Form **990-PF**

FLORIDA, HURRICANE IRMA Return of Private Foundation

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

1612

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.

	For calendar year 2016 or tax year beginning , and ending									
	Name of foundation					A Employer identification number				
	_ <u>C</u>	ΑD	E MUSEUM FOUNDATION	N, IN	С			20-1884134		
			and street (or PO box number if mail is not deliver	red to street	address)	Ro	om/suite	B Telephone number	0.4	
			S MAIN ST					352-371-80		
			own, state or province, country, and ZIP o NESVILLE, FL 32601					C If exemption application is pe	ending, check here	
			call that apply: Initial return	1-194	Initial return of a fo	rmer public char	rity	D 1. Foreign organizations	check here	
_		EZ	Final return		Amended return	mer public chai	···y	1. Toroigh organizations	, check liefe	
12	į	<u> </u>	Address chang	je	Name change	,		Foreign organizations met check here and attach cor	eting the 85% test,	
77	H C	hecl			empt private foundation	16		E If private foundation stat	•	
01] se	ection 4947(a)(1) nonexempt charitable tru	ıst 🔲	Other taxable private founda	tion 1	<i></i>	under section 507(b)(1)		
_ 82	I Fa	اَلِّ سِا	arket value of all assets at end of year J		ng method: Cash	X Accrual		F If the foundation is in a 6	60-month termination	
7			Part II, col. (c), line 16)		her (specify)			under section 507(b)(1)	(B), check here \blacktriangleright X	
9		\$3	11,685,180. (Pa	art I, colui	1		·		(A)	
AR I	Pa	Iπ∢I ⊕∂	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) necessarily equal the amounts in column (a))) may not	(a) Revenue and expenses per books	(b) Net inves		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)	
¥∀	2	1	Contributions, gifts, grants, etc., received	1	2,571,908.					
LA.		2	Check In the foundation is not required to atta	ich Sch B						
	X	3	Interest on savings and temporary cash investments		50,375.		<u>,375.</u>		STATEMENT 1	
7	•	4	Dividends and interest from securities		5,888.		<u>,888.</u>		STATEMENT 2	
91			Gross rents	100.	1,100.	<u>_</u>	,100.	1,100.	STATEMENT 3	
2					-32,848.					
W	υe		Net gain or (loss) from sale of assets not on line Gross sales price for all 974, 8 assets on line 6a		32,040.					
~	Revenue		Capital gain net income (from Part IV, line 2)				0.			
ð	ä	8	Net short-term capital gain					0.		
		9	Income modifications							
g		10a	Gross sales less returns and allowances							
\$	1		Less Cost of goods sold				·			
کما			Gross profit or (loss)		ECA 001	120	072	ECA 001	CONTRACTOR A	
473			Other income Total Add lines 1 through 11		564,801. 3,161,224.		<u>,073.</u> ,436.	622,164.	STATEMENT 4	
24	5	13		···········	12,585.	4 33	629.	1,771.	10,814.	
80	•	14	Other employee salaries and wages		35,424.		0.	14,318.	21,107.	
	- 1	15	Pension plans, employee benefits							
Œ‡	ses	16a	Legal fees							
\mathbb{Z}_{δ}	Expense		Accounting fees STM		23,577.	5	<u>,894.</u>	5,894.	17,683.	
>	Ĕ		Other professional fees STM	r 6	237,698.		0.	0.	237,698.	
<i>></i>	and Administrative		Interest RECEIVED	n 7 1	71,186.	3	<u>,559.</u>	12,167.	59,019.	
\$	stra	18		<u>r</u> 7	8,991.		48.	1,231.	7,760.	
Z	nin	19 20	Depreciation and depletion Occupancy FEB 1 2 2018	SO	19,343. 20,710.	1	<u>0.</u> ,036.	0. 3,5 4 0.	17,170.	
#	Adn	21	Occupancy FEB 1 2 2018 Travel, conferences, and meetings	0-52	9,688.		0.00.	3,340.	9,688.	
مک	nd,	22	Devoting and authorising	[]	3,000.				3,000.	
E	g a	23	Other expenses OGDEN STEM	r 8	125,250.		850.	44,907.	80,341.	
ુ	Operating	24	Total operating and administrative							
3	per		expenses. Add lines 13 through 23		564,452.	12	,016.	83,828.	461,280.	
S	J	25	Contributions, gifts, grants paid		2,546,218.				2,546,218.	
		26	Total expenses and disbursements.		2 110 650	4.0	01.	02.000	2 005 400	
\$		07	Add lines 24 and 25		3,110,670.	12	,016.	83,828.	3,007,498.	
9		l	Subtract line 26 from line 12:		50,554.					
ilk. Olloper ets Isue & ITR attached W/ IN 60 mos. Det. 599018			Excess of revenue over expenses and disburser Net investment income (if negative, enter -0		30,334.	481	,420.			
嵳		1	Adjusted net income (if negative, enter -0-)	- /			,	538,336.		

