIUS MOORE 1 BILLS DRIVE ORCHARD PARK, NY 14127-2237	\$ 6,475	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

<b>Name of organization</b> BUFFALO BILLS FOUNDATION, INC.	<b>Employer identification number</b> 16-1291395
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**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
13	CAMERON THOMAS ----- 1 BILLS DRIVE ----- ORCHARD PARK, NY 14127-2237 -----	\$ 5,307	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	PHILLIP THOMAS ----- 1 BILLS DRIVE ----- ORCHARD PARK, NY 14127-2237 -----	\$ 9,038	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
15	COREY WHITE ----- 1 BILLS DRIVE ----- ORCHARD PARK, NY 14127-2237 -----	\$ 6,025	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

<b>Name of organization</b> BUFFALO BILLS FOUNDATION, INC.	<b>Employer identification number</b> 16-1291395
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**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
-----	----- ----- ----- -----	\$-----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-----	----- ----- ----- -----	\$-----	-----

Name of organization <b>BUFFALO BILLS FOUNDATION, INC.</b>	Employer identification number <b>16-1291395</b>
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**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
-----			
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----			
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----			
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----			
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

BUFFALO BILLS FOUNDATION, INC.  
EIN: 16-1291395  
Form 990-PF Return of Private Foundation  
12/31/16

**Schedule of Taxes**  
**Part I**  
**#18**

Federal Tax		\$31.00
	TOTAL	<u>\$31.00</u>

BUFFALO BILLS FOUNDATION, INC.  
EIN: 16-1291395  
Form 990-PF Return of Private Foundation  
12/31/16

**Schedule of Other Expenses**

**Part I**

**#23(a) – Revenue and Expenses per Books**

Fundraising - 50/50 Raffle Winner Expenses	\$377,776.00
Fundraising - 50/50 Raffle Equipment and Licensing Expenses	\$50,474.00
Other Program Expenses	\$24,974.00
General Supplies	\$1,592.00
Bank Fees	\$1,827.00
Filing Fees	\$100.00
	<hr/>
TOTAL	<u>\$456,743.00</u>

**Schedule of Other Expenses**

**Part I**

**#23(d) – Charitable Purposes**

Other Program Expenses	\$24,974.00
General Supplies	\$1,592.00
Bank Fees	\$1,827.00
Filing Fees	\$100.00
	<hr/>
TOTAL	<u>\$28,493.00</u>

