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DLN: 93491093007047

2016

OMB No 1545-0052

## **Return of Private Foundation**

Department of the Treasury Internal Revenue Service

Form 990-PF

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 instructions is at <a href="www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Open to Public Inspection

For	caler	ndar year 2016, or tax year beginning 01-01-20	)16 , aı	nd er	nding 12-31-	2016	
		indation NE & JOHN DALLEPEZZE FOUNDATION			A Employer ıd	entification numbe	er
	LJOAN	NE & JOHN BALLET EZZE I GONDATION			59-3650218		
		f street (or P O box number if mail is not delivered to street address) ATE DRIVE NO 1701	Room/suite		<b>B</b> Telephone nu	ımber (see ınstructio	ins)
0.	2 22/10/	WE 51472 No 1701			(239) 331-3243	3	
		s, state or province, country, and ZIP or foreign postal code 34103			<b>C</b> If exemption	application is pendir	ng, check here
G Ch	neck al	l that apply 🔲 Initial return 🔲 Initial return of a	former public charity		<b>D 1.</b> Foreign or	ganızatıons, check h	iere
		☐ Final return ☐ Amended return				rganizations meeting	
		Address change Name change			test, chec	k here and attach co	omputation 🕨 🔼
<b>H</b> Ch	eck ty	pe of organization $\checkmark$ Section 501(c)(3) exempt private	foundation			undation status was n 507(b)(1)(A), che	
	Section	1 4947(a)(1) nonexempt charitable trust $\Box$ Other taxable	private foundation			, , , , , ,	
			☑ Cash ☐ Accru	ıal		ation is in a 60-mont	
		from Part II, col (c), \$ 3,410,011	be on cash basis )		under sectio	n 507(b)(1)(B), che	ck here
Pa	rt I	Analysis of Revenue and Expenses (The total					(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(b)	Net investment income	(c) Adjusted net income	for charitable purposes
		equal the amounts in column (a) (see instructions) )	books		ilicome	income	(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach	9,976				
		schedule)					
	2	Check ► ☐ If the foundation is <b>not</b> required to attach Sch B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	78,421		78,421		
	5a	Gross rents					
	b	Net rental income or (loss)					
<u>e</u>	6a	Net gain or (loss) from sale of assets not on line 10	271,425				
Revenue	b	Gross sales price for all assets on line 6a					
<u>  چ</u>	_	Capital gain net income (from Part IV, line 2)			271,425		
_	7 8	Net short-term capital gain			271,423		
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold	<u> </u>				
	c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	359,822		349,846		
	13	Compensation of officers, directors, trustees, etc	0		0		
	14	Other employee salaries and wages		1			`
S	15	Pension plans, employee benefits					
Se	16a	Legal fees (attach schedule)					
<u></u>	ь	Accounting fees (attach schedule)					
Administrative Expenses	c	Other professional fees (attach schedule)	1,095	-	0		1,09
IVe	17	Interest	2,555				
rat	18	Taxes (attach schedule) (see instructions)	<b>9</b> 6,397	,	500		
<u>₹</u>	19	Depreciation (attach schedule) and depletion	,				
Ē	20	Occupancy					
Ad	21	Travel, conferences, and meetings					
nd	22	Printing and publications					
Operating and	23	Other expenses (attach schedule)					
ij	24	Total operating and administrative expenses.					
er.		Add lines 13 through 23	7,492		500		1,099
o	25	Contributions, gifts, grants paid	467,150				467,150
	26	Total expenses and disbursements. Add lines 24 and	,200				111,35
		25	474,642		500		468,24
	27	Subtract line 26 from line 12			· · · · ·		
	а	Excess of revenue over expenses and disbursements	-114,820				
	ь	Net investment income (If negative, enter -0-)			349,346		
	c	Adjusted net income(if negative, enter -0-)			· · ·		
For		work Reduction Act Notice, see instructions.	l		Cat No. 11280	/ 50	 rm 000-DE (2016

2,001,372

2,001,372

2,001,372

2,001,372

1,886,552

1,886,552

1,886,552

1,886,552

2

3

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2,001,372

-114,820

1,886,552

1,886,552 Form **990-PF** (2016)

3,410,011

14

15 16

17 18

19

20 21

22

23

24

25

26

28 29

31

Part III

2 3

Liabilities

Balances

Fund

ō

Assets 27

Net 30 Land, buildings, and equipment basis ▶ \_

instructions Also, see page 1, item I)

Other assets (describe > \_

Other liabilities (describe -

Unrestricted

Temporarily restricted

Permanently restricted . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a . . . . . . .

