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

OMB No 1545-0052

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.

Open to Public Inspection

For	calend	dar year 2016 or tax year beginning , a	and ending				
Ne	me of fou	undation		-	A Emplo	yer identification number	
	E m.	AD CUADINADIE ECONOMERCA:	~		~~	251524	
_		AR CHARITABLE FOUNDATION, INC d street (or P O box number if mail is not delivered to street address)				-3515213	
		PORTO VECCHIO WAY	l Ro	com/suite (none number (see instruction 3-855-0606	s)
		s, state or province, country, and ZIP or foreign postal code				3-833-0000	
_ P	ALM	BEACH GARDENS FL 33418		'	C If exer	nption application is pending,	check here
G	Check a	all that apply Initial return Initial return	rn of a former public cl	harity) 1. Fo	reign organizations, check he	are ►
		Final return Amended	return		2 . Fo	reign organizations meeting t	he
		Address change Name cha	inge			% test, check here and attach	
H	Check t	type of organization: X Section 501(c)(3) exempt private	foundation		E If priva	ste foundation status was terr	minated under
			le private foundation			n 507(b)(1)(A), check here	>
1 F	aır mar	ket value of all assets at J Accounting method	X Cash Acc	rual	If the f	oundation is in a 60-month te	rmination
е	nd of ye	ear (from Part II, col (c), Other (specify)			under	section 507(b)(1)(B), check h	nere 🕨 📘
	16)	▶ \$ 992,232 (Part I, column (d) must	be on cash basis)	<u> </u>			
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net investi	ment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	income		income	purposes
	1	Contributions, gifts, grants, etc., received (attach schedule)		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		(cash basis only)
	2	Check ► X if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	187		187		
	4	Dividends and interest from securities	15,422	15	,422	· · · · · · · · · · · · · · · · · · ·	
	5a	Gross rents					
d)	b	Net rental income or (loss)				····	
Ž	6a	Net gain or (loss) from sale of assets not on line 10	8,345				
Revenue	ь	Gross sales price for all assets on line 6a 345, 428					
Re	7	Capital gain net income (from Part IV, line 2)		8	,345		
_	8	Net short-term capital gain				0	
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	Ь	Less Cost of goods sold	·			······································	
	С	Gross profit or (loss) (attach schedule)				 	
	11	Other income (attach schedule)					
	12_	Total. Add lines 1 through 11	23,954		,954	0	
Ś	13	Compensation of officers, directors, trustees, etc	78,000	78	,000	_	
enses	14	Other employee salaries and wages			{	-	
bel	15	Pension plans, employee benefits			 		
_		Legal fees (attach schedule)	4 000				
ē	b	Accounting fees (attach schedule) Stmt 1	4,800	4	,800		<u> </u>
aţi	C	Other professional fees (attach schedule)	354		354		
str	17 18	Interest Taxes (attach schedule) (see instructions): D strict 2	20		20		
Ë	19	Depreciation (attach schedule) and depletion Stant 3	601		601		
ᄩ	20	Occupancy O	301			···-	
ĕ	21	Occupancy O 2017 Travel, conferences, and meetings					
5	22	- 1003 ·					
g	23	Other expenses (all sch)	11,591	11	,591	<u> </u>	
ij	24	Total operating and administrative expenses.	·	-			
ia		Add lines 13 through 23	95,366	95	,366	0	о
Operating and Administrative Ex	25	Contributions, gifts, grants paid	51,500				51,500
_	26	Total expenses and disbursements. Add lines 24 and 25	146,866	95	,366	0	51,500
	27	Subtract line 26 from line 12.					
	a	Excess of revenue over expenses and disbursements	-122,912				
	b	Net investment income (if negative, enter -0-)			0		
	<u> </u>	Adjusted net income (if negative, enter -0-)		<u> </u>		0	
For	Papen	work Reduction Act Notice, see instructions.					Form 990-PF (2016)

