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Form .990

EXTENDED TO NOVEMBER 15, 2017 Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.

OMB_No_1545-0052

For	calen	dar year 2016 or tax year beginning		, and ending		
Nar	ne of	foundation			A Employer identification	number
		JIN H. REED FAMILY FOUN			26-3668924	
		nd street (or P O box number if mail is not delivered to street	address)		B Telephone number	
_3	30:	L BAYSHORE BOULEVARD		1706	813-389-34	96
_		wn, state or province, country, and ZIP or foreign p PA, FL 33629~8845	ostal code		C If exemption application is pe	ending, check here
		all that apply: Initial return		rmer public charity	D 1. Foreign organizations	, check here
		Final return	Amended return		2. Foreign Organizations me	eting the 85% test.
		Address change	Name change		Foreign organizations me check here and attach co	mputation
H C	_	type of organization: X Section 501(c)(3) exction 4947(a)(1) nonexempt charitable trust	empt private foundation Other taxable private founda	ation	E If private foundation state under section 507(b)(1)	
1 Fa		rket value of all assets at end of year J Accounti	ng method: X Cash	Accrual	F If the foundation is in a 6	O-month termination
		·	her (specify)		under section 507(b)(1)	
•			mn (d) must be on cash i	basis)	4,144, 5554,61, 551 (5)(1)	(-,, 0
_			(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	46,975.	~ * * * \ *	N/A	* * * * *
	2	Check If the foundation is not required to attach Sch. B		<u> </u>	4 % h / /	<u> </u>
	3	Interest on savings and temporary cash investments				* * 4 * /
	4	Dividends and interest from securities				". \ \ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \
	5a	Gross rents				
	ь	Net rental income or (loss)				
	6a	Net gain or (loss) from sale of assets not on line 10			A 31 1 % 1.	* ° .,
Revenue	١.	Gross sales price for all assets on line 6a		X I I A W		4 4 3 3 X
ķ	1	Capital gain net income (from Part IV, line 2)		0.		
æ	i	Net short-term capital gain		. % *: 2 %	<u> </u>	1
	١	Income modifications	P 2			
	100	Crapa pelos logo returna	1.			
	Ι.	and allowances				
		Less Cost of goods sold		* 27 Sev 2		
	Į.	Gross profit or (loss)				
	l	Other income	46,975.	0.		
	+	Total. Add lines 1 through 11				0
	13	Compensation of officers, directors, trustees, etc	0.	0.		
		Other employee salaries and wages			ļ	
ç		Pension plans, employee benefits		L		<u> </u>
pense	16a	Legal fees EIVED STMT 1	\			<u> </u>
þe	1		975.	0.		0
ŭ	1	Other professional fees			L	<u> </u>
š	17	@rest AUG 1 4 2017 3				<u></u>
цаt	18	axes oct				
njs	19	pepreciation and depletion UT que que a coupant GDEN, UT				<u></u>
Admınistrative	20					
	21	Travel, conferences, and meetings				
and	22	Printing and publications				
ğ	23	Other expenses				
rating	24	Total operating and administrative				
Oper	1	expenses. Add lines 13 through 23	975.	0.		C
ō	25	Contributions, gifts, grants paid	46,700.			46,700
	1	Total expenses and disbursements.				
	-	Add lines 24 and 25	47,675.	0.		46,700
	27	Subtract line 26 from line 12:				
	l l		-700.			
	ļ	Excess of revenue over expenses and disbursements	, , , , , , , , , , , , , , , , , , ,	0.	 	
		Net investment income (if negative, enter -0-)	1	ι υ•	1	L
		Adjusted net income (if negative, enter -0-)			N/A	

