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or Section 4947(a)(1) Trust Treated as Private Foundation  
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| Information about Form 990-PF and its separate instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

For calendar year 2016 or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

Name of foundation <b>PAUL AND JILL KANE FAMILY CHARITABLE FOUNDATION</b>		A Employer identification number <b>59-3214005</b>			
Number and street (or P O box number if mail is not delivered to street address) <b>GEORGE E. WARREN CORP, 3001 OCEAN DRIVE</b>		Room/suite <b>203</b>			
City or town, state or province, country, and ZIP or foreign postal code <b>VERO BEACH, FL 32963-1992</b>		C If exemption application is pending, check here ► <input type="checkbox"/>			
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change		D 1. Foreign organizations, check here ► <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/>			
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/>			
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ <b>3,480,076</b>	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/>			
<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	<b>500,026.</b>		<b>N/A</b>	
	2 Check ► <input type="checkbox"/> if the foundation is not required to attach Sch B Interest on savings and temporary cash investments				
	3				
	4 Dividends and interest from securities	<b>36,409.</b>	<b>36,409.</b>		<b>STATEMENT 1</b>
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a	<b>1,734,811.</b>			
	7 Capital gain net income (from Part IV, line 2)		<b>208,124.</b>		
	8 Net short-term capital gain		<b>208,124.</b>		
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
c Gross profit or (loss)					
11 Other income	<b>11</b>	APR 17 2017			
12 Total Add lines 1 through 11	<b>10</b>		<b>744,559.</b>	<b>244,533.</b>	
13 Compensation of officers, directors, trustees, etc.		<b>0.</b>	<b>0.</b>	<b>0.</b>	
14 Other employee salaries and wages					
15 Pension plans, employee benefits					
16a Legal fees					
b Accounting fees	STMT 2	<b>5,000.</b>	<b>1,500.</b>	<b>3,500.</b>	
c Other professional fees	STMT 3	<b>9,367.</b>	<b>9,367.</b>	<b>0.</b>	
17 Interest					
18 Taxes	STMT 4	<b>876.</b>	<b>876.</b>	<b>0.</b>	
19 Depreciation and depletion					
20 Occupancy					
21 Travel, conferences, and meetings					
22 Printing and publications					
23 Other expenses	STMT 5	<b>70.</b>	<b>35.</b>	<b>35.</b>	
24 Total operating and administrative expenses. Add lines 13 through 23		<b>15,313.</b>	<b>11,778.</b>	<b>3,535.</b>	
25 Contributions, gifts, grants paid		<b>154,350.</b>		<b>154,350.</b>	
26 Total expenses and disbursements Add lines 24 and 25		<b>169,663.</b>	<b>11,778.</b>	<b>157,885.</b>	
27 Subtract line 26 from line 12		<b>574,896.</b>			
a Excess of revenue over expenses and disbursements					
b Net investment income (if negative, enter -0-)		<b>232,755.</b>			
c Adjusted net income (if negative, enter -0-)			<b>N/A</b>		