E	orm 990	PF (2016) BETMAR CHARITABLE FOUNDATION, INC	<u>. 38-3515213</u>	<u>} </u>	Page 2
	Part I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	
_	, 	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing	171,659	31,554	31,554
	2	Savings and temporary cash investments			
	3	Accounts receivable		i	
	١.	Less. allowance for doubtful accounts ▶			······································
	4	Pledges receivable >		Ì	
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see			
	i	instructions)			
	7	Other notes and loans receivable (att. schedule)		-	
		Less allowance for doubtful accounts ▶ 0			
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
⋖		Investments – U.S and state government obligations (attach schedule)			
	b	Investments – corporate stock (attach schedule) See Stmt 5	697,865	667,043	950,772
	C	Investments – corporate bonds (attach schedule)			•••••
	11	Investments – land, buildings, and equipment basis			
	4.0	Less accumulated depreciation (attach sch.)			
	12	Investments – mortgage loans	5 500		
	13	Investments – other (attach schedule) See Statement 6	7,500	7,500	7,500
	14	Land, buildings, and equipment basis ► 13, 968		2 424	
		Less accumulated depreciation (attach sch) ► Stmt 7 11,562	3,008	2,406	2,406
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers – see the			
	4-	instructions Also, see page 1, item I)	880,032	708,503	992,232
	17	Accounts payable and accrued expenses			
S	18	Grants payable			
Liabilities	19	Deferred revenue			
霓	20	Loans from officers, directors, trustees, and other disqualified persons			
2:	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe >)	0		
-	23	Total liabilities (add lines 17 through 22)		0	
Ś		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
ç	24				
a	24	Unrestricted Temporarily sections of			
Net Assets or Fund Balance	25 26	Temporarily restricted			
ק	26	Permanently restricted			
Ē		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
ö					
Ş	27	Capital stock, trust principal, or current funds			
SSe	28	Paid-in or capital surplus, or land, bldg , and equipment fund	990 033	709 503	
Ä	29	Retained earnings, accumulated income, endowment, or other funds	880,032	708,503	
Net	30	Total liebilities and not proceed found belonger (see	880,032	708,503	
	31	Total liabilities and net assets/fund balances (see	880,032	708,503	
***	Part I	instructions) Analysis of Changes in Net Assets or Fund Balances	880,032		
		net assets or fund balances at beginning of year – Part II, column (a), line 30 (mus	et agree with		
1		• • •	or agree with		880,032
-		f-year figure reported on prior year's return)		1 2	
_		amount from Part I, line 27a		2	-122,912
3		noreases not included in line 2 (itemize)		4	757,120
		nes 1, 2, and 3 eases not included in line 2 (itemize) ► See Statement 8		5	48,617
5 6		net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (t	n) line 30	6	708,503
~	rotal	net assets of rand balances at end of year time + minus line 5) - Part II, Column (t	7), alle 50	10	, , , , , , , , , , , ,

		CHARITABLE FOUNDATIO		38-3515213			Page
_P	art IV Capital Gains a	<u>nd Losses for Tax on Investmer</u>	t Income	······	• .		
		ribe the kind(s) of property sold (e.g., real estate, arehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P – Purchase D – Donation	(c) Date ac (mo , day		(d) Date sold (mo , day, yr)
1a	MORGAN STANLEY	VARIOUS ACCTS		P	Vario	us	Various
b	MORGAN STANLEY			P	Vario		Various
<u> </u>	MORGAN STANELY						
_d							
е	·						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		ost or other basis expense of sale			or (loss)) minus (g)
a	236,995			230,664			6,331
<u>b</u>	100,428			106,419			-5,991
С_	8,005						8,005
<u>d</u>							
е							
	Complete only for assets showin	g gain in column (h) and owned by the fou	ndation on 12	/31/69	(1) (Gains (Col	(h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	٠.	Excess of col (i) er col (j), if any			less than -0-) or om col (h))
а							6,331
<u>b</u>							-5,991
<u> </u>							8,005
<u>d</u>							
_е			<u></u> _				
3		apital loss) If gain, also enter in P If (loss), enter -0- in P ss) as defined in sections 1222(5) and (6) column (c) (see instructions) If (loss), er	art I, line 7 _)	2		8,345
	Part I, line 8			<u> </u>	3		
(For If se	optional use by domestic private option 4940(d)(2) applies, leave the foundation liable for the sec	tion 4942 tax on the distributable amount) tax on net in of any year in	vestment income)	me		Yes X No
If "Y	es," the foundation does not qua	lify under section 4940(e) Do not complet	e this part.				
1_	<u></u>	each column for each year, see the instru	tions before r	naking any entries.			
	(a) Base period years Calendar year (or tax year beginning in	·		(c) value of noncharitable-use assets			(d) ribution ratio divided by col (c))
	2015	73,		1,225,9			0.06015
	2014		546	1,151,			0.069932
	2013		726	1,309,			0.060900
	2012		536	377,9			0.213094
	2011		922	365,4	172	 	0.24330
	Total of line 1, column (d)	e h	- 0 b 5 . a. b.	. 41	2		0.647389
	•	5-year base period – divide the total on lin has been in existence if less than 5 years	e ∠ by 5, or by	, uie	3		0.129478
4	Enter the net value of noncharita	ble-use assets for 2016 from Part X, line 5	i		4		967,591
5	Multiply line 4 by line 3				5_		125,282