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

Fo	rm 99	0-PF(2016) CALVIN H. REED FAMILY		NC.	26-	3668924	Page 2
P	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year			of year	
뜨	art	column should be for end-of-year amounts only	(a) Book Value		(b) Book Value	(c) Fair Market	
	1	Cash - non-interest-bearing	800	$\cdot \Box$	100.		100.
	2	Savings and temporary cash investments					
	3	Accounts receivable -					
	1	Less: allowance for doubtful accounts			and the second s		
	4	Pledges receivable		٠,	* 4	ž	
	İ	Less; allowance for doubtful accounts			management is a supplementation of address of a supplement of		
	5	Grants receivable		1			
	6	Receivables due from officers, directors, trustees, and other		T			
	Ì	disqualified persons		1			
	7	Other notes and loans receivable		- '2'	1424	· / 3	
]	Less: allowance for doubtful accounts	- A was a conflictant such district Things	- DAMES.	anattellin tarkillin - mari marillin na	in white discourse such was	. s southand
S	8	Inventories for sale or use	 	T			
Assets	9	Prepaid expenses and deferred charges		\dagger		 	
Ÿ	10a	Investments - U.S. and state government obligations		+		 	
	4	Investments - corporate stock		1			
	١	Investments - corporate bonds		+-			
		Investments - land, buildings, and equipment, basis	* ** *** *** **	1.			L. W
	1	Less accumulated depreciation	- Marie - Salan - Sala	-) 2866	A	and an area of the second	
	12	Investments - mortgage loans	 	╁─		 	
	!	Investments - other		+-		 	
		Land, buildings, and equipment: basis		-	\$	k W Z	± 4:
	'	Less accumulated depreciation		~~~	<u> </u>	ř I.Z.	a. li
	15	Other assets (describe	\ 	+-		-	
		Total assets (to be completed by all filers - see the	′ 	╁╌			
	} ''	· · · · · · · · · · · · · · · · · · ·	800	1	100.	ì	100.
_	17	instructions. Also, see page 1, item I) Accounts payable and accrued expenses	- 300	+-	100.	P	100.
		Grants payable	ļ	+-			
	19	Deferred revenue		╁	 		42 J
Liabilities				+			3 N.
Ē	20	Loans from officers, directors, trustees, and other disqualified persons		╁_			
Ë	21	Mortgages and other notes payable	,	+			
	122	Other liabilities (describe	⁾	┿-			" "Kidi "
		Total PakiPhas (add to as 47 th as h 00)		1	^		è, í
_	23	Total liabilities (add lines 17 through 22)	0	╄	0.		
	l	Foundations that follow SFAS 117, check here		1			
Ś	١	and complete lines 24 through 26 and lines 30 and 31.					
nces	24	Unrestricted	<u> </u>	┸			
Net Assets or Fund Balar	25	Temporarily restricted		—		, W.,	, , , ,
8	26	Permanently restricted		1_			* * :
Š	ļ	Foundations that do not follow SFAS 117, check here		1			
ř	Ì	and complete lines 27 through 31.]	•		**
ţ	27	Capital stock, trust principal, or current funds	0	:↓	0.	· ·	*
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0	:	0.		ĺ
Ę	29	Retained earnings, accumulated income, endowment, or other funds	800	-	100.	ļ	
ž	30	Total net assets or fund balances	800	· <u>↓</u>	100.	1	
	1		1	1		}	Ì
_	31	Total liabilities and net assets/fund balances	800	<u>.L.</u>	100.	L	
P	art	Analysis of Changes in Net Assets or Fund	Balances				
=		net assets or fund balances at beginning of year - Part II, column (a), lii	ne 30	-	————т	<u> </u>	
•		t agree with end-of-year figure reported on prior year's return)			1		800.
2		amount from Part I, line 27a			2		700.
		rincreases not included in line 2 (itemize)					0.
		ines 1, 2, and 3			3	 	100.
		eases not included in line 2 (itemize)			4	 -	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II,	column (h) line 30		5 6		100.
-		mer accord or raine balances at one or year time it illings into 0) "I alt II,	voicinin (U), iiii UU		1 0	1	

623511 11-23-16

(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) D	How acqu - Purchas - Donatio	ired se on (o		acquired ay, yr.)	(d) Date sold (mo., day, yr.)		
1a									
b NONE				_		_			
<u>c</u>				┞-					
d e				├-					
	(f) Depreciation allowed	(a) Cos	st or other basis	┶			(h) G:	ain or (loss)	
(e) Gross sales price	(or allowable)		xpense of sale			((f) minus (
a		 							
b									
С									
d		<u> </u>							
Complete only for accets showing go	a in column (b) and award by	the foundation	00 10/01/00					1.41.	
Complete only for assets showing ga		, -						ol. (h) gain iot less thar	
(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					(from col. (
a		╁──							
b		†		-					
C									
d									
e									
2 Capital gain net income or (net capital	loss) { If gain, also ente If (loss), enter -0	ir in Part I, line)- in Part I, line	7 7	}	2				
3 Net short-term capital gain or (loss) as	•								
If gain, also enter in Part I, line 8, colu	nn (c).	• ,		}					
If (loss), enter -0- in Part I, line 8 Part V Qualification Under	- Cootion 4040/ol to	. Deduced	Towns No.		3				
						THE IIICO	ille		
(For optional use by domestic private fou	idations subject to the Section	4540(a) Lax UII	net mvestment ii	ICOIII	s.)				
If section 4940(d)(2) applies, leave this pa	rt blank.								
Was the foundation liable for the section 4	942 tax on the distributable an	nount of any ye	ar in the base pe	riod?					Yes X No
If "Yes," the foundation does not qualify u									
1 Enter the appropriate amount in each	column for each year; see the i	nstructions be	fore making any e	ntries					(d)
(a) Base period years Calendar year (or tax year beginning in			Net value of no	(c) oncha	ritable-use			Dıstrıb (col. (b) dıv	(d) ution ratio ided by col. (c))
2015		9,800.				,228.			15.42750
2014		1,031.				,399.			65.06862
2013		1,705.				,364. 486.			16.52702 114.08436
2012 2011		20,630.	<u> </u>			,684.			$\frac{114.08436}{249.78028}$
2011		10,030.				,004.			243.70020
2 Total of line 1, column (d)							2	1,	460.88779
3 Average distribution ratio for the 5-year the foundation has been in existence in	•	on line 2 by 5,	or by the number	of ye	ars		3		292.17756
4 Enter the net value of noncharitable-us	e assets for 2016 from Part X.	line 5					4		2,192
		+							
5 Multiply line 4 by line 3							5		640,453
6 Enter 1% of net investment income (1	% of Part I, line 27b)						6		0
7 Add lines 5 and 6						i	7	ļ <u>.</u>	640,453
8 Enter qualifying distributions from Pai	t XII, line 4						8		46,700
If line 8 is equal to or greater than line See the Part VI instructions.	7, check the box in Part VI, line	e 1b, and comp	plete that part usin	ıg a 1	% tax rate).			
623521 11-23-16				_					orm 990-PF (201