**BUFFALO BILLS FOUNDATION, INC.**  
**FORM 990-PF RETURN OF PRIVATE FOUNDATION**

FEIN #16-1291395

**2016 CONTRIBUTIONS PAID**

**PART I, 25**

ORGANIZATION NAME	ADDRESS	CITY	STATE	ZIP	TAX ID	PROGRAM DESCRIPTION	AMOUNT	RESTRICTED STATUS
Habitat for Humanity - Buffalo	1675 South Park	Buffalo	NY	14220	22-2746890	Support Buffalo Bills Habitat Build	\$ 15,000	NO
Algonquin Sports For Kids	403 Main St., Suite 200	Buffalo	NY	14203	26-0682893	Youth Leaders program for alumni of Soccer for Succes	\$ 1,000	NO
Athletes in Action	54 Crownview Terrace	Hamburg	NY	14075	95-6006173	Support Bills Night Out and Call To Courage Breakfast events	\$ 5,000	NO
Be-A-Friend Program, Inc., Big Brothers Big Sisters of Erie County	85 River Rock Drive, Suite 107	Buffalo	NY	14207	16-1106399	Support monthly Pathways to Healthy Living agency sponsored activities which promote healthy life-style choices	\$ 2,000	NO
Boys & Girls Club of East Aurora	24 Paine Street	East Aurora	NY	14052	16-0755732	Fund 8 week flag football league for 145 members, Monday Night Flag Football league for 80 teens, and a Punt, Pass, and Kick competition among all the clubs in Erie, Niagara, Chautauqua, and Monroe counties	\$ 5,000	NO
Boys & Girls Club of Orchard Park	PO Box 181	Orchard Park	NY	14127	16-1094894	Support Triple Play, Fuel Up to Play 60, and Play 60 initiatives	\$ 3,000	NO
Boys & Girls Clubs of Buffalo, Inc	282 Babcock Street	Buffalo	NY	14210	16-0849516	Health 360 health and wellness program	\$ 2,500	NO
Boys Run On, Inc	4407 S Buffalo St	Orchard Park	NY	14127	47-4113549	Support boys afterschool health, wellness and mentoring program for grades 3 - 5	\$ 2,500	NO
Buffalo City Swim Racers	651 Delaware Ave	Buffalo	NY	14202	46-0526467	Help provide free, year-round swim lessons to kids in the City of Buffalo during at-risk times	\$ 2,500	NO
Buffalo Fine Arts Academy (Albright-Knox Art Gallery)	1285 Elmwood Avenue	Buffalo	NY	14222	16-6001555	Support Art'scool, which provides free admission and subsidized bussing fees for K-12 students throughout the region	\$ 2,500	NO
Bunkers in Baghdad, Inc.	665 Main Street, Suite 400	Buffalo	NY	14203	26-2583317	Continue to support troops around the world by shipping them golf equipment for recreational use and stress relief, and to Wounded Warriors and VA programs for use in recreational and rehabilitative therapy.	\$ 2,500	NO
Child & Adolescent Treatment Services	301 Cayuga Road, Suite 200	Cheektowaga	NY	14225	16-0839225	Support the physical activity blocks for students in grades 1 - 3 and a field trip to support health eating choices	\$ 4,475	NO
Classroom Champions, Inc	4219 Pine Needle Lane	Jacksonville	FL	32210	451256761	Support the Classroom Champions Buffalo character and leadership educational program	\$ 10,000	NO
Cradle Beach	8038 Old Lakeshore Road	Angola	NY	14006	16-0743025	Support 10-day residential summer camp experience for children with disadvantages and children with disabilities	\$ 2,500	NO
Dairy Council Health Foundation, Inc	100 Elwood Davis, Suite 104	Syracuse	NY	13212	46-1313846	Support <del>Puer Up to Play 60</del> by providing funding to expand the FUTP 60 program at a school in the Frontier Central School District	\$ 5,000	NO

First Tee of WNY	742 Delaware Avenue	Buffalo	NY	14209	16-1490270	Support Year 3 of inner-city program development. Funding will add a new BGCB site in the First Tee DRIVE Afterschool program, serve ad	\$ 5,000	NO
Girls on the Run of Buffalo	PO Box 1271	Buffalo	NY	14213	27-2193377	Girls on the Run of Buffalo Scholarship Fund	\$ 3,000	NO
Hunter's Hope Foundation	P O. Box 643	Orchard Park	NY	14127	16-1552315	Support 2016 Krabbe Newborn Screening Task Force In-Person Meeting	\$ 10,000	NO
Ilio DiPaolo Scholarship Fund	3785 South Park Ave	Blasdell	NY	14219	16-1482049	Support Scholarship Fund and other community initiatives	\$ 4,000	NO
Independent Health Foundation	511 Farber Lakes Drive	Buffalo	NY	14221	16-1417199	Support Fitness for Kids Challenge, a free, community-wide initiative for children in grades 2 - 5 in WNY	\$ 6,000	NO
Lackawanna Life and Wellness Center (Mt Olive Missionary Baptist Church)	66 Wasson Av.	Lackawanna	NY	14218	161383945	Support the building of the Lackawanna Life and Wellness Center which will provide safe opportunities for youth to participate in physical, recreational, health, and wellness programs.	\$ 2,500	NO
Make-A-Wish WNY	4600 Main Street, Suite 101	Snyder	NY	14226	11-2645641	Support the Wish Sponsorship Program	\$ 2,500	NO
Mathewson McCarthy Baseball	192 Richfield Road	Williamsville	NY	14221	22-3066253	Purchase two or more pitching machines to replace aging machines	\$ 2,000	NO
Northtowns Boys & Girls Clubs	54 Riverdale Ave	Buffalo	NY	14207	16-0755733	Support the Challenger program, an inclusive program for youth with disabilities	\$ 2,500	NO
Orchard Park Recreation Department	200 North Lake Drive	Orchard Park	NY	14127	16-6002332	Support Flag Football & Flag Football Camp	\$ 1,517	NO
Orchard Park Veterans Memorial Park Committee - VFW/American Legion	PO Box 796	Orchard Park	NY	14218	16-0736111	Support the Orchard Park Veterans' Memorial Park (VMP) Project. Funds requested would create a stone in honor of Sergeant David Lawrence Roustum to be placed at the OPHS Memorial Garden, and support the monument to the fallen soldier statue at VMP which will include Sgt Roustum	\$ 4,849	NO
PUNT Foundation	3859 N Buffalo Road	Orchard Park	NY	14127	20-8533395	Support "Helping Hands" program which strives to alleviate some of the financial burden associated with the catastrophic effects of a pediatric cancer diagnosis	\$ 5,000	NO
Rural Outreach Center (ROC)	730 Olean Road	East Aurora	NY	14052	46-0817544	Childhood Support Program for children living in poverty in the southern region of Erie county and beyond. Grant would partially fund snack packs, back to school backpacks, back to school party, crisis services, basic healthcare, transportation, an other ongoing support	\$ 1,000	NO
Salvation Army	960 Main Street	Buffalo	NY	14202	13-5562351	Support 9-week Summer Day Camp for youth ages 5 - 12	\$ 5,000	NO
Say Yes Buffalo Scholarship, Inc	712 Main Street	Buffalo	NY	14202	46-2867677	Support Say Yes Buffalo Scholarship program	\$ 5,000	NO

