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Form **990-PF** Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.
 Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

	For e	calendar year 2016 or tax year beginning		, and ending		
	Nar	ne of foundation			A Employer identification	n number
_	J	OHN E & NELLIE J BASTIEN				
	_M	EMORIAL FOUNDATION		59-6160694		
		ber and street (or P O box number if mail is not delivered to street		Room/suite	B Telephone number	
	4	40 E. SAMPLE ROAD, SUITE	209		954-942-32	203
		or town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	pending, check here
		OMPANO BEACH, FL 33064	· • · · · · · · · · · · · · · · · · · ·	·	1	
	G C	heck all that apply: Initial return		rmer public charity	D 1. Foreign organization:	s, check here
		Final return	Amended return		Foreign organizations me check here and attach co	eeting the 85% test,
		Address change heck type of organization: X Section 501(c)(3) ex	Name change		7	
	-		dempt private foundation Other taxable private founda	ation.	E If private foundation sta under section 507(b)(1	- L
	 F2	ir market value of all assets at end of year J Accounti		Accrual	1 ' ' '	,, ,,
		·	ther (specify)	Accidal	F if the foundation is in a under section 507(b)(1	
			mn (d) must be on cash i	basis)		/(a/) amaan mara b
	Pa	rt Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
		1 Contributions, gifts, grants, etc., received			N/A	
		2 Check ► I if the foundation is not required to attach Sch. B				
_		Interest on savings and temporary cash investments	75,729.	72,123.		STATEMENT 2
2017		4 Dividends and interest from securities	327,116.	320,962.		STATEMENT 3
		5a Gross rents				<u> </u>
8		b Net rental Income or (loss)	40 676	 		CONTRACTOR 1
64	e	6a Net gain or (loss) from sale of assets not on line 10 6 Gross sales price for all 1,776,177.	48,676.		-	STATEMENT 1
MAY	Revenue	b assets on line 6a 1, //6, 1//. 7 Capital gain net income (from Part-IV-line-2)		88,215.		
\geq	Re	8 Net short-term capital gain	<u>cD</u>	00,213.		
		9 Income modifications	12			
Щ		10a and allowances MAY 1 5 2				"
SCARAFO		b Less Cost of goods sold			<u> </u>	
A		c Gross profit or (loss)	A 2000			
0		11 Other income OGDEN.				
(L)		12 Total. Add lines 1 through 11	451,521.	481,300.		
		13 Compensation of officers, directors, trustees, etc	120,000.	36,000.		84,000.
		14 Other employee salaries and wages	21,883.	6,565.		15,318.
	S	15 Pension plans, employee benefits				
	penses	16a Legal fees	13,485.	4,046.		9,439.
	xpe	b Accounting fees STMT 4	13,403.	4,040.	 	9,439.
	e Ex	c Other professional fees 17 Interest	-			
	Operating and Administrative	18 Taxes STMT 5	3,520.	2,479.		1,191.
	istr	19 Depreciation and depletion	99.	0.		
	Ë	20 Occupancy	12,947.	3,884.		9,063.
	Ad	21 Travel, conferences, and meetings		•		,
	and	22 Printing and publications		•		
	пĝ	23 Other expenses STMT 6	4,335.	1,300.		3,035.
	rati	24 Total operating and administrative				
	ğ	expenses. Add lines 13 through 23	176,269.	54,274.		122,046.
	٦	25 Contributions, gifts, grants paid	401,000.			403,000.
		26 Total expenses and disbursements.	F77 060	E4 084		E25 046
		Add lines 24 and 25	577,269.	54,274.		525,046.
		27 Subtract line 26 from line 12:	-125,748.			
		8 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)	-140,740.	427,026.		
		C Adjusted net income (if negative, enter -0-)		±21,020 •	N/A	
			,		,	1

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

Form **990-PF** (2016)