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

9,725,149.

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Part IV Capital Gains a	nd Losses for Tax on In	vestment	Income					
(a) List and describ 2-story brick ware	e the kınd(s) of property sold (e.g. house; or common stock, 200 shs	., real estate, s. MLC Co.)		(b) 	fow acquired - Purchase - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a REALIZED LOSS O	EALIZED LOSS ON INVESTMENT V			V.	ARIOUS	VARIOUS		
b						\bot		
<u>c</u>				<u> </u>				
<u>d</u>	 			_		-		
e	to Danisa to a allowed	(١		—	(I.) Cours on (In	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus e	st or other basis expense of sale			((h) Gain or (lo (e) plus (f) mini	us (g)
a 974,861.			1,007,70	19.				-32,848.
c								
d								
e								
Complete only for assets showing	gain in column (h) and owned by	the foundation	on 12/31/69				ains (Col (h) g	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any				t), but not less t Losses (from co	
a								-32,848.
b								
С								
d								
е								
2 Capital gain net income or (net capi	tal loss) $\begin{cases} If gain, also enter \\ If (loss), enter -0 \end{cases}$			}	2			-32,848.
3 Net short-term capital gain or (loss)								
If gain, also enter in Part I, line 8, co		- (-)-]				
If (loss), enter -0- in Part I, line 8	1. 0. 1: 4040(-) (D	· ·	لب	3			<u> </u>
	der Section 4940(e) for					inco	me	
(For optional use by domestic private for	oundations subject to the section 4	4940(a) tax on	net investment in	ncome	9.)			
If section 4940(d)(2) applies, leave this	s part blank.							
Was the foundation liable for the section	in 4040 tay on the distributable am	nount of any w	ar in the base see	riodo				Yes X No
If "Yes," the foundation does not qualify				i iou ·				163 NO
Enter the appropriate amount in each action in the control of				ntries				
(a) Base period years	(b)			(c)			Die	(d) tribution ratio
Calendar year (or tax year beginning			Net value of no				(col. (b)	divided by col. (c))
2015		9,373.	······································		,998,5		·	.097903
2014		9,053.			,617,1			.058580
2013		2,347.		4	,436,7	20.		.099701
2012		$\frac{7,177}{2,070}$,061,5			.240785
2011		3,970.			<u>,883,7</u>	09.	<u> </u>	.119280
2. Total of line 1. column (d)								.616249
2 Total of line 1, column (d)3 Average distribution ratio for the 5-	waar hasa narind - divida tha total i	on line 2 hy 5	or by the number	r of vo	are		2	.010243
the foundation has been in existence		on mic 2 by 5,	or by the number	oi ye	ais		3	.123250
the foundation has been in existence	o ir ieso triair o years							.123230
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5				4	11,339,990.			
5 Multiply line 4 by line 3			5	1,397,654.				
6 Enter 1% of net investment income	(1% of Part I line 27h)						6	4,814.
	(or arty into 210)							
7 Add lines 5 and 6							7	1,402,468.
8 Enter qualifying distributions from I	•	. 4h	aloto that == :+ :		D/ tour=====		8	3,007,498.
If line 8 is equal to or greater than li See the Part VI instructions.	me 7, check the dox in Part VI, line	: 10, and comp	nete mat part usir	ıg a 1	% lax rate.			

	1 990-PF (2016) CADE MUSEUM FOUNDATION, INC 20-1884			Page 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	CUO	<u> </u>
1a	Exempt operating foundations described in section 4940(d)(2), check here \[\bigcup \bigcup \bigcup \alpha \rightarrow \notation In the first of the control of the			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			^
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%			0.
	of Part I, line 27b			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u>0.</u>
3	Add lines 1 and 2			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			0.
6	Credits/Payments:			
а	2016 estimated tax payments and 2015 overpayment credited to 2016			
þ	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
đ	Backup withholding erroneously withheld 6d			
7	Total credits and payments. Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11_	Enter the amount of line 10 to be: Credited to 2017 estimated tax			
Pa	art VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b		X
	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	1)	
c	Did the foundation file Form 1120-POL for this year?	10		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
_	(1) On the foundation. ► \$ 0 . (2) On foundation managers ► \$ 0 .			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
•	managers. ▶\$ 0.			ŧ
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
_	If "Yes," attach a detailed description of the activities.	<u> </u>		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
Ŭ	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	ļ	х
4 2	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	of "Yes," has it filed a tax return on Form 990-T for this year?	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	ļ——	X
Ŭ	If "Yes," attach the statement required by General Instruction T	<u> </u>		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			,
	By language in the governing instrument, or	ļ		'
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	х	ļ
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	X	
′	bid the loundation have at least \$3,000 in assets at any time during the year in Tes, Complete Fart II, Col. (c), and Fart Av	\ <u>'</u>	A	
0.	Enter the states to which the foundation reports or with which it is registered (see instructions)	1	l	į
oa	FL			
L				}
0	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	0.		[
	of each state as required by General Instruction G? If "No," attach explanation	8b	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 calendar		х	1 1
10	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STMT 12	9	X	
ıU		10 orm QQ		(2016)
	Tr.	, (II) 3	J 1	(2010)