Seneca-Babcock Community Association, Inc	1168 Seneca Street		Buffalo	NY	14210	23-7367697	Support Flag Football program which will include 11 teams of 20 kids	\$ 5,000	NO
Shea's Performing Arts Center	PO Box 1130		Buffalo	NY	14205	16-1158412	Support Shea's Educational Outreach through the On School Time Experience and Broadway Master Class Experience	\$ 2,500	NO
State University of New York at Fredonia/Fredonia College Foundation	Fredonia College Foundation, 272 Central Ave		Fredonia	NY	14063	16-6054528	Fund one scholarship for the Keeper of the Dream Scholarship and Leadership Program	\$ 4,000	NO
Town of Hamburg, NY Department of Youth, Recreation, & Senior Services	4540 Southwestern Boulevard		Hamburg	NY	14075	166002270	Support various Town of Hamburg community football initiatives	\$ 5,000	NO
Tre & Associates Inc. DBA Willie Hutch Jones Educational & Sports Programs	411 Olympic Ave Suite #115		Buffalo	NY	14215	16-1558569	Support summer Willie Hutch Jones Educational & Sports Programs	\$ 1,000	NO
UBMD Orthopaedic and Sports Medicine	5500 Main Street		Williamsville	NY	14221	16-1406947	Together with matching NFL grant, fund Athletic Trainer Southern Tier outreach program	\$ 10,000	NO
United Way of Buffalo & Erie County	742 Delaware Avenue		Buffalo	NY	14209	16-0743969	Support Play 60 Coordinator position whose responsibilities would include coordination of Play 60 activities, kick-off events in schools, material distribution, program training and collection & reporting of data	\$ 25,000	NO
Valley Community Association Inc	93 Leddy Street		Buffalo	NY	14210	16-0964724	Support "Kids On The Move" after school fitness program	\$ 5,000	NO
Western New York Amateur Football Alliance, DBA	3772 Dartmouth Street		Hamburg	NY	14075	16-1598366	Fund various youth football-related programs	\$ 30,000	NO
Youth Advantage/The Wellness Institute of Greater Buffalo & WNY	65 Niagara Square, Room 607		Buffalo	NY	14202	16-1360887	Support Youth Advantage 6-week NFL Flag Football in South Buffalo with up to 160 players	\$ 2,470	NO
United Way of Buffalo & Erie County	742 Delaware Avenue		Buffalo	NY	14209	16-0743969	Hometown Huddle	\$5,000	YES
Independent Health Foundation	511 Farber Lakes Drive		Buffalo	NY	14221	16-1417199	Play 60 PE Equipment Grant	\$10,000	YES
Western New York Amateur Football Alliance	3772 Dartmouth Street		Hamburg	NY	14221	16-1598366	Youth Football Team Program Grant - Punt Pass & Kick	\$10,000	YES
Western New York Amateur Football Alliance	3772 Dartmouth Street		Hamburg	NY	14075	16-1598366	Play 60 designated NFL Flag Championships	\$8,000	YES
Western New York Amateur Football Alliance	3772 Dartmouth Street		Hamburg	NY	14075	16-1598366	Club Matching Youth Football Grant	\$20,000	YES
UBMD Orthopaedic and Sports Medicine	4225 Genesee Street		Cheektowaga	NY	14225	16-1406947	Club Matching Athletic Trainers Grant	\$21,500	YES
ECMC Foundation	462 Grider Street, Suite G-1		Buffalo	NY	14215	22-3283946	Billieve Auction proceeds	\$ 1,912 61	NO
American Cancer Society	101 John James Audubon Pkwy		Amherst	NY	14228	13-1788491	Billieve Auction proceeds	\$ 1,912 61	NO
Buffalo & Erie County Naval & Military Park	One Naval Park Cove		Buffalo	NY	14202	16-1133535	Salute to Service Proceeds	\$ 2,236 78	NO
Veteran's One-Stop Center of WNY	1280 Main Street, Suite 204		Buffalo	NY	14209	45-5098692	Salute to Service Proceeds	\$ 2,236 78	NO
							TOTAL	\$ 298,110	