1a Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "WA" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) D Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ and enter 1% of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax paid with applications - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax due, if the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due, if the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due, if the total of lines 5 and 8 is more than line 7 center amount overpaid 11 Enter the amount of line 10 to be; Credited to 2017 estimated tax ▶ Refunded ▶ 11 Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly) or indirectly) for political purposes (see instructions for the definition)? 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	Form 990-PF (2016) CALVIN H. REED FAMILY FOUNDAT		26-366		Page 4
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) b Domestic householders that meet the section 440(e) requirements in Part V, check here ▶ ☐ and eater 1% of Part 1, line 27b. • All other domestic foundations either 4% of line 27b. Everny through organizations either 4% of Part 1, line 12, cot. (b). • Tax under section 511 (connects section 4947(a)(1) thrusts and bacable foundations only, Others enter -0-) • All other common lax (domestic section 4947(a)(1) thrusts and bacable foundations only, Others enter -0-) • Subside A (normon) bax (domestic section 4947(a)(1) thrusts and bacable foundations only, Others enter -0-) • Subside A (normon) bax (domestic section 4947(a)(1) thrusts and bacable foundations only, Others enter -0-) • Subside A (normon) bax (domestic section 4947(a)(1) thrusts and bacable foundations only, Others enter -0-) • Subside A (normon) bax (domestic section 4947(a)(1) thrusts and bacable foundations only, Others enter -0-) • Subside A (normon) bax (domestic section 4947(a)(1) thrusts and bacable foundations only, Others enter -0-) • Credit Payments: • 2016 estimated tax payments and 2015 overpayment credited to 2016 • Exempt foregoin organizations - tax withhold at source • 10 Exempt foregoin organizations - tax withhold at source • 10 Exempt foregoin organizations - tax withhold at source • 10 Deverpayment, If ther 2 more than the total of lines 5 and 8 is more than line 7, enter amount overgal of the control of the 10 to bit Condition and the time to total of lines 5 and 8 is more than line 7, enter amount overgal of the control of the 10 to bit Condition and the time total of lines 5 and 8, enter the amount overgal of the payment of the 10 to bit Condition and the time total of lines 5 and 8, enter the amount overgal of the 10 to bit Condition and the 10 to bit Condition and the payment of the condition and the payment of the 10 to bit Condition and the payment of the activities of the condition and the payment of the condition a			4946 - Set	Instructio	ns)
b Domestic foundations that meet the section 4947(a) from the 27th, Exempl foreign organizations enter 4% of Part I, line 127th • All other domestic foundations enter 2% of line 27th, Exempl foreign organizations enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and bacable foundations only, Others enter -0-) 3 Add lines 1 and 2 4 Subtille A (micromor) bax (domestic section 4947(a)(1) trusts and bacable foundations only, Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3, If zero or less, enter -0- 6 Crotists/Payments: 2 2 0. 5 Tax based on investment income. Subtract line 4 from line 3, If zero or less, enter -0- 6 Crotists/Payments: 2 2 0. 5 Tax based on specific section 4947(a)(1) trusts and bacable foundations only, Others enter -0-) 5 Tax based on specific section 4947(a)(1) trusts and bacable foundations only. Others enter -0-) 6 Crotists/Payments: 2 2 0. 5 Tax based on specific section 4947(a)(1) trusts and bacable foundations only. Others enter -0-) 6 Crotists/Payments: 2 2 0. 6 Crotists/Payments: 2 2 0. 6 Crotists/Payments: 3 3 0. 6 Crotists/Payments: 5 0 0. 6 Crotists/Payments: 6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			1 3	**	,
of Part I, line 27h All other domestic foundations enter 2% of line 27b, Exempt foreign organizations enter 4% of Part I, line 12, col. (b). Tax order section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) A dot lines 1 and 2 Substel A (norme) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax order section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax due in the common section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax due, the common section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax due, the common section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) To deferoid the common section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) To deferoid the common section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) To deferoid the common section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) To deferoid the common section 4947(a)(1) trusts and taxable foundation for extension of time to the (Form 8568) Bax Board (1900 organizations -1-x withheld at source To deferoid and payments. Add lines 6a through 6d To deferoid and payments. Add lines 6a through 6d To deferoid and payments. Add lines 6a through 6d To deferoid and payments. Add lines 6a through 6d To deferoid and payments. Add lines 6a through 6d To deferoid and payments. Add lines 6a through 6d To deferoid and payments. Add lines 6a through 6d To deferoid and payments. Add lines 6a through 6d To deferoid and payments. Add lines 6a through 6d To deferoid and payments. Add lines 6a through 6d To deferoid and payments. Add lines 6a through 6d To deferoid and payments. Add lines 6a through 6d To deferoid and payments. Add lines 6a through 6d To deferoid and payments. Add lines 6a through 6d To deferoid and payments. Add lines 6a through 6d To deferoid and payments. Add lines 6a throug			1	- ***************	n - 1