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 Cash - non-interest-bearing				
	2 Savings and temporary cash investments		249,729.	1,081,143.	1,081,143.
	3 Accounts receivable ►				
	Less allowance for doubtful accounts ►				
	4 Pledges receivable ►				
	Less allowance for doubtful accounts ►				
	5 Grants receivable				
	6 Receivables due from officers, directors, trustees, and other disqualified persons				
	7 Other notes and loans receivable ►				
	Less allowance for doubtful accounts ►				
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges				
	10a Investments - U.S. and state government obligations				
	b Investments - corporate stock				
	c Investments - corporate bonds				
	11 Investments - land, buildings and equipment basis ►				
	Less accumulated depreciation ►				
	12 Investments - mortgage loans				
	13 Investments - other	STMT 7	2,353,450.	1,967,461.	2,398,933.
	14 Land, buildings, and equipment basis ►				
	Less accumulated depreciation ►				
	15 Other assets (describe ► )				
	16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		2,603,179.	3,048,604.	3,480,076.
	17 Accounts payable and accrued expenses				
	18 Grants payable				
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable				
	22 Other liabilities (describe ► )				
	23 Total liabilities (add lines 17 through 22)		0.	0.	
	Foundations that follow SFAS 117, check here ► <input type="checkbox"/>				
	and complete lines 24 through 26 and lines 30 and 31.				
	24 Unrestricted				
	25 Temporarily restricted				
	26 Permanently restricted				
	Foundations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/>				
	and complete lines 27 through 31.				
	27 Capital stock, trust principal, or current funds		1,571,141.	2,071,167.	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund		0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds		1,032,038.	977,437.	
	30 Total net assets or fund balances		2,603,179.	3,048,604.	
	31 Total liabilities and net assets/fund balances		2,603,179.	3,048,604.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	2,603,179.
2 Enter amount from Part I, line 27a	2	574,896.
3 Other increases not included in line 2 (itemize) ►	3	0.
4 Add lines 1, 2, and 3	4	3,178,075.
5 Decreases not included in line 2 (itemize) ►	5	129,471.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	3,048,604.

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**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a					
b	SEE ATTACHED STATEMENT				
c					
d					
e					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a					
b					
c					
d					
e	1,734,811.		1,526,687.	208,124.	
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		
a					
b					
c					
d					
e				208,124.	
2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2	208,124.
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8	{ }		3	N/A

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

Yes  No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	150,735.	2,993,812.	.050349
2014	161,073.	3,130,816.	.051448
2013	114,813.	2,509,917.	.045744
2012	93,280.	1,726,304.	.054035
2011	474,060.	1,543,790.	.307075

2 Total of line 1, column (d)

2 .508651

3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years

3 .101730

4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5

4 3,202,769.

5 Multiply line 4 by line 3

5 325,818.

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

6 2,328.

7 Add lines 5 and 6

7 328,146.

8 Enter qualifying distributions from Part XII, line 4

8 157,885.

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

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**Part VI 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 ► <input type="checkbox"/> and enter "N/A" on line 1	(attach copy of letter if necessary-see instructions)	1	4,655.
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input type="checkbox"/> and enter 1% of Part I, line 27b		2	0.
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		3	4,655.
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0.
3	Add lines 1 and 2		5	4,655.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3 If zero or less, enter -0-			
6	<b>Credits/Payments</b>			
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	12,792.	
b	Exempt foreign organizations - tax withheld at source	6b		
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	7	12,792.	
8	Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8		
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	8,137.	
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ►	11		0.

**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?	Yes	No
1b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	X	
1c	Did the foundation file Form 1120-POL for this year?	X	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ► \$ 0. (2) On foundation managers ► \$ 0.		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ 0.		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>	X	
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? <i>If "Yes," attach a conformed copy of the changes</i>	X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	X	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>	X	
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?	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV</i>	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ► <u>MA</u>		
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? <i>If "No," attach explanation</i>	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)? <i>If "Yes," complete Part XIV</i>	X	
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	X	

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

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)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
11			X
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)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
12			X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
13			X
14	The books are in care of ► PAUL D. KANE, SR. Located at ► GEORGE E. WARREN CORP, 3001 OCEAN DRIVE, VERO BEA	Telephone no ► 772-778-7140 ZIP+4 ► 32963-1992	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year	► 15	N/A
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
16			X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
1a	During the year did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here	N/A	►
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016?	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? If "Yes," list the years ►	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions)	N/A	2b
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ►		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016)	N/A	3b
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	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	X

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**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

<b>5a</b> 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))?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?			N/A	5b
Organizations relying on a current notice regarding disaster assistance check here			<input type="checkbox"/>	
<b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?			N/A	
<i>If "Yes," attach the statement required by Regulations section 53.4945-5(d)</i>			<input type="checkbox"/>	Yes
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			<input type="checkbox"/>	Yes
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			<input checked="" type="checkbox"/>	No
<i>If "Yes" to 6b, file Form 8870</i>				
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?			<input type="checkbox"/>	Yes
<b>b</b> If "Yes" did the foundation receive any proceeds or have any net income attributable to the transaction?			<input type="checkbox"/>	No
			N/A	7b