BUFFALO BILLS FOUNDATION, INC.  
EIN: 16-1291395  
Form 990-PF Return of Private Foundation  
12/31/16

**Description of Activities Previously Not Reported to the IRS**

**Part VII-A**

**#2**

Beginning in 2016 the Buffalo Bills Foundation was responsible for the production of a 50/50 raffle game of chance at certain sporting events throughout the year. 50% of all net proceeds were awarded to the holder of the winning ticket of each raffle drawing while the remaining amount was contributed to the Foundation. In addition to amounts paid to the winners, the Buffalo Bills Foundation also incurred expenses related to facilitating the raffle games.

BUFFALO BILLS FOUNDATION, INC.  
 EIN: 16-1291395  
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 12/31/16

**List of Officers, Directors, Trustees, Foundation Manager and Their Compensation**

**Part VIII**

**#1**

Name and Address	Title	Hours Per Week Devoted to Position	Compensation	Contributions to Employee Benefit Plan	Expense Account / Other Allowances
Gretchen Geitter One Bills Drive Orchard Park, NY 14127	President & Director	1.0	None	None	-0-
Michelle Roberts One Bills Drive Orchard Park, NY 14127	Vice President	1.0	None	None	-0-
Gregg Brandon One Bills Drive Orchard Park, NY 14127	Secretary & Director	1 0	None	None	-0-
Joshua Dziurlikowski One Bills Drive Orchard Park, NY 14127	Treasurer	1.0	None	None	-0-
Russell Brandon One Bills Drive Orchard Park, NY 14127	Director	1.0	None	None	-0-
David Wheat One Bills Drive Orchard Park, NY 14127	Director	1.0	None	None	-0-
Bruce Popko One Bills Drive Orchard Park, NY 14127	Director	1 0	None	None	-0-
Christopher Jenkins One Bills Drive Orchard Park, NY 14127	Director	1.0	None	None	-0-

William Kresse  
One Bills Drive  
Orchard Park, NY  
14127

Director 1.0 None None -0-

Danielle Shanbrow  
One Bills Drive  
Orchard Park, NY  
14127

Director 1.0 None None -0-

Thomasina Stenhouse  
One Bills Drive  
Orchard Park, NY  
14127

Director 1.0 None None -0-