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

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125,282

51,500

6

7

7 Add lines 5 and 6

Part VI instructions

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

8 Enter qualifying distributions from Part XII, line 4

11111111	990-PF (2016) BETMAR CHARITABLE FOUNDATION, INC. 38-3515213		_	Р	age 4
_	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see Instructions)		-		
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1				
	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 ▶				
С	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-)				0
3 4	Add lines 1 and 2 Subtitle A (magne) toy (demostra control 4047(a)(4) trusts and toyable foundations only. Others and a		·		0
5	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- 5			•	-
6	Credits/Payments				
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 886				
b	Exempt foreign organizations – tax withheld at source				
C	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d				886
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				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10				886
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ 886 Refunded ▶ 11				
Pa	rt VII-A Statements Regarding Activities	_			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in 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		<u> </u>
	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				
C	Did the foundation file Form 1120-POL for this year?	ļ	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers 🕨 \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	ļ	2		X
	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	ŀ	_3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	[/A	4a		
ь 5	If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year?	''	4b 5		x
5	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?		6	X	*
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	Ī	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	None		- 1		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		- 1		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	İ	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 year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"				
	complete Part XIV	ļ	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	1			
	names and addresses		10		<u> </u>
		Fo	orm 99	W-Pf	(2016)

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	1 990-PF (2016) BETMAR CHAR			3515213			<u>P</u>	age 6
_		ding Activities for Which Forn	1 4720 May Be R	<u>Required (cont</u>	inued)			
Эđ	During the year did the foundation pay	•	- 4045(-))0	г.	V			
		attempt to influence legislation (section		<u> </u>	es X No			
	directly or indirectly, any voter regi	afic public election (see section 4955), o	or to carry on,	\Box	res X No			
	• • • • •	travel, study, or other similar purposes'	2		res X No res X No			
	=	other than a charitable, etc , organization		<u>.</u>	63 22 140			
	section 4945(d)(4)(A)? (see instruc	· · · · · · · · · · · · · · · · · · ·	ni described in		res X No			
		religious, charitable, scientific, literary,	or educational	L.J '	10			
	purposes, or for the prevention of o		or caddational	\Box	′es X No			
b	If any answer is "Yes" to 5a(1)–(5), did	-	nder the exceptions d		C3 [25] NO			
_		rrent notice regarding disaster assistant			N/A	5b		
		ce regarding disaster assistance check				- 1	-+	
c	If the answer is "Yes" to question 5a(4)	• •						
	because it maintained expenditure resp	· ·		N/A 🗍	∕es			
	If "Yes," attach the statement required	•						
6a	Did the foundation, during the year, red	• •	pay premiums			1		
	on a personal benefit contract?		· ·		′es 🗓 No			
b	Did the foundation, during the year, pa	y premiums, directly or indirectly, on a p	ersonal benefit contr	ract?		6ь	į	X
	If "Yes" to 6b, file Form 8870.	· · · · · · · · · · · · · · · · · · ·						
7a	At any time during the tax year, was the	e foundation a party to a prohibited tax	shelter transaction?		res 🗓 No			
b	If "Yes," did the foundation receive any	proceeds or have any net income attrib	outable to the transac	ction?	N/A	7b		
Pŧ	art VIII Information About C	Officers, Directors, Trustees, F	oundation Man	agers, Highly	Paid Employe	es,		
	and Contractors				·			
<u>1 L</u>	ist all officers, directors, trustees, for	undation managers and their compe	nsation (see instruc	tions).				
			(b) Title, and average	(c) Compensation	(d) Contributions to	4-3 500		
	(a) Name and	d address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred		ense ac allowar	
			devoted to position		compensation			
AI	LAN JACOBS	PALM BEACH GARDENS	DIR, PRES, &					
14	8 PORTO VECCHIO WAY	FL 33418	13.00	39,000	0			0
	OUGLAS SHIFFMAN	FARMINGTON HILLS	DIR, VP & TR	,				
	920 APPLE BLOSSOM LANE	MI 48331	13.00	39,000	0	_		0
	LDIE JACOBS	WEST BLOOMFIELD	DIRECTOR	_	_			
_57	34 TEMPLAR CROSSING	MI 48322	0.00		0			0
	Componentian of five highest paid of	maleyasa (ether then these includes	l on line 1 – see ins	tructions) If non	o ontor	L		
~	Compensation of five highest-paid e "NONE."	สมอังเลียน เกลา เกลา เกอร์ เกิดเนิดเลี้	. V., 11110 1 - 300 1113	a doublisj. II 11011	c, singi			
					(d) Contributions to			
	(a) Name and address of each employe	e paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit		ense ac	
	1-,		devoted to position	[` '	plans and deferred compensation	otner	allowar	1ces
NC.	ONE				· · · · · · · · · · · · · · · · · · ·			
_								
						<u> </u>		
]]				
Ota	I number of other employees paid over \$	\$50,000			>	L		0
					Fo	orm 99	0-PF	(2016)