59-6160694 Page 2

		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
P	art	Balance Sheets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash - non-interest-bearing	18,713.	14,343.	14,343.
	2	Savings and temporary cash investments	1,631,651.	1,069,030.	1,069,030.
		Accounts receivable ►			
	-	Less; allowance for doubtful accounts			
	4	Pledges receivable ▶			
	•	Less; allowance for doubtful accounts ▶	1		
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	ľ	disqualified persons			
	١,				
	7	Other notes and loans receivable	-		
	١.	Less: allowance for doubtful accounts	-		
Assets		Inventories for sale or use			
Ass		Prepaid expenses and deferred charges	42,950.	35,447.	7,225.
•	ı	Investments - U.S. and state government obligations STMT 8	7,468,152.	7,444,387.	8,499,850.
	Į.	Investments - corporate stock STMT 9			754,086.
	٥	Investments - corporate bonds STMT 10	302,737.	771,347.	754,000.
	11	Investments - land, buildings, and equipment basis	-		-
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment; basis ► 5,629.			
		Less accumulated depreciation STMT 7 ▶ 5,422.	306.	207.	207. 1,277.
	15	Other assets (describe ► STATEMENT 11)	1,277.	1,277.	1,277.
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	9,465,786.	9,336,038.	10,346,018.
	17	Accounts payable and accrued expenses			1
	18	Grants payable			
Ś	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			ı
abi	21	Mortgages and other notes payable			
Ξ	22	Other liabilities (describe)			,
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted	9,465,786.	9,336,038.	
lances		Temporarily restricted			1
	ı	Permanently restricted			
Fund Ba		Foundations that do not follow SFAS 117, check here			
Ξ		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			i
Net Assets or	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
18S	29	Retained earnings, accumulated income, endowment, or other funds			ı
et/		Total net assets or fund balances	9,465,786.	9,336,038.	
Ž	30	Total net assets of fund parances	J, 403, 700.	3,330,030.	
	١,,	Total liabilities and not constant and halances	9,465,786.	9,336,038.	
_	31	Total liabilities and net assets/fund balances	•	7,330,0301	
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
•		st agree with end-of-year figure reported on prior year's return)		1	9,465,786.
2	•	r amount from Part I, line 27a		2	-125,748.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	9,340,038.
		eases not included in line 2 (itemize) > PRIOR YEAR ADJU	USTMENTS	5	4,000.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		6	9,336,038.
<u> </u>	ıvıd	incl assets of fund valances at end of year (fine 4 finings line 3) - Part II, CO	iumin (u), ime ov		Form 990-PF (2016)