Pa	art VII-A Statements Regarding Activities (continued)			
	•		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12	1	Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► WWW.CADEMUSEUM.ORG			L
1.4	The books are in care of ► JAMES MOORE & CO., P.L. Telephone no. ► 352-37	8-1	331	
17	Located at ▶ 5931 NW 1ST PLACE, GAINESVILLE, FL ZIP+4 ▶32			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	007	_	
10	and enter the amount of tax-exempt interest received or accrued during the year	, N	/A	_
16			Yes	No
10	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,	16	163	X
	securities, or other financial account in a foreign country?	10		
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	<u> </u>		
D	foreign country ► art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	L		L
٠٠٠		Γ'	Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		165	140
1 a	During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	Ì		
		Ì	1	}
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?		}	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1		1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	Ì	1	
	for the benefit or use of a disqualified person)?			į
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		1	,
	if the foundation agreed to make a grant to or to employ the official for a period after	ļ		
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		1	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	ļ	X
	Organizations relying on a current notice regarding disaster assistance check here			ı
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	1	[
	before the first day of the tax year beginning in 2016?	1c	<u> </u>	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1	Ì	1
	defined in section 4942(j)(3) or 4942(j)(5)):			ł
a	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2016?			
	If "Yes," list the years	ĺ		
- þ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	1	1	
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach		ļ	ļ
	statement - see instructions.) N/A	2b	ļ	ļ
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	}	1	
)			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		1	Ì
	during the year?			ļ
b	olf "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after			Ì
	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		1	
	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) N/A	3b	1	<u> </u>
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	X
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	<u> </u>	X
	ra	OO	n DE	(2016)

	INC		<u> 20-18841</u>	34	Page 6
Part VII-B Statements Regarding Activities for Which F	Form 4720 May Be F	Required (continu	ued)		
5a During the year did the foundation pay or incur any amount to:					}
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	☐ Ye	s X No	- 1	}
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire		[
any voter registration drive?		Ye	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	7	Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		1		l
4945(d)(4)(A)? (see instructions)		Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t	or		1	}
the prevention of cruelty to children or animals?		Ye	es X No		1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations			1
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b	}
Organizations relying on a current notice regarding disaster assistance check h	•	•	▶□		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ned		1	ļ
expenditure responsibility for the grant?		. —	s No		ļ
If "Yes," attach the statement required by Regulations section 53 494					Į
6a Did the foundation, during the year, receive any funds, directly or indirectly, to					Į
a personal benefit contract?	, p	Ye	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		1	6ь	X
If "Yes" to 6b, file Form 8870	ordinar portone doma doc		-		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	□ v _é	es X No	1	İ
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	† –
Part VIII Information About Officers, Directors, Trust		nagers Highly		<u></u>	
Paid Employees, and Contractors	, ·		,		
List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Ex	pense
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account	t, other ances
		1			
SEE STATEMENT 13		12,585.	l o.		0.
JUL DITTELLIA 20		1 24/3031			
				 	
		+	1	1	
		,	ļ	ļ	
		 		 	
		ļ	ŀ	ţ	
		ł	ŀ	ļ	
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."	L	l	
	(b) Title, and average	1	(d) Contributions to employee benefit plans and deferred	(e) Ex	pense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	accoun	it, other ances
NONE	devoted to position	 	compensation	anom	211000
иони				}	
			 	 	
	{		1	1	
	 	 		 	
	1	1	Į.	1	
	 	 	 	 	
	1		l		
		 	 	 	
	-		1		
Fada-Loumber of other ampleyees paid over \$50,000	1	<u> </u>		1	0
Total number of other employees paid over \$50,000				990-PF	
			rorm	・ショウ・ドド	(2010)

Total. Add lines 1 through 3

0.