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

**1. List all officers, directors, trustees, foundation managers and their compensation.**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
PAUL D. KANE, SR	TRUSTEE	0.	0.	0.
111 STINGAREE POINT-JOHN'S ISLAND				
VERO BEACH, FL 32963-3835				
JILL M. KANE, SR	TRUSTEE	0.	0.	0.
111 STINGAREE POINT-JOHN'S ISLAND				
VERO BEACH, FL 32963-3835	0.25	0.	0.	0.

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

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

**Total number of other employees paid over \$50,000**

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

**3 Five highest-paid independent contractors for professional services. 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**



0

**Part IX-A** **Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc

Expenses

1	N/A	
2		
3		
4		

**Part IX-B** **Summary of Program-Related Investments**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

Amount

1	NONE	
2		0.

All other program-related investments. See instructions

3		

**Total. Add lines 1 through 3**



0.

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**Part X Minimum Investment Return** (All domestic foundations must complete this part. 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	2,336,602.
b Average of monthly cash balances	1b	914,940.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	3,251,542.
e 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	3,251,542.
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	48,773.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,202,769.
6 Minimum investment return. Enter 5% of line 5	6	160,138.

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

1 Minimum investment return from Part X, line 6	1	160,138.
2a Tax on investment income for 2016 from Part VI, line 5	2a	4,655.
b Income tax for 2016 (This does not include the tax from Part VI )	2b	
c Add lines 2a and 2b	2c	4,655.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	155,483.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	155,483.
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	155,483.

**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	157,885.
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		
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	157,885.
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	157,885.

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Form 990-PF (2016)

PAUL AND JILL KANEK FAMILY CHARITABLE  
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**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				155,483.
2 Undistributed income, if any, as of the end of 2016			0.	
a Enter amount for 2015 only				
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2016				
a From 2011	404,606.			
b From 2012	14,476.			
c From 2013	7,624.			
d From 2014	6,992.			
e From 2015	4,192.			
f Total of lines 3a through e	437,890.			
4 Qualifying distributions for 2016 from Part XII, line 4 ► \$	157,885.		0.	
a Applied to 2015, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2016 distributable amount				155,483.
e Remaining amount distributed out of corpus	2,402.			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:	440,292.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5		0.		
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
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		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			0.	
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)	0.			
8 Excess distributions carryover from 2011 not applied on line 5 or line 7	404,606.			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	35,686.			
10 Analysis of line 9				
a Excess from 2012	14,476.			
b Excess from 2013	7,624.			
c Excess from 2014	6,992.			
d Excess from 2015	4,192.			
e Excess from 2016	2,402.			



PAUL AND JILL KANE FAMILY CHARITABLE  
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**Part XV Supplementary Information (continued)**

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

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
<b>a Paid during the year</b>				
BARNSTABLE LAND TRUST 407 NORTH STREET HYANNIS, MA 02601	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	2,500.
BRIGHAM AND WOMEN'S HOSPITAL 75 FRANCIS STREET BOSTON, MA 02115	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	2,000.
CAHOON MUSEUM OF AMERICAN ART 4676 FALMOUTH ROAD COTUIT, MA 02635	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	15,250.
CAPE COD HEALTHCARE FOUNDATION PO BOX 370 HYANNIS, MA 02601	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	25,000.
COLGATE UNIVERSITY 13 OAK DRIVE HAMILTON, NY 13346	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	20,000.
<b>Total</b>	<b>SEE CONTINUATION SHEET(S)</b>			► 3a 154,350.
<b>b Approved for future payment</b>				
NONE				
<b>Total</b>				► 3b 0.

Form 990-PF (2016)

## Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	36,409.	
5 Net rental income or (loss) from real estate					
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 than inventory			18	208,124.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0.		244,533.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	244,533.