c All other domestic foundations enter 2% of the 27b. Exempt foreign organizations enter 4% of Part 1, line 12, cot. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 C. 4 Subtrité A (mcome) bax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment incomes. Subtract line 4 from line 3, 1/zero or less, enter -0- 6 Crodist-Payments: a 2016 estimated tax payments and 2015 overpayment credited to 2016 6 Exempt foreign organizations - tax withhelid at source c Tax paid with application for extension of time to file (Form 8568) 6 Extension of the section of the 16 from 1858) 6 Extension of the 16 from 1858 of 16 from 1858 of 16 from 1858 of 17 Company of 1858 of 1		and enter 1%	-'-	<u> </u>	
2 Recurder section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, Others enter -0-) 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 - 3 3 0 0 0 - 3 3 0 0 0 - 3 3 0 0 0 0 - 3 3 0 0 0 0 - 3 3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	·	6 of Part I line 12 col (b)		e place and the second	
3 Add lines 1 and 2 4 Suburib A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Creditor-Payments; a 2016 estimated tax payments and 2015 overpayment credited to 2016 b Exempt foreign organizations - tax withheld at source 1 Tax paid with application for existension of time to file (Form 8668) 6 Backup withholding erroneously withheld 7 Total circular and payments. Add lines 6 athrough 6d 8 Enter any penalty for underpsyment of estimated tax. Check here ☐ if Form 2220 is attached 8 Tax due. If the botal of lines 5 and 6 is more than line 7, enter amount owed 9 Tax due. If the botal of lines 5 and 6 is more than line 7, enter amount owed 9 Tax due. If the botal of lines 5 and 6 is more than line 7, enter amount owed 10 Overpayment. If fine 7 is more than the total of lines 5 and 6, enter the amount overpaid 11 Enter the amount of line 10 to bic. Credited to 2017 estimated tax. 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or unforwers any political campager? 10 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or unforwers in the did into the did it is a state of the control of the control of the activities of the activities and copies of any materials published or distributed by the foundation in connection with the activities 1 a burng the term 1120+00, for this year? 2 If the answer is "Yes" to 1 are 15, attach a detailed description of the activities 3 Has the foundation have unrelated a business gross income of 5,100 or more during the year? 1 'Yes, "attach a detailed description of the activities 3 Has the foundation have unrelated a business gross income of \$1,000 or more during the year? 1 'Yes, "attach the statement required by General Instruction 7 2 By state legislation that effectively unrelated a copy of		• • • • • • • • • • • • • • • • • • • •		a a secondaria de la companya della companya della companya de la companya della	0.
4 Subtile A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits-Payments; a 2016 sistimated tax payments and 2015 overpayment credited to 2016 8 Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to fife (form 8968) 6 Backup withholding erroneously withhald 7 Total credits and payments. Add lines to time to fife (form 8968) 6 Backup withholding erroneously withhald 7 Total credits and payments. Add lines to time to fife (form 8968) 8 Indies any penalty for underpayment of estimated tax. Check here ☐ If Form 2220 is attached 9 Tax due. If the total of lines 3 and 8 is more than line?, center amount owed 9 Tax due. If the total of lines 3 and 8 is more than line?, center amount owed 9 Tax due. If the total of lines 3 is more than fine?, center amount owed 9 Tax due. If the total of lines 5 is creditated to 2015 the sent of the total of lines 5 and 8, enter the amount owerpaid 10 Overpayment. If line? is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 bit one Creditate for 2015 the sent of th		and the of	\vdash		
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managers. \$ \$	e Enter the reimbursement (if any) paid by the foundation during the year for political expend	iture tax imposed on foundation	_		1 5
If "Yes," attach a detailed description of the activities 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a tax return on Form 990-T for this year? If "Yes," attach the statement required by General Instruction T 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 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 8a Enter the states to which the foundation reports or with which it is registered (see instructions) b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation SEE STATEMENT 2 8b X 9 is the foundation claiming status as a private operating foundation within the meaning of section 4942(i)(3) or 4942(i)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	managers. ► \$0.				3
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10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses 10 X			nenuar	-	y
, and the state of					
	To any persons accome substantial contributors during the tax year. If res, attach a schedu	ure ilsung meir names and addresses			