Daniel Conide Coine	and Lagger Tay on I		4 l======				1694 Page 3
<u> </u>	and Losses for Tax on Incribe the kind(s) of property sold (e.g		tincome	(b) How acquired P - Purchase	(c) Date a	acquired	(d) Date sold
2-story brick w	arehouse; or common stock, 200 sh	s. MLC Co.)		D - Donation	`(mo., d		(mo., day, yr.)
1a							
b SEE ATTACHED	STATEMENT						
C					···		
e e							
	(f) Depreciation allowed	(a) Co	st or other basis		(h) Ga	ain or (loss)	
(e) Gross sales price	(or allowable)		expense of sale			(f) minus (g	1)
a							
<u>b</u>							
C		 					
e 1,776,177.		 	1,687,96				88,215.
	ng gain in column (h) and owned by				Gains (C	ol. (h) gaın r	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) E>	cess of col. (i) col. (j), if any		col. (k), but not less than -0-) or Losses (from col. (h))		
a							
b							
C		<u> </u>	·				
d		 					00 215
<u>e</u>		L					88,215.
2 Capital gain net income or (net c		- ın Part I, line	7 7	} 2			88,215.
Net short-term capital gain or (lo if gain, also enter in Part I, line 8,	ss) as defined in sections 1222(5) ar , column (c).	nd (6):					
If (loss), enter -0- in Part I, line 8] 3		N/A	
	Inder Section 4940(e) for				ome	<u></u>	
For optional use by domestic privat	e foundations subject to the section	4940(a) tax on	net investment in	come.)			
f section 4940(d)(2) applies, leave t	his part blank.						
Was the foundation liable for the sec	tion 4942 tax on the distributable am	ount of any ye	ear in the base peri	od?		[Yes X No
f "Yes," the foundation does not qua	lify under section 4940(e). Do not co	mplete this pa	rt.				
	each column for each year; see the i	istructions be	ore making any er	itries.			
(a) Base period years	ng in) Adjusted qualifying dis	tributions	Not value of nor	(c) icharitable-use assets		Distribi	d) tion ratio
Calendar year (or tax year beginni 2015	<u>''9 '''/ </u>	9,434.		10,439,266		coi. (D) aivid	fed by col. (c)) • 049758
2014		5,214.		10,592,876			.046750
2013		9,073.					
2012	Δ7			10,137,406			.048244
2011		7,962.		10,137,406 9,728,176			.049132
2011							.048244 .049132 .050650
		7,962.		9,728,176			.049132
2 Total of line 1, column (d)	49	7,962. 2,153.		9,728,176 9,716,797			.049132
Total of line 1, column (d) Average distribution ratio for the	4 9 5-year base period - divide the total o	7,962. 2,153.		9,728,176 9,716,797	2		.049132 .050650 .244534
2 Total of line 1, column (d)	4 9 5-year base period - divide the total o	7,962. 2,153.		9,728,176 9,716,797			.049132 .050650 .244534
Protal of line 1, column (d) Average distribution ratio for the the foundation has been in existe	4 9 5-year base period - divide the total o	7,962. 2,153. on line 2 by 5,		9,728,176 9,716,797	2	10	.049132 .050650 .244534
Total of line 1, column (d) Average distribution ratio for the the foundation has been in existe	5-year base period - divide the total once if less than 5 years	7,962. 2,153. on line 2 by 5,		9,728,176 9,716,797	2 3	10	.049132 .050650 .244534 .048907
Total of line 1, column (d) Average distribution ratio for the the foundation has been in existe Enter the net value of noncharitat	5-year base period - divide the total once if less than 5 years	7,962. 2,153. on line 2 by 5,		9,728,176 9,716,797	2 3	10	.049132 .050650 .244534 .048907
Total of line 1, column (d) Average distribution ratio for the the foundation has been in existe Enter the net value of noncharitat Multiply line 4 by line 3	5-year base period - divide the total once if less than 5 years ole-use assets for 2016 from Part X,	7,962. 2,153. on line 2 by 5,		9,728,176 9,716,797	2 3 4	10	.049132 .050650 .244534 .048907 0,400,090. 508,637.
Protal of line 1, column (d) Average distribution ratio for the the foundation has been in existe Enter the net value of noncharitat Multiply line 4 by line 3	5-year base period - divide the total once if less than 5 years ole-use assets for 2016 from Part X,	7,962. 2,153. on line 2 by 5,		9,728,176 9,716,797	3	10	.049132 .050650 .244534 .048907
Total of line 1, column (d) Average distribution ratio for the the foundation has been in existe Enter the net value of noncharitat Multiply line 4 by line 3 Enter 1% of net investment incon	5-year base period - divide the total once if less than 5 years ole-use assets for 2016 from Part X,	7,962. 2,153. on line 2 by 5,		9,728,176 9,716,797	2 3 4 5 6	10	.049132 .050650 .244534 .048907 ,400,090. 508,637. 4,270.
 Total of line 1, column (d) Average distribution ratio for the the foundation has been in existe Enter the net value of noncharitate Multiply line 4 by line 3 Enter 1% of net investment incom Add lines 5 and 6 	5-year base period - divide the total once if less than 5 years ble-use assets for 2016 from Part X, ne (1% of Part I, line 27b)	7,962. 2,153. on line 2 by 5,		9,728,176 9,716,797	2 3 4 5 6	10	.049132 .050650 .244534 .048907 .400,090. 508,637. 4,270. 512,907.
 2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in existe 4 Enter the net value of noncharitate 5 Multiply line 4 by line 3 6 Enter 1% of net investment incommodation 7 Add lines 5 and 6 8 Enter qualifying distributions from 	5-year base period - divide the total once if less than 5 years ble-use assets for 2016 from Part X, ne (1% of Part I, line 27b)	7,962. 2,153. On line 2 by 5,	or by the number (9,728,176 9,716,797 of years	2 3 4 5 6	10	.049132 .050650 .244534 .048907 ,400,090. 508,637. 4,270.