(See worksheet in line 13 instructions to verify calculations )

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



**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
a	BROWN BROTHERS HARRIMAN - AVAILABLE UPON	P	VARIOUS	12/31/16
b	REQUEST			
c	BROWN BROTHERS HARRIMAN - AVAILABLE UPON	P	VARIOUS	12/31/16
d	REQUEST			
e	2900 SHS COMCAST CORP - CL A	D	VARIOUS	07/07/16
f	CAPITAL GAINS DIVIDENDS			
g				
h				
i				
j				
k				
l				
m				
n				
o				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 35,339.		41,549.	<6,210. > 0.
b			
c 1,488,517.		1,431,988.	56,529. 0.
d			
e 189,008.		53,150.	135,858. 21,947.
f			
g			
h			
i			
j			
k			
l			
m			
n			
o			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Losses (from col (h)) Gains (excess of col (h) gain over col (k), but not less than "-0-")
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			<6,210. > 0.
b			
c			56,529. 0.
d			
e			135,858. 21,947.
f			
g			
h			
i			
j			
k			
l			
m			
n			
o			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }	2	208,124.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	If gain, also enter in Part I, line 8, column (c) If (loss), enter "-0-" in Part I, line 8	3	N/A

PAUL AND JILL KANE FAMILY CHARITABLE  
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**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
DR. MATULONIS OVARIAN CANCER RESEARCH FUND C/O DANA FARBER INSTITUTE 450 BROOKLINE AVENUE BOSTON, MA 02215	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	50.
DUXBURY BAY MARITIME SCHOOL 457 WASHINGTON STREET DUXBURY, MA 02332	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	50.
GIVE A BUCK FUND C/O SPECIAL EQUESTRIANS 7280 53RD STREET VERO BEACH, FL 32967	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	100.
HEBRON ACADEMY 339 PANS ROAD HEBRON, ME 04238	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	5,000.
HELP ME SEE 20 WEST 36TH STREET, 4TH FLOOR NEW YORK, NY 10018	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	1,000.
HUMANE SOCIETY OF VERO BEACH 6230 77TH STREET VERO BEACH, FL 32967	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	25.
INDIAN RIVER LAND TRUST, INC. 80 ROYAL PALM POINTE #301 VERO BEACH, FL 32960	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	43,200.
IRCF/IMPACT 100 4010 EXECUTIVE PARK DRIVE, SUITE 100 CINCINNATI, OH 45241	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	1,000.
MARINE CORPS LAW ENFORCEMENT FOUNDATION 273 COLUMBUS AVENUE, SUITE 10 TUCKAHOE, NY 10707	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	100.
MCKEE BOTANICAL GARDEN 350 US-1 VERO BEACH, FL 32962	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	23,500.
<b>Total from continuation sheets</b>				<b>89,600.</b>

623631  
04-01-16

PAUL AND JILL KANE FAMILY CHARITABLE  
FOUNDATION

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**Part XV** **Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
OSTERVILLE VILLAGE LIBRARY 43 WIANNO AVENUE OSTERVILLE, MA 02655	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	500.
OSTERVILLE HISTORICAL MUSEUM 155 W BAY ROAD OSTERVILLE, MA 02655	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	100.
OSTERVILLE HISTORICAL SOCIETY, INC. 155 W BAY ROAD OSTERVILLE, MA 02655	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	3,200.
RIVERSIDE THEATRE 45 FAIRMOUNT AVE HYDE PARK, MA 02136	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	1,000.
SAVE OUR SOUND/ALLIANCE TO PROTECT NANTUCKET SOUND, INC. 4 BARNSTABLE ROAD HYANNIS, MA 02601	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	5,000.
SENIOR RESOURCE ASSOCIATION 694 14TH STREET VERO BEACH, FL 32960	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	2,200.
ST. AUGUSTINE EPISCOPAL CHURCH 15 LOWER COLLEGE ROAD KINGSTON, RI 02881	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	25.
SOUTHEAST FLORIDA HONOR FLIGHT PO BOX 1503 STUART, FL 34995	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	25.
THREE BAYS PRESERVATION 864 MAIN STREET OSTERVILLE, MA 02655	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	2,500.
VERO BEACH MUSEUM OF ART 3001 RIVERSIDE PARK DRIVE VERO BEACH, FL 32963	NONE	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	500.
<b>Total from continuation sheets</b>				