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Part VIII	and Contractors (continued)	iation Managers, Highly Paid E	mpioyees,
3 Five high	est-paid independent contractors for professional services (see instru	uctions). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
			
Total number of	others receiving over \$50,000 for professional services		D
Part IX-A	Summary of Direct Charitable Activities		
	s four largest direct charitable activities during the tax year. Include relevant statistical information of the beneficiaries served, conferences convened, research papers produced, etc.	such as the number of	Expenses
1 N/A			
2			
			}
3			
			·
4			
			<u> </u>
Part IX-B	Summary of Program-Related Investments (see instru	ictions)	
Describe the two la	rgest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2			
•			
All other program-re	elated investments. See instructions		
3			
Total. Add lines	1 through 3	•	

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51,500

3a 3b

4

Suitability test (prior IRS approval required)

Enter 1% of Part I, line 27b (see instructions)

Cash distribution test (attach the required schedule)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Form	990-PF (2016) BETMAR CHARITABL	E FOUND	ATION, INC	c. 38-3 <u>515</u> 2	213	Page 9
THEFT	rt XIII Undistributed Income (see in					· · · · · · · · · · · · · · · · · · ·
*********			(a)	(b)	(c)	(d)
1	Distributable amount for 2016 from Part XI,	<u> </u>	Corpus	Years prior to 2015	2015	2016
	line 7	ļ.				48,380
2	Undistributed income, if any, as of the end of 2016	3				
	Enter amount for 2015 only	-	·			
b	Total for prior years 20 , 20 , 20	— ⊦				
3	Excess distributions carryover, if any, to 2016					
	From 2011	71,178				
b	From 2012	61,639				
С	From 2013	14,269				
_	From 2014	22,958				
	From 2015	12,451	102 40	_		
_	Total of lines 3a through e	-	182,49	3		
4	Qualifying distributions for 2016 from Part XII,					
	line 4 > \$ 51,500					
	Applied to 2015, but not more than line 2a	ŀ	······································			
D	Applied to undistributed income of prior years					
_	(Election required – see instructions)	-				
С	Treated as distributions out of corpus (Election required – see instructions)					
	,	ŀ				48,380
	Applied to 2016 distributable amount Remaining amount distributed out of corpus	Ì	3,12	0		
	Excess distributions carryover applied to 2016	T T	<u></u>			
5	(If an amount appears in column (d), the same	ļ				
	amount must be shown in column (a).)					
6	Enter the net total of each column as					
U	indicated below:					
9	Corpus Add lines 3f, 4c, and 4e. Subtract line 5		185,61	.5		
	Prior years' undistributed income. Subtract	Ī				
-	line 4b from line 2b					
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					
е	Undistributed income for 2015 Subtract line					
	4a from line 2a Taxable amount – see					
	instructions	ļ				
f	Undistributed income for 2016 Subtract lines					
	4d and 5 from line 1. This amount must be					
	distributed in 2017					0
7	Amounts treated as distributions out of corpus					
	to satisfy requirements imposed by section					
	170(b)(1)(F) or 4942(g)(3) (Election may be					
	required—see instructions)					
8	Excess distributions carryover from 2011 not		64 45	70		
	applied on line 5 or line 7 (see instructions)		71,17	/ 0		
9	Excess distributions carryover to 2017.		444 44	7		
	Subtract lines 7 and 8 from line 6a		114,43	2 /		
10	Analysis of line 9:	ca coo				
а	Excess from 2012	61,639				
b	Excess from 2013	14,269				
c	Excess from 2014	22,958				
d	Excess from 2015	12,451				
θ	Excess from 2016	3,120	<u> </u>	<u>t</u>	.1	000 DE