Other increases not included in line 2 (itemize) ▶ \_\_\_\_\_

Less accumulated depreciation (attach schedule)

Accounts payable and accrued expenses . . . . . . . . . . . .

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . . .

Foundations that do not follow SFAS 117, check here ▶ ✓

Paid-in or capital surplus, or land, bldg , and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

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

Analysis of Changes in Net Assets or Fund Balances

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

	(a) Ind(s) of property sold (e g , real esta se, or common stock, 200 shs MLC C		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
<b>1a</b> See Additional Data Table					
b					
С					
d					
e					
<b>(e)</b> Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain o	<b>h)</b> r (loss) ) minus (g)
a See Additional Data Table					
b					
c					
d					
e					
Complete only for assets show	wing gain in column (h) and owned by	y the foundation	on 12/31/69	(	1)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) Gains (Col (h) gain minus of col (i) (j), if any Gains (Col (k), but not less than -0-) if Losses (from col (h))		
a See Additional Data Table					
b					
С					
d					
e					
- ' -		, , ,	Part I, line 7	2	271,425
ın Part I, line 8	er Section 4940(e) for Reduce	.`	}	come	

(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

(a)

Base period years Calendar

year (or tax year beginning in)

2015 2014

2013

2012

2011

2 Total of line 1, column (d)

**5** Multiply line 4 by line 3

instructions

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

number of years the foundation has been in existence if less than 5 years

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

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

8 Enter qualifying distributions from Part XII, line 4

Adjusted qualifying distributions

3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the

. . . . . . . . . . .

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

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

672,468

565,214

606,062

456,795

261,831

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

Net value of noncharitable-use assets

3,695,038

3,868,800

3,828,219

4,222,740

4,127,366

2

3

4

5

6

7

8

(d)

Distribution ratio

(col (b) divided by col (c))

Page 3

0 181992

0 146095

0 158314

0 108175

0 063438

0 658014

0 131603

3,381,461

445,010

448,503

468,245

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3,493

Yes 🗸 No

<b>6a</b> Did the foundation, during the year,	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on						
a personal benefit contract?				· Yes 🗸	No		
b Did the foundation, during the year,	pay	premiums, directly or ind	irectly, on a personal be	nefit contract?	6b	r	No
If "Yes" to 6b, file Form 8870							
7a At any time during the tax year, wa	s the	foundation a party to a p	rohibited tax shelter trar	nsaction? Yes	No		
<b>b</b> If yes, did the foundation receive ar	y pro	oceeds or have any net in-	come attributable to the	transaction?	7b		
and Contractors			•	inagers, Highly Paid En	nployees,	•	
1 List all officers, directors, trustee	es, fo	oundation managers an	d their compensation	r <b>`</b>			
(a) Name and address	(	Title, and average hours per week <b>b)</b> devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Exper (e) other	nse accou allowanc	
JOHN R DALLEPEZZE		IDENT, SECR, & TREAS	0	0			0
81 SEAGATE DRIVE 1701 NAPLES, FL 34103	6 00						
GEORGIA D DALLEPEZZE		CTOR	0	0			0
81 SEAGATE DRIVE 1701 NAPLES, FL 34103	6 00						
PETER A DALLEPEZZE		CTOR	0	0			0
307 GREENBELT DR HOUSTON, TX 77079	6 00						
2 Compensation of five highest-pa	id en	nployees (other than th	ose included on line 1	.—see instructions). If no	ne, enter "	NONE."	
(a) Name and address of each employee pa more than \$50,000	aid	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expen: (e) other	se accour allowance	
NONE							
				+			—
Total number of other employees paid ov	or ¢5	<u> </u>		<b>I</b>			
Total Hamber of other employees paid ov	CI 33	0,000			Form <b>99</b>	N-DE (20	<u> </u>
					roimi 99	U-PF (20	110)