Form **990-PF** (2016)

X

3b

4a

N/A

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,

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

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

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

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

Form 990-PF (2016) CALVIN H. REED FAMILY FO			<u> 26-36689</u>	24 Page 6			
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be I	Required (contin	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	4945(e))?	Y	es 🗶 No 🧳				
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,	→	**			
any voter registration drive?		Y	es X No es X No	Ser 1. 88 1 1 1			
(3) Provide a grant to an individual for travel, study, or other similar purposes	(3) Provide a grant to an individual for travel, study, or other similar purposes?						
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			· · · · · · · · · · · · · · · · · · ·			
4945(d)(4)(A)? (see instructions)		Y	es 🗓 No 📑				
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t	for	,				
the prevention of cruelty to children or animals?	, . ,		es X No				
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	ler the exceptions described	-	1				
section 53.4945 or in a current notice regarding disaster assistance (see instru				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 fr		ined	_ }				
expenditure responsibility for the grant?		I/A □ y	es 🔲 No 🤘				
If "Yes," attach the statement required by Regulations section 53 4945		•/					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •		ļ.				
a personal benefit contract?	ay premiums on	v	es X No				
·	0-0	L 11	A* >	6b X			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal denent contract?		<u>-</u> -				
If "Yes" to 6b, file Form 8870	hallan tur		es X No				
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y					
b if "Yes," did the foundation receive any proceeds or have any net income attributed by the foundation About Officers. Directors. Trust				7b			
Part VIII Information About Officers, Directors, Trusto Paid Employees, and Contractors	ees, Foundation Ma	inagers, Highi	y				
List all officers, directors, trustees, foundation managers and their	componenties						
List all officers, directors, dustees, foundation managers and their		(c) Compensation	(d) Contributions to	(a) Evnança			
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other			
	to position	`enter'-0-)	compensation	allowances			
Cara da marcara o				•			
SEE STATEMENT 3		0.	0.	0.			
		1					
		Ì					
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."					
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other			
נסן אמוווים מווט מטטויפטט טוי פמטוו פווויףוטישים אמוט וווטוים מומוו שטט,000	hours per week devoted to position	(c) compensation	employee benefit plans and deferred compensation	allowances			
NONE							
	•						
							
							
		 					
	10		(
	 	 	 				
		 	 				
Total number of other employees paid over \$50,000				0			
total intilines of other embiosess hair over \$20,000			Form	990-PF (2016)			
			רטוווו	930-FT (2010)			

Form 990-PF (20			26-366	8924	Page 7
Part VIII	Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers,	Highly		
3 Five highes	st-paid independent contractors for professional services. If none, enter "I	NONE."			
	(a) Name and address of each person paid more than \$50,000	(b) Typ	oe of service	(c) Com	pensation
N(ONE				
				↓	
					
				 	
				1	
				†	
					
Total number o	f others receiving over \$50,000 for professional services				0
Part IX-A	Summary of Direct Charitable Activities	<u>-</u>		1	
	tion's four largest direct charitable activities during the tax year. Include relevant statistica		s the	Evnanasa	
	inizations and other beneficiaries served, conferences convened, research papers product	ed, etc.		Expenses	
1 <u>N</u>	/A				
2					
3					
4					
B 7 17 B					
	Summary of Program-Related Investments to largest program-related investments made by the foundation during the tax year on line	as 1 and 2		Amount	
	/A	is raile 2.		Amount	
· 	· · · · · · · · · · · · · · · · · · ·				
2					
All other progra	rm-related investments. See instructions.				
3	The state of the s				
Total. Add line	es 1 through 3				0.
			F	orm 990-F	PF (2016)

Part X Minimum Investment Return (All domestic foundations must complete this part	t. Foreign foundations, see	instructions)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Average monthly fair market value of securities	1a	0.
b Average of monthly cash balances	1b	2,225.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	2,225.
e Reduction claimed for blockage or other factors reported on lines 1a and	12h	
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	2,225.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	33.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,192.
6 Minimum investment return. Enter 5% of line 5	6	110.
Part XI. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foreign organizations check here and do not complete this part.)	foundations and certain	
1 Minimum investment return from Part X, line 6	11	110.
2a Tax on investment income for 2016 from Part VI, line 5	ħv.	
b Income tax for 2016. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2c	0.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	110.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	110.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	110.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.	****	
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	46,700.
b Program-related investments - total from Part IX-B	16	<u> </u>
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	_2	
3 Amounts set aside for specific charitable projects that satisfy the:	, ,	
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	46,700.
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	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	46,700.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether t 4940(e) reduction of tax in those years.	he foundation qualifies for the	section

Part XIII Undistributed Income (see instructions)