PAUL AND JILL KANEK FAMILY CHARITABLE FOUNDATION

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## Part XV Supplementary Information

### 3 Grants and Contributions Paid During the Year (Continuation)

623631  
04-01-16

**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](http://www.irs.gov/form990)

OMB No 1545-0047

**2016****Name of the organization**PAUL AND JILL KANE B FAMILY CHARITABLE  
FOUNDATION**Employer identification number**

59-3214005

**Organization type (check one):****Filers of:**

<b>Form 990 or 990-EZ</b>	<b>Section:</b>
<input type="checkbox"/> 501(c)( ) (enter number) organization	
<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	
<input type="checkbox"/> 527 political organization	
<b>Form 990-PF</b>	
<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation	
<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation	
<input type="checkbox"/> 501(c)(3) taxable private foundation	

Check if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See Instructions**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year

► \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

## Name of organization

PAUL AND JILL KANEK FAMILY CHARITABLE  
FOUNDATION

Employer identification number

59-3214005

**Part I Contributors** (See instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PAUL D KANEK, SR.  111 STINGAREE POINT - JOHN'S ISLAND  VERO BEACH, FL 32963-3835	\$ 500,026.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

PAUL AND JILL KANEK FAMILY CHARITABLE  
FOUNDATION

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**Part II Noncash Property** (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	4121 SHS COMCAST CORP CL A; 6500 SHS PAYPAL HOLDINGS INC.	\$ 500,026.	04/13/16
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

**Name of organization**

PAUL AND JILL KANEK FAMILY CHARITABLE  
FOUNDATION

**Employer identification number**

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**Part III** *Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.* Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) ► \$ \_\_\_\_\_

(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
(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
(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

FORM 990-PF

DIVIDENDS AND INTEREST FROM SECURITIES

STATEMENT 1

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
BROWN BROTHERS HARRIMAN	58,356.	21,947.	36,409.	36,409.	
TO PART I, LINE 4	58,356.	21,947.	36,409.	36,409.	

FORM 990-PF

ACCOUNTING FEES

STATEMENT 2

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING PROFESSIONAL FEES	5,000.	1,500.		3,500.
TO FORM 990-PF, PG 1, LN 16B	5,000.	1,500.		3,500.

FORM 990-PF

OTHER PROFESSIONAL FEES

STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT ADVISORY FEE	9,367.	9,367.		0.
TO FORM 990-PF, PG 1, LN 16C	9,367.	9,367.		0.

FORM 990-PF

TAXES

STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAX EXPENSE	876.	876.		0.
TO FORM 990-PF, PG 1, LN 18	876.	876.		0.

FORM 990-PF

OTHER EXPENSES

STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ANNUAL FILING FEE(MA)	35.	0.		35.
MISCELLANEOUS DEDUCTIONS	35.	35.		0.
TO FORM 990-PF, PG 1, LN 23	70.	35.		35.

FORM 990-PF

OTHER DECREASES IN NET ASSETS OR FUND BALANCES

STATEMENT 6

DESCRIPTION

AMOUNT

PERMANENT DIFFERENCE ON SALES OF DONATED SECURITIES	129,166.
TIMING DIFFERENCES	305.
TOTAL TO FORM 990-PF, PART III, LINE 5	129,471.

FORM 990-PF

OTHER INVESTMENTS

STATEMENT 7

DESCRIPTION

VALUATION  
METHOD

BOOK VALUE

FAIR MARKET  
VALUE

BROWN BROTHERS HARRIMAN - COMMON STOCKS	COST	1,967,461.	2,398,933.
TOTAL TO FORM 990-PF, PART II, LINE 13		1,967,461.	2,398,933.