Form 990-PF (2016)		Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional service	ces (see instructions). 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 rel		r of Expenses
organizations and other beneficiaries served, conferences convened, research papers produ	uced, etc	
1		
		<del> </del>
2		<del> </del>
2		<del> </del>
2		
3		<del> </del>
		<del> </del>
4		
4		
Part IX-B Summary of Program-Related Investments (see	<u> </u>	
Describe the two largest program-related investments made by the foundation during t	the tax year on lines 1 and 2	Amount
1		
2		+
2		
All other program-related investments. See instructions		
all other program-related investments. See instructions		
<u> </u>		
Total. Add lines 1 through 3		<b>▶</b> 0
		Form <b>990-PF</b> (2016)

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

1a

1b

2

За 3b

4

5

468,245

468.245

3.493

464.752

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Part XII

1

2

3

4

5

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

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

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . .

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . .

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

**b** Total for prior years

From 2011. . . . .

**b** From 2012. . . . . c From 2013. . .

**d** From 2014. . . . .

e From 2015. . . . .

XII, line 4 > \$

indicated below:

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a . . . . . .

9 Excess distributions carryover to 2017.

10 Analysis of line 9

a Excess from 2012. . .

c Excess from 2014. . . .

d Excess from 2015. . .

e Excess from 2016. . .

**b** Excess from 2013. .

**b** Prior years' undistributed income Subtract 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 . . . . . . . . . . . . . e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . . f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 . . . . . . 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

Page 9

165,580

165,580

Form **990-PF** (2016)

Form 990-PF (20	)16)	
Part XIII	Undistributed Income (see instruc	tions)

1 Distributable amount for 2016 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only. . . . . . . 

Excess distributions carryover, if any, to 2016

20,746 461,017 417.795 375,662 495,430

f Total of lines 3a through e. . . . . . .

4 Qualifying distributions for 2016 from Part

a Applied to 2015, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election

e Remaining amount distributed out of corpus **5** Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a) ) 6 Enter the net total of each column as

required—see instructions). . . . . . . . . . d Applied to 2016 distributable amount. . . . .

٠ 302.665

> 461.017 417,795

> 375.662

495.430

302.665

(a)

Corpus

1,770,650

2,073,315

20,746

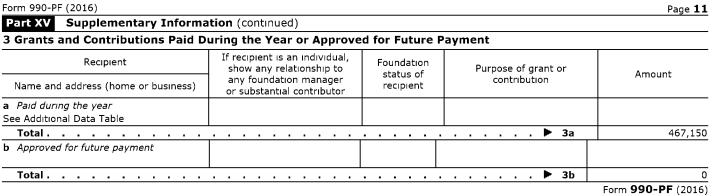
2,052,569

(b)

Years prior to 2015

(c)

2015



er gross amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	512, 513, or 514	(e) Related or exemp
Program service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions
i					
<b></b>					
:					
Fees and contracts from government agencies					
Membership dues and assessments  Interest on savings and temporary cash					
nvestments			14	78,421	
Net rental income or (loss) from real estate				, 0, 122	
Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal proper	ty				
Other investment income					
Gain or (loss) from sales of assets other than				274 425	
nventory			14	271,425	
Gross profit or (loss) from sales of inventory					
Other revenue a					
<u> </u>					
3					
l					
<u> </u>					
<u> </u>		0		349,846	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)		0		349,846 <b>3</b>	
<u> </u>	tions )		1	<u> </u>	
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculart XVI-B  Relationship of Activities to  Explain below how each activity for which the accomplishment of the foundation's	tions ) the Accomplish th income is reporte	ment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	349,84
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calcula  rt XVI-B  Relationship of Activities to  Explain below how each activity for which accomplishment of the foundation (c).	tions ) the Accomplish th income is reporte	ment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	349,84
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Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculart XVI-B  Relationship of Activities to  Explain below how each activity for which the accomplishment of the foundation's	tions) the Accomplish th income is reporte	ment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	349,8
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions to verify calculart XVI-B  Relationship of Activities to  Explain below how each activity for which the accomplishment of the foundation's	tions) the Accomplish th income is reporte	ment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	349,84
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Part XVII