	(a)	(b)	(-)	1
	Corpus	(b) Years prior to 2015	(c) 2015	(d)
1 Distributable amount for 2016 from Part XI,		1 cars prior to 2015	2013	2016
line 7				
2 Undistributed income, if any, as of the end of 2016				110.
a Enter amount for 2015 only				
b Total for prior years:			0.	, ;,;
b rounted prior years.	y			***
3 Excess distributions carryover, if any, to 2016:		0.		\$\\ .^
a From 2011 420,546.	** / **	· ·	,	,
b From 2012 541,421.	, *	,	* * * * * *	* * * * * * * * * * * * * * * * * * * *
c From 2013 121,337.		\$5.	` ` ` `	* * * * *
dFrom 2014 90,961.	1. 3. 1.	* *		
eFrom 2015 49,639.				
f Total of lines 3a through e	1,223,904.			
4 Qualifying distributions for 2016 from				* *** *
Part XII, line 4: \triangleright \$ 46,700.				
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior	34	, ,, %	<u> </u>	
years (Election required - see instructions)		0.		a 4 4 1
c Treated as distributions out of corpus	<u>""" </u>		*** ***	
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				*
e Remaining amount distributed out of corpus	46 E00	7.307		110.
	46,590.	\$	* * * *	
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a))			` `****	
6 Enter the net total of each column as				
indicated below:	I. & '''.			
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,270,494.	<u>V. 7. 4. 5. 5. 5. </u>		
b Prior years' undistributed income. Subtract	. *		is the same of the	
line 4b from line 2b		0.		
c Enter the amount of prior years'	A ST ST ST ST		. 2	
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously			X,	
assessed	. 4., 9	0.	* * * *	
d Subtract line 6c from line 6b. Taxable	*			*
amount - see instructions	, ,	0.	,	· · · · · · · · · · · · · · · · · · ·
e Undistributed income for 2015. Subtract line		· · · · · · · · · · · · · · · · · · ·		
4a from line 2a. Taxable amount - see instr.		·	_	
f Undistributed income for 2016. Subtract			0.	
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				
			-	0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				40.00
section 170(b)(1)(F) or 4942(g)(3) (Election		İ	İ	:
may be required - see instructions)	0.			ı J
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	420,546.			
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	849,948.			ı İ
O Analysis of line 9:	-,-			
a Excess from 2012 541,421.				·
b Excess from 2013 121, 337.			İ	
c Excess from 2014 90,961.	1			1
d Excess from 2015 49,639.				
e Excess from 2016 46,590.				
23581 11-23-16				

		MILY FOUNDAT			68924 Page 10
Part XIV Private Operating Fo	oundations (see i	nstructions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a ruling or	determination letter th	at it is a private operating			
foundation, and the ruling is effective for	•	· ·	>		
b Check box to indicate whether the found	ation is a private opera	ting foundation described	in section	4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 20 13	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a			T		
c Qualifying distributions from Part XII,					
line 4 for each year listed				_	
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					l
e Qualifying distributions made directly					
for active conduct of exempt activities.					j
Subtract line 2d from line 2c		<u> </u>			
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					<u> </u>
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)			<u> </u>		
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed		ļ			
c "Support" alternative test - enter:			 		
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on			ł		
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public		 	 	 	
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from			 	 	
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	mation (Compl	ete this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during t				, ,	
1 Information Regarding Foundation	n Managers:	·			
a List any managers of the foundation who	•	e than 2% of the total con	tributions received by the	e foundation before the ck	se of any tax
year (but only if they have contributed m	ore than \$5,000). (See	section 507(d)(2).)	·		•
CALVIN H. REED					
b List any managers of the foundation who	own 10% or more of	the stock of a corporation	(or an equally large port	ion of the ownership of a p	partnership or
other entity) of which the foundation has	a 10% or greater inter	est.			
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loa	n, Scholarship, etc., P	rograms:		
Check here 🕨 🛣 if the foundation of					
the foundation makes gifts, grants, etc. (see instructions) to inc	ividuals or organizations i	under other conditions, c	complete items 2a, b, c, an	d d.
a The name, address, and telephone numb	er or e-mail address o	the person to whom appl	ications should be addre	essed:	
b The form in which applications should be	e submitted and inform	ation and materials they s	hould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	, such as by geographi	cal areas, charitable fields	, kinds of institutions, or	other factors:	
-			, -		
623601 11-23-16					Form 990-PF (2016)

Part XVI-A Analysis of Income-Pro					
Enter gross amounts unless otherwise indicated.		business income		ded by section 512, 513, or 514	(e)
4.D	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code	7.modii.	TOTAL OF THE OWNER
a b					
•	_		+-		
d	-		 - 		
e	_		_		
f	— 				
g Fees and contracts from government agencies	_		 		
2 Membership dues and assessments			1		
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:	`` #	714 N. A.F.	2.5		
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					1
than inventory			<u> </u>		
9 Net income or (loss) from special events		 	L		ļ
O Gross profit or (loss) from sales of inventory			-		
1 Other revenue:			1		}
a			 		
<u> </u>	$- \longmapsto$		 		
d	— 		┼	:	
e	— 		 		
2 Subtotal. Add columns (b), (d), and (e)		0.		0.	0.
3 Total. Add toldinins (b), (d), and (e)	<u> </u>		1 887	13	0
See worksheet in line 13 instructions to verify calculations	e)			"-	
				1 D	
Part XVI-B Relationship of Activitie	es to the Acco	mplishment of Ex	xemp	t Purposes	
Line No. Explain below how each activity for which			contrib	outed importantly to the accor	nplishment of
the foundation's exempt purposes (other t	han by providing fun	ds for such purposes).			
					