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndation	is, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	\Box	
a	Average monthly fair market value of securities	1a	123,137.
	Average of monthly cash balances	1b	1,156,225.
	Fair market value of all other assets	1c	10,233,318.
	Total (add lines 1a, b, and c)	10	11,512,680.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	11,512,680.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	172,690.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	11,339,990.
6	Minimum investment return. Enter 5% of line 5	6	567,000.
	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here X and do not complete this part.)	nd certai	
1	Minimum investment return from Part X, line 6	1	
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	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
P	art XII Qualifying Distributions (see instructions)	r7	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	3,007,498.
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	3,007,498.
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	4,814.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,002,684.
	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

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Part XIII Undistributed Income (s	ee instructions)	N/A		
	(a)	(b)	(c)	(d)
į	Corpus	Years prior to 2015	2015	2016
1 Distributable amount for 2016 from Part XI,				
line 7				
2 Undistributed income, if any, as of the end of 2016		-		
a Enter amount for 2015 only				
b Total for prior years:				
,				
3 Excess distributions carryover, if any, to 2016:				
a From 2011				
b From 2012				
c From 2013				
d From 2014				
e From 2015				
f Total of lines 3a through e		<u> </u>	<u> </u>	<u></u>
4 Qualifying distributions for 2016 from				
Part XII, line 4: ► \$				
a Applied to 2015, but not more than line 2a				
b Applied to undistributed income of prior				
years (Election required - see instructions)				
c Treated as distributions out of corpus				1
(Election required - see instructions)	·			
d Applied to 2016 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount				
must be shown in column (a))				1
6 Enter the net total of each column as				
indicated below [.]				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5		·	ļ	
b Prior years' undistributed income. Subtract				(
line 4b from line 2b		 	ļ	
c Enter the amount of prior years' undistributed income for which a notice of				
deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed		 	 	
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		 	 	
e Undistributed income for 2015. Subtract line				
4a from line 2a. Taxable amount - see instr.		 	 	
f Undistributed income for 2016. Subtract		E		
lines 4d and 5 from line 1. This amount must				1
be distributed in 2017	<u></u>			ļ <u></u>
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions) 8 Excess distributions carryover from 2011		 		
not applied on line 5 or line 7				
9 Excess distributions carryover to 2017.		· · · · · · · · · · · · · · · · · · ·		<u> </u>
Subtract lines 7 and 8 from line 6a				}
10 Analysis of line 9:		 	1	
a Excess from 2012				
b Excess from 2013				
c Excess from 2014				
d Excess from 2015				
e Excess from 2016				

	990-PF (2016) CADE MU	SEUM FOUNDA'		A question (1)	20-18	84134 Page 10	
ч—	If the foundation has received a ruling o			A, question 3)			
ıa	foundation, and the ruling is effective fo			_			
h	Check box to indicate whether the found	•	•	n contino	4942(j)(3) or 49	42(1)(5)	
	Enter the lesser of the adjusted net	Tax year	y toutidadon described if	Prior 3 years	4342())(3) 01143	42()(3) /	
2 8	· · · · · · · · · · · · · · · · · · ·	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total	
	income from Part I or the minimum	(4) 20 10	(8) 2010	(0) 2011	(8)2010	(0,1000)	
	investment return from Part X for	E20 226	240 027	200 056	221 026	1 200 055	
	each year listed	538,336.	249,927.			1,290,955.	
	85% of line 2a	457,586.	212,438.	238,728.	188,561.	1,097,312.	
С	Qualifying distributions from Part XII,	2 007 400	400 272	220 052	442 247	4 200 271	
	line 4 for each year listed	3,007,498.	489,373.	329,053.	442,347.	4,268,271.	
đ	Amounts included in line 2c not						
	used directly for active conduct of	1		/		•	
	exempt activities	0.	0.		0.	0.	
е	Qualifying distributions made directly						
	for active conduct of exempt activities.	2 227 422	400 252	200 252	440 045	4 060 051	
2	Subtract line 2d from line 2c Complete 3a, b, or c for the	3,007,498.	489,373.	329,053.	442,347.	4,268,271.	
3	alternative test relied upon:						
a	"Assets" alternative test - enter:						
	(1) Value of all assets					0.	
	(2) Value of assets qualifying						
	under section 4942(j)(3)(B)(i)					0.	
D	"Endowment" alternative test - enter 2/3 of minimum investment return	1		'			
	shown in Part X, line 6 for each year		1 2 2 2 2 2		4 044		
	listed	378,000.	<u>1/66,618.</u>	187,237.	147,891.	879,746.	
C	"Support" alternative test - enter:						
	(1) Total support other than gross						
	investment income (interest, dividends, rents, payments on		•				
	securities loans (section						
	512(a)(5)), or royalties)					0.	
	(2) Support from general public and 5 or more exempt		İ				
	organizations as provided in						
	section 4942(j)(3)(B)(iii)	 				0.	
	(3) Largest amount of support from						
	an exempt organization	/-				0.	
□ De	(4) Gross investment income	rmation /Complex	to this next enha	if the foundation	had \$5,000 as me	0.	
Pa	rt XV Supplementary Info			ir the foundation	nad จอ,000 or me	ore in assets	
		 	<u> </u>				
1	Information Regarding Foundation	•					
- a	List any managers of the foundation wh year (but only if they have contributed in			ributions received by the	foundation before the clo	se of any tax	
O TO	• • •	ποτο (παιτ ψο,000). (Occ 30	SERIOR 507 (d)(2).)				
	E STATEMENT 14	400/				. t	
D	List any managers of the foundation who other entity) of which the foundation ha			or an equally large portio	n of the ownership of a p	artnership or	
NO	• •		=				
			Catalan bir ata D				
2	Information Regarding Contribut						
	Check here X 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.						
d	a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:						
b	The form in which applications should b	pe submitted and informat	ion and materials they st	nould include:			
	Any submission deadlines:			·			
d	d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:						