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P	urt XIV Private Operating For				9)	
1a	If the foundation has received a ruling or			iting		
	foundation, and the ruling is effective for		•			
þ	Check box to indicate whether the found		ating foundation descr		942(j)(3) or 4942	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
	investment return from Part X for					
	each year listed		ļ	<u> </u>		
b	85% of line 2a		<u> </u>	<u> </u>		
С	Qualifying distributions from Part XII,					
	line 4 for each year listed		ļ	ļ <u></u>	ļ 	
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities		ļ	<u> </u>	<u> </u>	
8	Qualifying distributions made directly					
	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test – enter					
	(1) Value of all assets		<u> </u>			
	(2) Value of assets qualifying under				i	
_	section 4942(j)(3)(B)(i)		·			
b	"Endowment" alternative test – enter 2/3					
	of minimum investment return shown in		Ĭ		[
	Part X, line 6 for each year listed		ļ	 		
С	"Support" alternative test – enter					
	(1) Total support other than gross investment income (interest,					
	dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii) (3) Largest amount of support from	 -				-
	an exempt organization					
	(4) Gross investment income					
Pa	irt XV Supplementary Inform	nation (Complet	e this part only if	the foundation h	ad \$5,000 or more	in assets at
	any time during the ye					
1	Information Regarding Foundation Ma	nagers:				
а	List any managers of the foundation who	have contributed mo	re than 2% of the total	contributions received	by the foundation	
	before the close of any tax year (but only	if they have contribu	ted more than \$5,000).	. (See section 507(d)(2	?))	
	NONE			<u></u>		
b	List any managers of the foundation who				e portion of the	
	ownership of a partnership or other entity) of which the founda	tion has a 10% or grea	ater interest		
	NONE		L. L. Line de Bresse			
2	Information Regarding Contribution, C				dtt	
			•	ble organizations and		
	unsolicited requests for funds If the foun	· -	rants, etc. (see instruc	tions) to individuals or	organizations under	
	other conditions, complete items 2a, b, c The name, address, and telephone numb	·	of the person to whom	applications should b	a addressed	
а	ALLAN JACOBS 248-855		of the person to whom	applications should b	e audiesseu	
	148 PORTO VEECCHIO V		ACH CARDENS	FT. 33418		
	The form in which applications should be					
_	APPLICATION SHOULD E			,		
c	Any submission deadlines:					
	NONE	<u></u>			· · · · · · · · · · · · · · · · · · ·	
d	Any restrictions or limitations on awards,	such as by geograph	ncal areas, charitable f	ields, kinds of institution	ons, or other	
	factors					
	NO AWARDS WILL BE MA	DE IN EXCE	SS OF \$20,0	000		

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Statement 9 51,500 51,500 ▶ 3a b Approved for future payment N/A ▶ 3b Total

Part XVI-A	Analysis of Income-Producing Act	vities				
Enter gross an	ounts unless otherwise indicated		ad business income	Exclude	d by section 512, 513, or 514	
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
	ervice revenue					(See instructions)
а b				 		<u></u>
d						
f						
g Feesa	nd contracts from government agencies					
2 Membersh	p dues and assessments					
	savings and temporary cash investments			14	187	
	and interest from securities			14	15,422	
	ncome or (loss) from real estate.					
	nanced property			 		
	ot-financed property ncome or (loss) from personal property			 		
7 Other inves				1		
	ss) from sales of assets other than inventory			18	8,345	
	e or (loss) from special events			 		
	t or (loss) from sales of inventory					
	nue a					
_						
е						
12 Subtotal. A	dd columns (b), (d), and (e)) <u></u>	23,954	0
	line 12, columns (b), (d), and (e)				13	23,954
	t in line 13 instructions to verify calculations)	11.1	4 - 4 5			
Part XVI-E	 					
Line No. ▼	Explain below how each activity for which income accomplishment of the foundation's exempt purpo					
N/A	accomplishment of the realization of exempt purpo	See (Guiler tilai	i by providing lando it	», очо <u>л.</u> р.	npoodoj (odo men <u>do</u> n	<u> </u>
		-				
						