 		 -			
					
					<u></u>
					

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1	Did the	organization directly or indir	rectly engage in any	of the followin	g with any other organization	on described in secti	on 501(c) of	. '	Yes	No
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?									× .	,
a Transfers from the reporting foundation to a noncharitable exempt organization of:									أحريا الما	. * 4
(1) Cash										X
	(2) Ot	ther assets						1a(2)		X
þ	Other t	ransactions:						. 23	1 2 %	1
	(1) Sa	iles of assets to a noncharital	ble exempt organizat	เดก				1b(1)		X
	(2) Pt	urchases of assets from a noi	ncharitable exempt o	rganization			-	1b(2)		Х
	(3) Re	ental of facilities, equipment,	or other assets				-	1b(3)		X
		eimbursement arrangements					-	1b(4)		X
	• •	oans or loan guarantees						1b(5)		X
		erformance of services or me	•	=				1b(6)		X
		g of facilities, equipment, ma						_1c	لــــا	X
d		inswer to any of the above is							ets,	
		vices given by the reporting fo			ed less than fair market valu	ue in any transaction	or sharing arrangement, sh	iow in		
/a\		n (d) the value of the goods,			- 					
(a)∟ı	ne no	(b) Amount involved	(c) Name of		exempt organization	(d) Description	of transfers, transactions, and s	haring an	angeme	nts
				N/A			 			
										
					_					
		·								
										
						 				
			 		- 					
	\dashv		 			 				
			 				 _			
										
										
	-+					 				
<u> </u>	lo tho f	foundation directly or indirect	the off-linted with or a	cloted to one	or mare toy everent ereen	izations described				
2 a		foundation directly or indirect ion 501(c) of the Code (other	-			izations described	Γ-	Yes	Y] No
h		," complete the following sch		(3)) OF III SECT	1011 327 7			162	LAX	טאו ב
	11 165	(a) Name of org			(b) Type of organization		(c) Description of relationsh	ID.		
		N/A			(4) Type of organization	 	(0) = 00011 1011 01 1011 1011	·P		
—					<u> </u>	 				
						 				
						 				
_	Ur	nder penalties of perjury, I declare	that I have examined this	s return, includin	g accompanying schedules and	statements, and to the	best of my knowledge	the IRS	(ICOUSE)	bie
Sig	an lan	d belief, it is true, correct, and con	nplete Declaration of pro	eparer (other thai	n taxpayer) is based on all inforr	mation of which preparer	nas any knowledge retur	n with th	e prepar	er
He		antile			18-7-17	Prosic		Yes		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	{	Signature of officer or trustee			Date	Title				
		Print/Type preparer's na		Preparer's si		Date/ /	Check I if PTIN			
				0	λ.	1 1 1 1	self- employed			
Pa	id	SAM A. LAZ	ZARA	17x0-0	.// ///~	1/20/17	P01	342	929	
Pre	epare			IMER &	COMPANY, P.	A.I	Firm's EIN ► 59 - 30			
Us	e On		• -		14		1			
		Firm's address P.	O. BOX 1	72359			† 			
			MPA, FL 3				Phone no. (813)	875	-77	74
								rm 99 (

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

2016

Name of the organization

Employer identification number

	C.	ALVIN H. REED FAMILY FOUNDATION, INC.	26-36689 <u>2</u> 4
Organiz	ation type (check	one)	
Filers of	:	Section:	
Form 99	0 or 990-EZ	501(c)() (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a private foundation	
		527 political organization	
Form 99	0-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	,
	-	is covered by the General Rule or a Special Rule . c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special	Rule See instructions
General	Rule		
X		on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totally one contributor. Complete Parts I and II. See instructions for determining a contribution.	
Special	Rules		
	sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% supply and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 1 for, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount of the complete Parts I and II	6a, or 16b, and that received from
	year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received froutions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or excruelty to children or animals. Complete Parts I, II, and III	
	year, contribution is checked, enter purpose Don't co	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sexclusively for religious, charitable, etc., purposes, but no such contributions totaled here the total contributions that were received during the year for an exclusively religion properties any of the parts unless the General Rule applies to this organization because lie, etc., contributions totaling \$5,000 or more during the year	d more than \$1,000. If this box ous, charitable, etc ,
but it mu	ust answer "No" o	hat Isn't covered by the General Rule and/or the Special Rules doesn't file Schedule I in Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on it the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

Name of organization

Employer identification number

CALVIN	н.	REED	FAMILY	FOUNDATION,	INC.
CTTT A TTA			111111	I COMPATION,	T110 .

26-3668924

CITT V T	H. REED THILET TOURDHITON, THE		0 00000
Part I.	Contributors (See instructions) Use duplicate copies of Part I if a	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CALVIN H. REED 3301 BAYSHORE BLVD., UNIT 1706 TAMPA, FL 33629-8845	\$ 46,975.	Person X Payroll
(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 Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	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)
622462 10-1	2-16	Schedule B (Forn	n 990. 990-EZ. Of 990-PF1 (2016)

Employer identification number

CALVIN H. REED FAMILY FOUNDATION, INC.