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		led by section 512, 513, or 514	(e)
	(a)	(b)	(c)	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
a CADE PRIZE COMPETITION					27,863.
b MUSEUM ACITIVITES-CADE					27,003.
c LAB CLASSES					43,949.
e					
1				-	
g Fees and contracts from government agencies			- - 		
O Manchauchia di an and anno anno ata					
2 Membership dues and assessments 3 Interest on savings and temporary cash			_		
investments			14	50,375.	
4 Dividends and interest from securities			14	5,888.	
5 Net rental income or (loss) from real estate:			-	3,000.	
a Debt-financed property					1,100.
b Not debt-financed property		······································			1,100.
6 Net rental income or (loss) from personal	 		-		
property			1 1		
7 Other investment income			15	436,073.	
8 Gain or (loss) from sales of assets other			1 - 1	1307073.	
than inventory			18	-32,848.	
9 Net income or (loss) from special events			+	327010.	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a OPERATING REVENUE	1				56,916.
b				·	
С					
d			\neg		
e	-				
12 Subtotal. Add columns (b), (d), and (e)			5.	459,488.	129,828.
13 Total Add line 12, columns (b), (d), and (e)				13	
(See worksheet in line 13 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).							
1A	IN 2010, THE CADE MUSEUM FOUNDATION LAUNCHED AN ANNUAL COMPETITION							
	RECOGNIZING AND ENCOURAGING FLORIDA INNOVATORS. THE GOAL OF THE							
	COMPETITION IS TO STRENGTHEN AND DEVELOP THE LONG-STANDING CULTURE O							
	INNOVATION IN GAINESVILLE AND THROUGHOUT FLORIDA AND TO HARNESS							
	THE TREMENDOUS JOB-CREATING POTENTIAL OF THE NUMEROUS IDEAS SPRINGING							
	FORTH FROM THE REGION EVERY DAY. THE FOUNDATION CONTINUED WITH THIS							
	COMPETITION IN 2016 IN CONJUCTION WITH A RELATED ORGANIZATION, CADE							
	CREATIVITY LABS, INC.							
1B	THE CADE MUSEUM FOUNDATION OFFERS A VARIETY OF LAB CLASSES FOR ALL							
	AGES. LABS AND STUDIOS PROVIDE HANDS-ON EXPERIMENTS AND INTERACTIVE							
	COLLABORATIONS.							

Form 990-PF (2				ON , INC and Transactions a	and Relations	20-188 hips With Noncha		age 13
1 Did the or			of the followin	g with any other organization	on described in sect	ıon 501(c) of	Yes	No
the Code	(other than section 501(c)	(3) organizations) or	r ın section 52	7, relating to political organ	uzations?			
	from the reporting founda	ition to a noncharital	ble exempt org	ganization of:				
(1) Cash							1a(1)	X
(2) Other							1a(2)	X
b Other tran	isactions: s of assets to a noncharital	nia avamat arganizat	100				1b(1)	x
• •	hases of assets from a noi						1b(2)	$\frac{x}{x}$
• •	al of facilities, equipment,		gameation				1b(3)	X
` '	bursement arrangements					<i>.</i>	1b(4)	X
(5) Loan	s or loan guarantees	•••			•••	,, ,,,,	1b(5)	X
(6) Perfo	ormance of services or me	mbership or fundrais	sing solicitatio	ns			1b(6)	X
-	f facilities, equipment, ma	•		• •			1c	X
or service		oundation. If the four	ndation receive	dule. Column (b) should alved less than fair market valued				
(a) Line no	(b) Amount involved			exempt organization	(d) Description	n of transfers, transactions, and	sharing arrangen	nents
****		(0,000	N/A		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
								
					 			
			· · · · · · · · · · · · · · · · · · ·					
					+			
		•						
			·					
								
								
in section	ndation directly or indirect 501(c) of the Code (other omplete the following schi	than section 501(c)	•	or more tax-exempt organi ion 527?	izations described		Yes [X No
	(a) Name of org	anization		(b) Type of organization		(c) Description of relations	hip	
<u></u>	N/A							
					 			