						······································
						
						·
						

<u> </u>	930-11	(2010)				I COMDII	1 1 0 11 /	<u> </u>		<u> </u>		
Pa	nt XVII	` In	formation	Regarding	Transfe	rs To and	Transac	tions and	Rela	tionships With	Noncharitable	e e
		E	xempt Orga	anizations								
4	Did the											-

ì		anization directly or ind 01(c) of the Code (others		-					Yes	No
	•	om the reporting found	lation to a no	ncharitable exemr	ot organization o	. f				
	(1) Cash	on the reporting round		monarkable exemp	or organization o			1a(1	اد	x
	(2) Other a	ssets						1a(2		X
b (Other transa	actions								
((1) Sales of	f assets to a noncharit	able exempt	organization				1b(1	<u>) </u>	X
		ses of assets from a no		. •	on			1b(2)	X
((3) Rental of	of facilities, equipment,	or other ass	ets				1b(3	4	<u>X</u>
((4) Reimbu	rsement arrangements	3					1b(4	4	X
		r loan guarantees						1b(5	1	X
		ance of services or mo	=	-				1b(6	4	X
	-	acilities, equipment, m	=	· = '				<u>1c</u>		<u>X</u>
		r to any of the above i								
		goods, other assets, o	-	-	_					
	<u>/alue in any</u> Line no	transaction or sharing		of noncharitable exemp				Ses received nsactions, and sharing arranger	nonto	
$\frac{\sqrt{a}}{N/A}$		(b) Amount involved	(c) Name	or noncharitable exemp	pt organization	(a) Description	on of transfers, trai	nsactions, and snaring arranger	ients	
<u>11/ A</u>	<u> </u>							 -		
							 -			
						·			-	—
										
				·-·-						
	·									
				<u> </u>						
							·			
(described in	ation directly or indirectly or indirectly or section 501(c) of the inplete the following sc	Code (other t				ns		Yes X	No
		n Name of organization	rieddie	(b) Type of o	rganization		(c) Descripti	ion of relationship		
N	/A	a rano or organization		(5) 1) po 6. 6	garnzation		(4) 5 5 5 5 7 7	- Control of the cont		
	/ • •									
							·	·		
	Under per	nalties of perjury, I declare th	at I have examin	ed this return, including	g accompanying sch	edules and statements, an	id to the best of m	ny knowledge and belief, it is tr	ие,	
	солесі, а	nd complete Declaration of p	oreparer (other ti	nan taxpayer) is based	on all information of	which preparer has any kr	Iowiedge	May the IRS discuss this		
Sign			//					with the preparer shown (see instructions)?	below Yes	¬ No I
Here		2/10				// .		(see trandcodis)?	108	
	x/2	W Dill	h/		5/	1/201	DIR,	PRES, & SEC	,	
	Signi	thurs of officer or thus les			Date	/ · /	Title			
	Print/Ty	pe preparer's name			Preparer's signatu	re		Date	Check	. I if
Paid		_			1142_					nployed
Prepa	IVAN							04/22/1		
Use Q	niv Firm's n			ssociates				PTIN P0015		
	Firm's a			western I			-	Firm's EIN ► 38-24		
		Farmi	ngton	Hills, M	1 48334		<u></u> .L	Phone no 248-8	990-PF	
								Form 3	. JU-F	(∠016)

383515213 BETMAR CHARITABLE FOUNDATION, INC.
Pederal Statements

38-3515213 FYE: 12/31/2016

Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description		Total	vul	Net Investment	Adjusted Net	77	Charitable Purpose
Indirect Accounting Fees	م	4,800	জ	4,800	&		\$
Total	 φ	4,800	ဟ	4,800	S	0	٠ \$
	Statement	nt 2 - Form 990-PF, Part I, Line 18 - Taxes	-PF, Part	I, Line 18 - T	axes		

Charitable Purpose	\$	\$
Adjusted Net	\$	8
Net Investment	20	20
Inve	ς, V	v,
Total	20	20
Ë	ς	တ
Description	Indirect Taxes/Licenses	Total