JOHN E & NELLIE J BASTIEN

	1 990-PF (2016) MEMORIAL FOUNDATION		-6160			Page 4
	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see	instr	JCtio	<u>ns)</u>
18	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔛 and enter "N/A" on line 1.	1	ļ			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		1			
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%	1_1_			4,2	270.
	of Part I, line 27b		1			
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	İ				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	1			0.
3	Add lines 1 and 2	3			4,2	270.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			4,2	270.
6	Credits/Payments;		†		-	
	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 11,639	.1				
	Exempt foreign organizations - tax withheld at source	7]			
	Tax paid with application for extension of time to file (Form 8868)	1	1			
	I Backup withholding erroneously withheld 6d 197	.†	1			
	Total credits and payments. Add lines 6a through 6d	7	1	1	1 . 8	36.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	 			
٥	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	 			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	 -		7 5	66.
	Enter the amount of line 10 to be: Credited to 2017 estimated tax	11	 		<u>','</u>	0.
	irt VII-A Statements Regarding Activities	<u> </u>	<u> </u>			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interver				Vec	No
10	any political campaign?	e III		1	103	X
		- \0		1a		$\frac{\hat{x}}{x}$
C	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	,		_1b	├	 ^
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials public	sned oi	•			
_	distributed by the foundation in connection with the activities					
	Did the foundation file Form 1120-POL for this year?			1c	-	X
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					1
	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0	<u>-</u>			ļ	Į .
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			l		ŀ
_	managers. ▶ \$				-	. په
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	<u> </u>	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			l	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	I/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		Х
_	If "Yes," attach the statement required by General Instruction T			l i		l
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					ĺ
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	e law				1
	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 X	/		7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	<u></u>				
-	FL					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			[
	of each state as required by General Instruction G? If "No," attach explanation			8b	X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section $4942(j)(3)$ or $4942(j)(5)$ for call	endar				
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X
			For	m 99 0	PF	(2016)