								
								
Sign Here		nplete Declaration of pr		g accompanying schedules and n taxpayer) is based on all inform		r has any knowledge ret	y the IRS discus urn with the prep own below (see ii X Yes	arer
	Print/Type preparer's na		Preparer's s	··	Date	Check If PTIN		_
Paid	CAROL A. V	ILLEMAIRE	CAROL	A. VILLEMAI	01/24/18	self- employed	000550	7
Preparer	Firm's name ► JAM	ES MOORE	& CO.,	P.L.	- ,,-1	Firm's EIN ► 59 – 3		
Use Only				····				
	Firm's address ► 59						TO 400	4
	GA	INESVILLE	;, FL 3	2607-2063		Phone no. 352-3	<u>78 – 133</u> orm 990-Pl	
						ORIGINI	A L	(2016)

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

2016

CA	DE MUSEUM FOUNDATION, INC	20-1884134						
Organization type (check o								
Filers of:	ilers 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	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
General Rule X For an organization	(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule of the General	g \$5,000 or more (in money or						
Special Rules								
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount line 1 Complete Parts I and II	or 16b, and that received from						
year, total contribu	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.								
but it must answer "No" on	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (F 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-EZ or on its 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

CADE MUSEUM FOUNDATION, INC

20-1884134

CADE	MUSEUM FOUNDATION, INC	1 20	-1884134
Part I	Contributors (See instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MARY CADE 529 NW 58TH ST GAINESVILLE, FL 32607	\$172,500.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ALACHUA COUNTY 12 SE 1ST PLACE GAINESVILLE, FL 32601	\$	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
3	COMMUNITY FOUNDATION OF NORTH CENTRAL FLORIDA, INC. 5214 SW 91ST DRIVE GAINESVILLE, FL 32608	\$ <u>1,250,000</u> .	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
4	JEFFREY FITZSIMMONS 2446 NW 13TH AVENUE GAINESVILLE, FL 32605	\$\$	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
5	JEFF LYONS 548 SW 131ST STREET NEWBERRY, FL 32669	\$ 25,000.	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
6	PETER MAREN 8401 SW 42ND AVE GAINESVILLE, FL 32608	\$ 50,000.	Person X Payroll

Name of organization

Employer identification number

CADE MUSEUM FOUNDATION, INC

20-1884134

(a) No.	Contributors (See instructions). Use duplicate copies of Part I (b) Name, address, and ZIP + 4	f additional space is needed (c) Total contributions	(d)
No.		• • • • • • • • • • • • • • • • • • •	
7	I	Total contributions	Type of contribution
	KEN AND LINDA MCGURN 101 SE 2ND PLACE GAINESVILLE, FL 32601	\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	RICHARD AND PHOEBE MILES 305 NW 4TH STREET GAINESVILLE, FL 32601	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	EARL PICKENS 550 NW 58TH STREET GAINESVILLE, FL 32607	\$25,301.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>10</u>	CRYSTAL WHITESCARVER 17001 MADRES DE AVILA TAMPA, FL 33613	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	AMY CADE 1183 CONSERVANCY DRIVE WEST TALLAHASSEE, FL 32312	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	DAVID SALIWANCHIK 8114 SW 42ND AVE GAINESVILLE, FL 32608	\$ \$ Schedule B (Form	Person X Payroll

Name of organization

Employer identification number

CADE MUSEUM FOUNDATION, INC

20-1884134

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	DANIEL GREATHOUSE 636 NE 10TH AVE GAINESVILLE, FL 32601	\$\$	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 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 Onncash Occash (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)
623452 10-1	8-16	Schedule B (Form	990, 990-EZ, or 990-PF) (2016)

18

Employer identification number

CADE MUSEUM FOUNDATION, INC

20-1884134

art II	Noncash Property (See instructions). Use duplicate copies of F	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
1	VIOLINS		
		s172,500.	09/15/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
(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
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	

Name of orga	nization			Employer identification number		
	USEUM FOUNDATION, INC	-		20-1884134		
Part III	Exclusively religious, charitable, etc., contrib the year from any one contributor. Complete col completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	umns (a) through (e) and the follow charitable, etc., contributions of \$1,000 or	wing line entry for accouration	ne .		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held		
		(e) Transfer of gift	t			
	Transferee's name, address, and	I ZIP + 4	Relationship of tra	nsferor to transferee		
(a) No.	(h) Durance of sift	(a) Has of wift	(d) Door	winting of how gift in hold		
Part I	(b) Purpose of gift	(c) Use of gift	(a) Desc	cription of how gift is held		
		(e) Transfer of gif				
	Transferee's name, address, and			nsferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held		
		(e) Transfer of gif	t			
	Transferee's name, address, and	I ZIP + 4	Relationship of tra	nnsferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held		
	(e) Transfer of gift					
	Transferee's name, address, and	1 ZIP + 4	Relationship of tra	ansferor to transferee		