\$ 20 \$ 0 \$ 0	; Part I, Line 19 - Depreciation
Total \$	Statement 3 - Form 990-PF

	Adjusted Net		
	Net Investment		
	Current Year Depreciation	100000	
	 	 - -	
	Method	50	
101	Prior Year Depreciation		
nescubilo	Cost Basis	200	
	Date	ייסק מווי סק	

Date Acquired	Cost Basis	Prior Year Depreciation	Method	Life	Current Year Depreciation	Net Investment Income	Adjusted Ne
APPLE COMPUTER							
1/01/07 \$	2,463 \$	5 2,463	S/L	Ŋ	Ŷ	S	\$
APPLE COMPUTER							
4/05/10	006	006	S/L	5			
APPLE COMPUTER							
10/25/13	1,849	744	S/L	Ŋ	221	221	
APPLE COMPUTER							
9/24/13	3,304	1,401	S/L	Ŋ	380	380	
APPLE COMPUTER							
1/01/07	5,452	5,452	S/L	5			
Total \$	13,968 \$				\$ 601	\$ 601	\$

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383515213 BETMAR CHARITABLE FOUNDATION, INC. 38-3515213 FYE: 12/31/2016

	Charitable Purpose	\$		\$
Expenses	Adjusted Net	৵		\$
4 - Form 990-PF, Part I, Line 23 - Other Expenses	Net Investment	∽	11,591	\$ 11,591
	Total	\$	11, 591	\$ 11,591
Statement	Description		Expenses FINANCIAL FEES	Total

Beginning of Year Description End of Scription End of Year Year Scription End of Year Year Valuation Fair Market Value \$ 697,865 \$ 667,043 Cost \$ 950,772 Total \$ 697,865 \$ 667,043 \$ 950,772								
\$ 697,865 \$ 667,043 Cost \$ \$ 667,043 \$ \$	Description	"	Beginning of Year		End of Year	Basis of Valuation	ш	air Market Value
\$ 697,865 \$ 667,043		φ	697,865	တ	667,043	Cost	\$	950,772
	tal	₩.	697,865	φ.	667,043		တ	950,772

	Fair Market Value	\$ 7,500	\$ 7,500
ments	Basis of Valuation	Cost	
990-PF, Part II, Line 13 - Other Investmer	End of Year	7,500	7,500
Line 13		ψ	S.
0-PF, Part II,	Beginning of Year	7,500	7,500
- Form	Be	\$	S
Statement 6	Description		Total
			Tot

	Net FMV	\$ 2,406	\$ 2,406
		٠.	٧,
ment	End Accumulated Depreciation	11,562	11,562
1, and Equipmen	End	S	w
ıd, Building, a	End ost / Basis	13,968	13,968
4 - Lan	ပိ	တ	ss.
, Part II, Line 14 - Land, Building	eginning let Book	3,008	3,008
1 990-PF	ŭΖ	တ	တ
Statement 7 - Form 990	Description		Total

383515213 BETMAR CHARITABLE FOUNDATION, INC. 38-3515213 Federal Statements

38-3515213

FYE: 12/31/2016

Description	Amount
BROKERAGE BALANCE ADJUSTMENT	\$ 48,617
Total	\$ 48,617
Form 990-PF, Part XV, Line 1a - Managers V	Vho Contributed Over 2% or \$5,000
Name of Manager	Amount
NONE	\$
Total	\$0
Form 990-PF, Part XV, Line 1b - Manage	rs Who Own 10% or More Stock
Name of Manager	Amount
NONE	\$
Total	\$0
Form 990-PF, Part XV, Line 2b - Application	on Format and Required Contents
Description	
APPLICATION SHOULD BE MADE BY MAIL	
Form 990-PF, Part XV, Line 2c -	Submission Deadlines
Description	
NONE	
Form 990-PF, Part XV, Line 2d - Awai	rd Restrictions or Limitations