Frame Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

	organization directly or inc e Code (other than section								on 501	Yes	No
a Transfers	s from the reporting foun	dation to a no	nchar	ıtable ex	empt organizatio	on of					
<b>(1)</b> Cas	h								. 1a(1)		No
(2) Oth	er assets								. 1a(2)		No
<b>b</b> Other tra	ansactions										
<b>(1)</b> Sale	es of assets to a noncharı	table exempt	organ	nization.					. 1b(1)		No
<b>(2)</b> Pure	chases of assets from a n	oncharitable (	exemp	ot organiz	zation				1b(2)		No
<b>(3)</b> Ren	ital of facilities, equipmen	t, or other as	sets.						1b(3)		No
<b>(4)</b> Reir	mbursement arrangemen	ts							. 1b(4)		No
<b>(5)</b> Loa	ns or loan guarantees.								. 1b(5)		No
<b>(6)</b> Perfo	ormance of services or me	embership or	fundra	aısıng sol	icitations				. 1b(6)		No
_	of facilities, equipment, m										No
of the go in any tra	swer to any of the above ods, other assets, or servansaction or sharing arrai	vices given by ngement, sho	the rewin c	eporting column (c	foundation If th  i) the value of th	ne fou he go	undation receive oods, other asse	d less than fair mark ts, or services receiv	ket value ved		<b>.</b>
(a) Line No	(b) Amount involved	(c) Name of r	nonchar	ritable exe	mpt organization	-	(d) Description of	transfers, transactions,	and sharing arrai	ngemen	čs
						-					
2a Is the for	undation directly or indire	ctly affiliated	with.	or relate	d to. one or mor	re tax	x-exempt organi	zations			
	d in section 501(c) of the								. 🗆 Yes	<b>☑</b> N	0
	complete the following so	•			-(-)(-),						_
<b>D</b> 1. 103,	(a) Name of organizatio		- 1	(1	ל <b>)</b> Type of organiza	ation		(c) Description	of relationship		
									·		
			[								
			$\rightarrow$								
ı							<u> </u>				
of	der penalties of perjury, my knowledge and belief iich preparer has any kno	, it is true, co						than taxpayer) is ba	sed on all infor	mation	n of
Here	*****				2017-03-28		*****		lay the IRS discus		
	Signature of officer or tr	ustee			Date		Title		see instr )? 🗹 Y		
	Print/Type preparer's	name	Prepa	rer's Sıgr	nature	D	Date	Check if self-	PTIN		
	IVENTAL D. CATRAGO	.						employed ▶ □	P00227	652	
Paid	KEVIN P CAIRNS C	PA					2017-03-28				
Prepare Use Onl		TONLARSONA	LLEN	LLP				F	Firm's EIN ▶41-	07467	49
		99 TAMIAMI 1	ΓRAIL	N STE 30	00						-
	NA	PLES, FL 34:	103					F	Phone no (239)	262-8	3686

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 400 SHS - ACUITY BRANDS INC 2016-07-01 2005-02-23 1,500 SHS - APPLE INC 2004-10-18 2016-07-01 600 SHS - CORNING INC 2002-06-11 2016-01-25 200 SHS - IDACORP INCORPORATED 2003-06-15 2016-01-25 200 SHS - JOHNSON & JOHNSON 1994-04-19 2016-01-25 3,000 SHS - VANGUARD FTSE EMERGING MARKETS ETF 2003-06-15 2016-12-16 Р CAPITAL GAINS DIVIDENDS Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (g) plus expense of sale (f) (or allowable) (h) (e) plus (f) minus (g) 102.765 5.104 97.661 152,897 1,716 151,181 10.137 2.458 7,679 13,322 5.555 7.767 19.409 1.963 17,446 107,189 128,471 -21,282 10.973 10.973 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (i) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 97,661 151,181 7,679 7.767 17,446 -21,282 10,973