FORM 990-PF INTERE	ST ON SAVING	GS AND T	EMPOR?	ARY (CASH	INV	ESTMENTS	នា	PATEMENT	1
SOURCE			(A) REVENUE PER BOOKS		(B) NET INVESTMENT INCOME		ESTMENT	(C) ADJUSTED NET INCOME		ŀ
INTEREST			50,3	75.		!	50,375.		50,37	5.
TOTAL TO PART I, LINE 3			50,37	75.			50,375.		50,375.	
FORM 990-PF	AND INT	EREST	EREST FROM SECURITIES		TIES	STATEMENT		2		
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	S	REV	(A) VENUE BOOK		(B) NET INVES MENT INCO		(C) ADJUSTE NET INCO	
DIVIDENDS	5,888.		0.		5,88	8.	5,88	8.	5,88	88.
TO PART I, LINE 4	5,888.		0.		5,88	8.	5,88	8.	5,88	88.
FORM 990-PF		RENTAL	INCOM	• •				Sī	FATEMENT	3
KIND AND LOCATION O	F PROPERTY					2	ACTIVITY NUMBER	RI	GROSS ENTAL INCC	ME
S MAIN STREET					1	1,100.		00.		
TOTAL TO FORM 990-P	F, PART I, 1	LINE 5A							1,10	00.
	·					===				
FORM 990-PF		OTHER	INCO	ME				S'.	PATEMENT	4
DESCRIPTION			REV	(A) VENUI BOOI			(B) T INVEST- NT INCOME		(C) ADJUSTEI NET INCOM	
GATORADE ROYALTIES CADE PRIZE COMPETIT MUSEUM ACITIVITES-C OPERATING REVENUE		SSES	7	27 43	,073. ,863. ,949.		0		436,07 27,86 43,94 56,91	33. 19.
TOTAL TO FORM 990-P	F, PART I,	LINE 11		564	,801.		436,073		564,80)1.

				
FORM 990-PF	90-PF ACCOUNTING FEES STA			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	23,577.	5,894.	5,894.	17,683.
TO FORM 990-PF, PG 1, LN 16B	23,577.	5,894.	5,894.	17,683.
FORM 990-PF (OTHER PROFES	SIONAL FEES	ST	ATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OTHER PROFESSIONAL FEES	237,698.	0.	0.	237,698.
TO FORM 990-PF, PG 1, LN 16C	237,698.	0.	0.	237,698.
FORM 990-PF	TAX	ES	ST	'ATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAXES & FEES PAYROLL TAXES	5,318. 3,673.	0. 48.	0. 1,231.	5,318. 2,442.
TO FORM 990-PF, PG 1, LN 18	8,991.	48.	1,231.	7,760.
FORM 990-PF	OTHER E	XPENSES	ST	TATEMENT 8
	(A)	(B)	(C)	(D)
DESCRIPTION	EXPENSES PER BOOKS	NET INVEST- MENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES
PROMOTIONAL EXPENSES OFFICE EXPENSES INSURANCE PROGRAM EXPENSE FUNDRAISING LICENSES & PERMITS	1,277. 11,193. 17,002. 57,079. 28,306. 493.	0. 850. 0. 0.	154. 1,353. 2,906. 34,509. 0.	1,122. 9,840. 14,096. 22,569. 28,306. 493.

DISPOSED ASSETS	9,90	0.	0.	5,989	5. 3,9	15.
TO FORM 990-PF, PG 1, LN 23	125,25	0.	850.	44,90	7. 80,3	41.
	_== <u></u>					
FORM 990-PF	OTHER I	NVESTMENTS			STATEMENT	
DESCRIPTION		VALUATION METHOD	воок	VALUE	FAIR MARKE VALUE	T
GATORADE TRUST		FMV	3,0	74,316.	3,074,3	16.
TOTAL TO FORM 990-PF, PART II,	, LINE 13		3,0	74,316.	3,074,3	16.
FORM 990-PF DEPRECIATION OF	ASSETS N	OT HELD FOR	INVEST	MENT	STATEMENT	10
DESCRIPTION		OST OR ER BASIS	ACCUMU DEPREC		BOOK VALU	Έ
BUILDING BUILDING IMPROVEMENTS EQUIPMENT LAND		645,741. 31,739. 7,775. 29,125.		67,209. 8,431. 3,023. 0.	578,5 23,3 4,7 29,1	08. 52.
TOTAL TO FM 990-PF, PART II, I	LN 14	714,380.		78,663.	635,7	17.
FORM 990-PF	ОТНЕ	R ASSETS			STATEMENT	11
DEŚCRIPTION		SINNING OF SOOK VALUE	END OF BOOK		FAIR MARKE VALUE	T
MUSEUM ASSETS LOAN COSTS, NET OF A/A INTEREST RESERVE		227,995. 1,997. 0.		86,395. 14,011. 44,000.	386,3 14,0 44,0	11.