Description

NO AWARDS WILL BE MADE IN EXCESS OF \$20,000

383515213 BETMAR CHARITABLE FOUNDATION, INC. 38-3515213 FYE: 12/31/2016

Statement 9 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Name	Address			
Address	Relationship Status	sn	Purpose	Amount
AMERICAN CANCER SOCIETY LANSING MI 48909 NONE	PO BOX 30280	CHARITY	RESEARCH	500
	6735 TELEGRAPH		130))
BLOOMFIELD MI 48301 NONE	PUB	CHARITY	EDUCATION	1,000
CORNERSTONE SCHOOLS	12723 TELEGRAPH ROAD	OAD #1		•
REDFORD MI 48239 NONE	PUB	CHARITY	EDUCATION	2,300
DENTAL VOLUNTEERS FOR ISRAEL	1640 EAST 2nd ST	ST STE 200		
78702	PUB	CHARITY	COMMUNITY ASSISTANCE	1,000
TV WTVS STUDIOS	7441 SECONI			
DETROIT MI 48202 NONE	,	ARITY	PUBLIC TELEVISION	250
IICHIGA	20300 CIVIC	R DR		
SOUTHFIELD MI 48033 NONE		ARITY	RESEARCH	200
	6892 WEST MAPL	Q.		
WEST BLOOMFIELD MI 48322 NONE	PUB	CHARITY	COMMUNITY ASSISTANCE	7,000
VERSITY	5353 PARKSIDE	Э Э		
JUNIPER FL 33458 NONE	PUB	CHARITY	EDUCATIOIN	1,000
HADASSAH OF GREATER DETROIT	5030 ORCHARD LAKE RD.	RD.		
WEST BLOOMFIELD MI 48323 NONE	PUB	CHARITY	COMMUNITY ASSISTANCE	3,000
HOLOCAUST MEMORIAL CENTER	28123 ORCHARD LAKE	E ROAD		
FARMINGTON HILLS MI 48334 NONE	PUB	CHARITY	COMMUNITY ASSISTANCE	500
INTERNATION RETT SYNDRONE FOUNDATIO	O 4600 DEVITT DRIVE			
CINCINNATI OH 45246 NONE	PUB	CHARITY	RESEARCH	500
JANICE CHARACH EPSTEIN GALLERY	6600 W. MAPLE DRIVE	VE		
WEST BLOOMFIELD MI 48322 NONE		CHARITY	EDUCATION	250
JARC	30301 NORTHWESTERN HWY	N HWY		
FARMINGTON HILLS MI 48334 NONE		ARITY	COMMUNITY ASSISTANCE	1,800
JEWISH FAMILY SERVICE MENTOR PROGRA	6555 WEST N	OAD		
WEST BLOOMFIELD MI 48322 NONE	PUB CHARITY	ARITY	COMMUNITY ASSISTANCE	200
JEWISTH FED OF METRO DETROIT	6735 TELEGRAPH RD			
BLOOMFIELD HILLS MI 48303 NONE	PUB	CHARITY	CHARITABLE	4,900
JEWISH HOSPICE & CHAPLANCY NETWORK	6555 WEST MAPL			•
WEST BLOOMFIELD MI 48322 NONE	PUB	CHIARTY	CHARITABLE	200
KRAVIS CENTER FOR THE PERF ARTS	701 OKEECHOBEE BL	BLVD		
WEST BLOOMFIELD MI 48322 NONE	PUB	CHARITY	CHARITABLE	1,000

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383515213 BETMAR CHARITABLE FOUNDATION, INC. 38-3515213 FYE: 12/31/2016

Statement 9 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name		Address	ress			
Address	Relationsh	di	Status		Purpose	Amount
MI JEWISH SPORTS FOUNDATION	29425	NORTHWE	NORTHWESTERN HWY			
FARMINGTON HILLS MI 48334 NONE	NE	PUI	PUB CHARITY	EDUCATION		1,950
MICHIGAN STATE UNIVERSITY HILLEL		360 CHARLES STREET	TREET			
EAST LANSING MI 48823 NONE	NE	PU	PUB CHARITY	COMMUNITY	COMMUNITY ASSISTANCE	500
TEMPLE ISRAEL	5725	WALNUT I	WALNUT LAKE ROAD			
WEST BLOOMFIELD MI 48323 NONE	NE	PU]	PUB CHARITY	COMMUNITY	COMMUNITY ASSISTANCE	15,050
UNIVERSITY OF MICHIGAN	3003	S STATE STREET	STREET			
ANN ARBOR MI 48109 NONE	NE	PU]	PUB CHARITY	EDUCATION		7,000
UNIV OF MI - HILLEL MANDEL BERMAN	1429	HILL STREET	KEET			
ANN ARBOR MI 48104 NO	NONE	PU	PUB CHARITY	COMMUNITY	COMMUNITY ASSISTANCE	500
Total						51,500