Form 990PF Part XV Line 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	Foundation status of recipient	Purpose of grant or contribution	Amount		
Name and address (home or business)	or substantial contributor	T GOIP TO THE				
a Paid during the year						
AMERICAN CANCER SOCIETY 5020 TAMIAMI TRAIL STE 108 NAPLES, FL 34103	N/A	PC	TO SUPPORT CANCER RESEARCH	30,000		
AMERICAN HEART ASSOCIATION PO BOX 42150 ST PETERSBURG, FL 337424150	N/A	PC	TO SUPPORT HEART DISEASE RESEARCH	4,950		
AMERICAN RED CROSS 6310 TECHSTER BLVD STE 7 FORT MYERS, FL 337424150	N/A	PC	TO SUPPORT HEALTH, HUMAN SERVICES AND WELFARE	5,000		
CITY HARVEST 575 EIGHT AVE 4TH FLOOR NEW YORK, NY 10018	N/A	PC	TO SUPPORT HUMAN SERVICES EDUCATION	5,000		
COLUMBUS MUSEUM OF ART 480 EAST BROAD STREET COLUMBUS, OH 43675	N/A	PC	TO SUPPORT PUBLIC ARTS PROGRAMS	5,175		
CONSERVACY OF SOUTHWEST FLORIDA 1450 MERRIHUE DRIVE NAPLES, FL 34102	N/A	PC	TO SUPPORT CONSERVATION	7,820		
FLORIDA GULF COAST UNIVERSITY 10501 FGCU BLVD SOUTH FORT MYERS, FL 339656565	N/A	PC	TO SUPPORT EDUCATION	25,000		
GILDA'S CLUB 195 WEST HOUSTON STREET NEW YORK, NY 100144803	N/A	PC	TO SUPPORT HUMAN SERVICES	5,000		
GUADALUPE CENTER 509 HOPE CIRCLE IMMOKALEE, FL 34142	N/A	PC	TO SUPPORT HUMAN SERVICES AND EDUCATION PROGRAMS	5,000		
HARRY CHAPLIN FOOD BANK 3670 FOWLER STREET FORT MYERS, FL 33901	N/A	PC	TO SUPPORT HUMAN SERVICES	5,000		
HOPE HOSPICE 9470 HEALTH PARK CIRCLE FORT MYERS, FL 33908	N/A	PC	TO SUPPORT MEDICAL AND HUMAN SERVICE PROGRAMS	5,000		
HOUSTON ZOO 1513 CAMBRIDGE STREET HOUSTON, TX 77030	N/A	PC	TO SUPPORT HUMAN SERVICES AND EDUCATION PROGRAMS	10,000		
JAMES CANCER HOSPITAL PO BOX 183112 COLUMBUS, OH 43215	N/A	PC	TO SUPPORT HEALTH CARE	131,650		
JDRF 950 MICHIGAN AVENUE COLUMBUS, OH 43215	N/A	PC	TO SUPPORT MEDICAL AND HUMAN SERVICE PROGRAMS	16,795		
MEMORAIL SLOAN-KETTERING 1275 YORK AVENUE NEW YORK, NY 10065	N/A	PC	TO SUPPORT HEALTH CARE	100,000		
				467.450		