TO FORM 990-PF, PART II, LINE 15 229,992. 444,406. 444,406.

				
	SUBSTANTIAL CONTRIE RT VII-A, LINE 10	UTORS	STATE	EMENT 12
NAME OF CONTRIBUTOR	ADDRESS			
ALACHUA COUNTY	12 SE 1ST PLA GAINESVILLE,			
	LIST OF OFFICERS, DAND FOUNDATION MANA		STATE	EMENT 13
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	·	EMPLOYEE BEN PLAN CONTRIB	
CATHY PERDUE-ADLER 904 S. MAIN ST GAINESVILLE, FL 32601-7925	BOARD MEMBER 1.00	0.	0.	0 .
RICHARD ALLEN 904 S. MAIN ST GAINESVILLE, FL 32601-7925	BOARD MEMBER 1.00	0.	0.	0
LUIS DIAZ 904 S. MAIN ST GAINESVILLE, FL 32601-7925	BOARD MEMBER 1.00	0.	0.	0
MARY CADE 904 S. MAIN ST GAINESVILLE, FL 32601-7925	BOARD MEMBER 1.00	0.	0.	0
DAVID MASSIAS 904 S. MAIN ST GAINESVILLE, FL 32601-7925	BOARD MEMBER 1.00	0.	0.	0
PHOEBE MILES 904 S. MAIN ST GAINESVILLE, FL 32601-7925	BOARD MEMBER 1.00	0.	0.	0
RICHARD MILES 904 S. MAIN ST GAINESVILLE, FL 32601-7925	BOARD MEMBER 1.00	0.	0.	0

BOARD MEMBER

1.00

0.

0.

0.

GAINESVILLE, FL 32601-7925

SCOTT PERDUE

904 S. MAIN ST

CADE MUSEUM FOUNDATION, INC			20-18	384134
ROSE FAGLER 904 S. MAIN ST GAINESVILLE, FL 32601-7925	BOARD MEMBER 1.00	0.	0.	0.
SUSAN DAVENPORT 904 S. MAIN ST GAINESVILLE, FL 32601-7925	BOARD MEMBER 1.00	0.	0.	0.
PATTI BREEDLOVE 904 S. MAIN ST GAINESVILLE, FL 32601-7925	BOARD MEMBER 1.00	0.	0.	0.
DAVID SALIWANCHIK 904 S. MAIN ST GAINESVILLE, FL 32601-7925	BOARD MEMBER 1.00	0.	0.	0.
JENNIFER DENAULT 904 S. MAIN ST GAINESVILLE, FL 32601-7925	CHIEF OPERATING 40.00	G OFFICER 12,585.	0.	0.
ROBERT HROMAS 904 S. MAIN ST GAINESVILLE, FL 32601-7925	BOARD MEMBER 1.00	0.	0.	0.
JEFF LYONS 904 S. MAIN ST GAINESVILLE, FL 32601-7925	BOARD MEMBER 1.00	0.	0.	0.
CHRISTINE PHILLIPS 904 S. MAIN ST GAINESVILLE, FL 32601-7925	BOARD MEMBER 1.00	0.	0.	0.
SALLY SCOTT 904 S. MAIN ST GAINESVILLE, FL 32601-7925	BOARD MEMBER 1.00	0.	0.	0.
JACKSON STREETER 904 S. MAIN ST GAINESVILLE, FL 32601-7925	BOARD MEMBER 1.00	0.	0.	0.
MARILYN TUBBS 904 S. MAIN ST GAINESVILLE, FL 32601-7925	BOARD MEMBER 1.00	0.	0.	0.
CARLA WARLOW 904 S. MAIN ST GAINESVILLE, FL 32601-7925	BOARD MEMBER 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	12,585.	0.	0.

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FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

NAME OF MANAGER

MARY CADE PHOEBE MILES RICHARD MILES

CADE MUSEUM FOUNDATION, INC.

20-1884134

Form 990-PF, Part VI, Excise Tax Based on Investment Income:

The Cade Museum Foundation is in a 60-month termination under Section 507(b)(1)(B) beginning on January 1, 2012 and ending on December 31, 2016. Attached to this return is a copy of the letter from the IRS dated June 16, 2012 confirming the notification of intent to terminate was received by the IRS. In addition, the Foundation filed a consent under Section 6501(c)(4) with its notification to the IRS, this allows the organization to file Form 990-PF without paying the tax based on investment income. Attached to this return is a signed copy of the consent Form 872-B, as well as, a signed copy of Form 8940.