26-3668924

Part II Nonc	ash 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
]		\$	
(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
- -			
		\\$	ļ
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate)	(d) Date received
Part I		(See instructions)	
3453 10-18-16		Schedule B (Form	990, 990-EZ, or 990-PF) (2

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

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

623454 10-18-16

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

3 Grants and Contributions Paid During the Ye	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	
CHURCH PLANTING INT.			TO SUPPORT THE	
			ORGANIZATION	150
CHURCH WORLD SERVICE			TO SUPPORT THE ORGANIZATION	15,400
CYSTIC FIBROSIS FOUNDATION			TO SUPPORT THE	
		 	ORGANIZATION	100
DISABLED AMERICAN VETERANS			TO SUPPORT THE ORGANIZATION	300
EASTER SEALS			TO SUPPORT THE	
			ORGANIZATION	100
FIRST PRESBYTERIAN CHURCH OF TAMPA			TO SUPPORT THE ORGANIZATION	8,734
FLORIDA COUNCIL ON ECONOMIC EDUCATION			TO SUPPORT THE	
			ORGANIZATION	500
FLORIDA ORCHESTRA			TO SUPPORT THE ORGANIZATION	300
H. LEE MOFFITT CANCER CENTER			TO SUPPORT THE	
			ORGANIZATION	300
HEARING LOSS ASSOC. OF AMERICA			TO SUPPORT THE ORGANIZATION	100
Total from continuation sheets				45,450

Part XV Supplementary Information				
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
HILLSBOROUGH EDUCATION FOUNDATION			TO SUPPORT THE	
			ORGANI ZATION	200.
LIFE PATH HOSPICE			TO SUPPORT THE	
	+	 	ORGANI ZATION	1,000.
MARCH OF DIMES			TO SUPPORT THE	
	-		ORGANIZATION	100.
MEMORIAL SLOAN KETTORING			TO SUPPORT THE	
	+		DRGANIZATION	1,000.
MERCY SHIPS			TO SUPPORT THE	
	 		ORGANI ZATION	200.
MET BROADCAST CAMPAIGN			TO SUPPORT THE ORGANIZATION	150.
			DROINT DITTON	
METRO MINISTRIES			TO SUPPORT THE ORGANIZATION	1,000
MOSI			TO SUPPORT THE ORGANIZATION	1,000,
MUSCULAR DYSTROPHY ASSOCIATION			TO SUPPORT THE	
MODECULAR DISTROPHI ASSOCIATION			ORGANIZATION	100.
NATIONAL MULTIPLE SCLEROSIS SOCIETY			TO SUPPORT THE	
			ORGANIZATION	100.
Total from continuation sheets				<u>i</u>

3 Grants and Contributions Paid During th				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		<u> </u>
PLAN INTERNATIONAL USA			TO SUPPORT THE	
			ORGANIZATION	896
SALVATION ARMY			TO SUPPORT THE ORGANIZATION	750
SELF RELIANCE, INC.			TO SUPPORT THE	1
			ORGANIZATION	520
SMILE TRAIN			TO SUPPORT THE	500
			ORGANIZATION	500
ST JOHNS LUTHERAN CHURCH			TO SUPPORT THE ORGANIZATION	100
STARTING RIGHT, NOW			TO SUPPORT THE	
			ORGANIZATION	1,000
STRAZ CENTER			TO SUPPORT THE ORGANIZATION	1,600
SUSTANY FOUNDATION			TO SUPPORT THE	
			ORGANIZATION	8,000
TAMPA LIGHTHOUSE			TO SUPPORT THE ORGANIZATION	500
THE METROPOLITAN OPERA GUILD			TO SUPPORT THE	
Total from continuation sheets			ORGANIZATION	250

Grants and Contributions Paid During the	Year (Continuation)				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount	
Name and address (home or business)	or substantial contributor	recipient	Contribution	Amount	
DU			TO SUPPORT THE ORGANIZATION	5	
					
				1	
			+		
					
				 	
				}	
Total from continuation sheets				ļ	

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	975.	0.		0.	
TO FORM 990-PF, PG 1, LN 16B	975.	0.		0.	
FORM 990-PF EXPLANATION CO	NCERNING PA	RT VII-A, LINE	E 8B S'	TATEMENT 2	

EXPLANATION

THERE IS NO REQUIREMENT IN FLORIDA THAT THE FOUNDATION FILE A COPY OF ITS FORM 990-PF WITH THE FLORIDA DEPARTMENT OF REVENUE OR THE FLORIDA ATTORNEY GENERAL.

	ST OF OFFICERS, D D FOUNDATION MANA		STATI	EMENT 3
NAME AND ADDRESS	TITLE AND AVRG HRS/WK			EXPENSE
CALVIN H. REED 3301 BAYSHORE BLVD. UNIT 1706 TAMPA, FL 336298845	PRESIDENT & DI 0.00	RECTOR 0.	0.	0.
DAVID H. REED 1210 S. DRUID LANE TAMPA, FL 33629	VICE PRESIDENT 0.00	, SECRETARY	0.	0.
KATHERINE CHASE REED 4003 W. MULLEN AVE. TAMPA, FL 33629	DIRECTOR 0.00	0.	0.	0.
CHRISTOPHER ALLABEN REED 2094 MCKINLEY RD. NW ATLANTA, GA 30318	DIRECTOR 0.00	0.	0.	0.
WENDY REED 3301 BAYSHORE BLVD. UNIT 1706 TAMPA, FL 336298845	DIRECTOR 0.00	0.	0.	0.

CALVIN H. REED FAMILY FOUNDATION, I	NC.		26-3	3668924
NEVA J. DELL 3301 BAYSHORE BLVD. UNIT 1706 TAMPA, FL 336298845	RECTOR 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PA	RT VIII	0.	0.	0.