467,150

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year 1,000 MIT SLOAN 238 MAIN STEET STE200 N/A PC TO SUPPORT EDUCATION CAMBRIDGE, MA 02142 NAPLES CHILDREN AND EDUCATION N/A PC 7,900 TO SUPPORT HUMAN SERVICES **FOUNDATION** AND EDUCATION PROGRAMS 6200 SHIRLEY STREET 206 NAPLES, FL 34109 NATIONAL AUDUBON SOCIETY N/A PC TO SUPPORT CONSERVATION 5,000 4500 BISCAYNE BLVD STE205 MIAMI, FL 33137 N/A NATIONWIDE CHILDRENS HOSPITAL PC TO SUPPORT MEDICAL AND 1,000 700 CHILDRENS PLACE **HUMAN SERVICES PROGRAMS** COLUMBUS, OH 43205 NCH HEALTHCARE PO BOX 234 N/A PC TO SUPPORT HEALTH CARE 5,000 NAPLES, FL 34106 PC NOTTINGHAM ELEMENTARY PTA N/A TO SUPPORT EDUCATION 2,500 570 NOTTINGHAM OAKS TRAIL HOUSTON, TX 77079 PC OHIO HEALTHKOBACKER HOUSE N/A TO SUPPORT HEALTH CARE 5,000 180 EAST BROAD STREET 31ST FLOOR COLUMBUS, OH 43215 PHILHARMONIC CENTER FOR THE ARTS PC TO SUPPORT PUBLIC ARTS 2.500 N/A **PROGRAMS** 5833 PELICAN BAY BOULEVARD NAPLES, FL 341082740 PLANNED PARENTHOOD N/A PC TO SUPPORT HEALTH, HUMAN 10,000 206 EAST STATE STREET SERVICES AND WELFARE COLUMBUS, OH 43215 **PROGRAMS** PREP FOR PREP N/A PC TO SUPPORT HEALTH, HUMAN 5,000 328 WEST 71ST STREET SERVICES AND WELFARE **PROGRAMS** NEW YORK, NY 10023 PC PRINCETON UNIVERSITY PO BOX 5357 N/A TO SUPPORT EDUCATION 10,000 PRINCETON, NJ 085435357 RIDE 2 RECOVERY N/A PC TO SUPPORT HUMAN SERVICES 1,000 23679 CALABASAS ROAD CALABASAS, CA 91302 SHELTER FOR ABUSED WOMEN N/A PC TO SUPPORT HEALTH, HUMAN 29,860 PO BOX 10102 SERVICES AND WELFARE NAPLES, FL 34101 **PROGRAMS** SPRING BRANCH EDUCATION N/A PC TO SUPPORT EDUCATION 10,000 **FOUNDATION** 955 CAMPBELL ROAD STE 205 HOUSTON, TX 77024 UNITED WAY OF HOUSTON N/A PC TO SUPPORT HEALTH, HUMAN 10,000 SERVICES AND WELFARE PO BOX 3247 HOUSTON, TX 77253 **PROGRAMS** 

467,150

Total.

За

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491093007047 TY 2016 Distribution from Corpus Election Name: THE JOANNE & JOHN DALLEPEZZE FOUNDATION **EIN:** 59-3650218 **Election:** UNDER REGULATIONS SECTION 53.4942(A)-3(D)(2) WE ELECT TO TREAT EXCESS QUALIFYING DISTRIBUTIONS AS DISTRIBUTIONS OUT OF CORPUS.

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491093007047			
TV 2016 Investments Corporate Stock Schedule					

### Corporate Stock Scriedule

Name: THE JOANNE & JOHN DALLEPEZZE FOUNDATION

ETN: 50-3650218

EIN: 39-3030218				
Name of Stock	End of Year Book Value	End of Year Fair Market Value		
ACUITY BRANDS INC - 1,200 SHS	15,310	277,032		
APPLE INC - 3,200 SHS	3,660	370,624		
GUGGENHEIM S&P 500 EQUAL - 3,800 SHS	145,555	329,232		
ISHARES CORE S&P MID CAP - 1,500 SHS	107,335	248,010		
ISHARES RUSSELL 2000 - 1,500 SHS	98,035	202,275		
SPDR S&P 500 ETF - 2,000 SHS	168,001	447,060		
VANGUARD FTSE ALL WORLD - 2,000 SHS	87,643	88,360		
VANGUARD HIGH DIVIDEND - 2,000 SHS	117,798	151,540		
VANGUARD REIT ETF - 2.500 SHS	143.035	206.325		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491093007047
TY 2016 Investments - Other S	Schedule	

Name: THF JOANNE & JOHN DALLEPEZZE FOUNDATION

207,010

115,373

**EIN:** 59-3650218

VANGUARD GROWTH & INCOME - 4,998 SHS

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
DOUBLELINE TOTAL RETURN - 22,866 SHS	AT COST	250,000	242,838
PIMCO INCM INST CL - 29,427 SHS	AT COST	350,000	354,898

AT COST

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	DLN: 93491093007047			
TY 2016 Other Professional Fees Schedule					
Name: THE JOANNE & JOHN DALLEPEZZE FOUNDATION					
EIN: 59-3650218					
1					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
OTHER PROFESSIONAL FEES	1,095	0		1,095	

efile GRAPHIC print - DO NOT PROCESS		iled Data	-	DLN	N: 93491093007047	
TY 2016 Taxes Schedule						
Name: THE JOANNE & JOHN DALLEPEZZE FOUNDATION  EIN: 59-3650218						
			<u> </u>			
Category	Amour	nt	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
Category  STATE TAXES	Amou	<b>nt</b> 61		_	for Charitable	
	Amou		Income	_	for Charitable Purposes	

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491093007047					
Schedule B (Form 990, 990-EZ,	Schedule of	Contributors		OMB No 1545-0047	
or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>			2016	
Name of the organizat			Employer id	entification number	
			59-3650218		
Organization type (ch	eck one)				
Filers of:	Section:				
Form 990 or 990-EZ					
	4947(a)(1) nonexempt charitable to	rust <b>not</b> treated as a private foundat	ion		
	☐ 527 political organization				
Form 990-PF	501(c)(3) exempt private foundation	✓ 501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable to	4947(a)(1) nonexempt charitable trust treated as a private foundation			
501(c)(3) taxable private foundation					
•	ation filing Form 990, 990-EZ, or 990-PF that r property) from any one contributor Complete		-	•	
Special Rules					
under sections received from a	tion described in section 501(c)(3) filing Form 509(a)(1) and 170(b)(1)(A)(vi), that checked Say one contributor, during the year, total contribe 1h, or (ii) Form 990-EZ, line 1 Complete Page 1	chedule A (Form 990 or 990-EZ), Pa butions of the greater of <b>(1)</b> \$5,000 o	art II, line 13,	16a, or 16b, and that	
during the year.	tion described in section 501(c)(7), (8), or (10) total contributions of more than \$1,000 exclus the prevention of cruelty to children or animal	<i>rively</i> for religious, charitable, scienti			
during the year. If this box is che purpose Do no	tion described in section 501(c)(7), (8), or (10) contributions <i>exclusively</i> for religious, charital cked, enter here the total contributions that we complete any of the parts unless the <b>Genera</b> while, etc., contributions totaling \$5,000 or more	ole, etc., purposes, but no such cont ere received during the year for an e I Rule applies to this organization be	ributions total exclusively rel ecause it rece	led more than \$1,000 igious, charitable, etc , eived <i>nonexclusively</i>	
990-EZ, or 990-PF), bu	on that is not covered by the General Rule and tit <b>must</b> answer "No" on Part IV, line 2, of its l form 990PF, Part I, line 2, to certify that it doe	Form 990, or check the box on line h	d of its		
For Paperwork Reduction for Form 990, 990-EZ, or 9		Cat No 30613X Schedul	le B (Form 990,	990-EZ, or 990-PF) (2016)	

Schedule B (For	m 990, 990-EZ, or 990-PF) (2016)		Page <b>2</b>
Name of organization THE JOANNE & JOHN DALLEPEZZE FOUNDATION		Employer identification 59-3650218	number
Part I	Contributors (see instructions) Use duplicate copies of Part I if add	ditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOHN R DALLEPEZZE 81 SEAGATE DRIVE 1701	\$ 43,790	Person  Payroll  Noncash
	NAPLES, FL34103		(Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person  Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person  Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person  Payroll  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
		<b>\$</b>	Person  Payroll  Noncash  (Complete Part II for noncash contributions)  prm 990. 990-EZ, or 990-PF) (2016)

Schedule B (Forn	n 990, 990-EZ, or 990-PF) (2016)		Page 3
Name of organization THE JOANNE & JOHN DALLEPEZZE FOUNDATION		Employer identification number	
THE JOANNE & JOI	THE BALLEFEZZE FOORBATION	59-36	50218
Part II	Noncash Property		
(a) No.from Part I	(see instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	600 SHARES OF GLW \$10,398200 SHARES OF JNJ \$19,804200 SHARES OF IDA \$13,588RECORDED AT COST	\$ 43 790	2016-01-19
(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
		\$	
		Schedule B (Form 9	90, 990-EZ, or 990-PF) (2016)

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