Yes No Section 512(b)(13)? If Yes,* attach schedule (see instructions) 11	LP:	art VII-A Statements Regarding Activities (continued)			
section 512(b)(13)*If Yes, "attach schedule (see matructons) 10 bit the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? 11				Yes	No
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? 18 Telephone not make a distribution to make the public inspection requirements for its annual returns and exemption application? 19 Website address ► NONE 10 Telephone not ► 954-942-3203 10 Telephone not End Telephone not	11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	1		1
If Yes, a talco statement (see instructions) 10 dit he foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► NONE 11 be books are in care of ► FOUNDATION Located at ► 440 B. SARPLE RD. POMPANO BEACH, FL 279-14 ■ 33 06 4 15 Section 4947(a)(1) nonexempt characteristic trusts fitting form 990-PF in like of Form 1041 - Check here and either the annunt of tax-exempt interest received or accreded uring the year 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 FinicEN Form 114. If Yes,* enter the name of the foreign country ► 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. 1a During they and did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasings of property with a disqualited person? (2) Borrow money from, lend maney for, or otherwise extend credit for or accept it from) a disqualited person? (3) Furins by oncome or assist to a disqualitied person (or make any of either available for the benefit or use of a disqualitied person)? (6) Transites any income or assist to a disqualitied person (or make any of either available for the benefit or use of a disqualitied person)? (7) Furins the any year shall be a disqualitied person (or make any of either available for the benefit or use of a disqualitied person)? (8) Furins by one or assist to a disqualitied person (or make any of either available or the benefit or use of a disqualitied person)? (9) Furins the assistance of powerment sharles, a furins the transition of powerment sharles are successed assistance (see instructions)? (9) Furins the assistance of powerment sharles are successed assistance (see instructions)?		section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
13 Did the foundation comply with the quiblic inspection requirements for its annual returns and exemption application?	12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			}
Website address ➤ NONE 14 The books are in care of ▶ FOUNDATION Telephone no. ▶ 95.4 - 9.42 - 3.203 15 Section 4947(a)(1) nonexempt charitable trusts filing form 990-PF in Neu of Form 1041 - Check here and enter the amount of tax eventy interest received or accrued during the year 16 At any time during calendary year 2016, did the foundation have an interest in or a signature or other authority over a bank, Yes No 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 ► 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. 1		If "Yes," attach statement (see instructions)	12		X
Telephone no. 954-942-3203	13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<u> </u>
Located at b 440 B. SAMPLE RD, FOMPANO BEACH, FL Section 447((3)) (nonescentry charable brusts through Form 930-PP in the up of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year 16		Website address NONE			
15 Section 4947(a)(1) nonexempt charitable troots 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. 16 At any time during calendary say 2016, dut the boundation 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. 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. 1 Dump the year dot the foundation (either directly or indirectly). 1 Dengare in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pey componisation to, or pay or remitures the expenses of, a disqualified person? (5) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (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 the foundation of government service, if terminating within 90 days. b If any answer is "Yes" to 14(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 34.04(14)(3) are propriet or agovernment official? (Exception, Check "No" if the foundation engage in a prior year in any of the acts fail to qualify under the exception and the service of the years beginning in 30 1016? 2 Taxes on failure to distribute income (section 4942) (does not applying the provisio	14		2-3	<u> 203</u>	
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See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country!		and enter the amount of tax-exempt interest received or accrued during the year	N		
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termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? 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? 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 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.) b If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 13a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? 14b 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) 4a 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			1		
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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) 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4b 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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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	4:		-		<u>x</u>
had not been removed from jeopardy before the first day of the tax year beginning in 2016?			- -		
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Form 990-PF (2016) MEMORIAL FOUNDATION			<u>59-61606</u>	94 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	iued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (secti	on 4945(e))?	Y	es X No	
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indi	rectly,	ŀ	1 1
any voter registration drive?		Y	es X No	
(3) Provide a grant to an individual for travel, study, or other similar purpose	es?		es X No	1 1
(4) Provide a grant to an organization other than a charitable, etc., organizat				
4945(d)(4)(A)? (see instructions)			es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literar	v or educational purposes or			[[
the prevention of cruelty to children or animals?	,, o. adadaa. pa.pada, o.		es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u	nder the excentions described			1 1
section 53.4945 or in a current notice regarding disaster assistance (see inst	•	III Tiogalations	N/A	5b
Organizations relying on a current notice regarding disaster assistance check	•			~ - -
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		ained		1 1
expenditure responsibility for the grant?			es 🔲 No	
If "Yes," attach the statement required by Regulations section 53 49		.4/44	00 110	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• /			
	o pay premiums on	[es X No	i i
a personal benefit contract?				6b - X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		<u> </u>	A A
If "Yes" to 6b, file Form 8870			es X No	, ,
7a At any time during the tax year, was the foundation a party to a prohibited tax		Y		
b If "Yes," did the foundation receive any proceeds or have any net income attributed Part VIII Information About Officers, Directors, Trus		II:-bI		7b
Part VIII Information About Officers, Directors, Trus Paid Employees, and Contractors	stees, Foundation Ma	anagers, nigni	У	
1 List all officers, directors, trustees, foundation managers and their	r compensation			
	(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Expense
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SCOTT L. PORTER	TRUSTEE	enter -0-)	compensation	allowalices
14211 LITTLE CYPRESS CIRCLE	-			
PALM BEACH GARDENS, FL 33410	2.00	0.	0.	0.
CAROLYN E. SCHNEIDER	TRUSTEE	 	<u>-</u> -	<u> </u>
291 NE 28TH STREET #202	TRUSTEE			
LIGHTHOUSE POINT, FL 33064	2.00	0.	0.	0.
JILL T. LAWSON	TRUSTEE	<u> </u>	ļ	0.
5050 LEITNER DRIVE WEST	TIKUSTEE	}	1	
CORAL SPRINGS, FL 33067	2.00	0.	۱ ،	0
CORAL SPRINGS, FL 33007	4 2.00	U.	0.	0.
	4	1)	
	4	1		
2 Compensation of five highest-paid employees (other than those in	oluded on line 1). If none	onter INONE II	L	
2 Compensation of tive highest-paid employees (other than those in	(b) Title, and average	, enter NONE.	(d) Contributions to	(a) Eynense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expense account, other
NONE	devoted to position	 	compensation	allowances
NONE				
	 			
	4	i		
	 	 		
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2.000	<u> </u>	l	L	
Total number of other employees paid over \$50,000				0
			Form	990-PF (2016)

Form 990-PF (2016) 'MEMORIAL FOUNDATION		160694 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "I		
(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 Part IX-A Summary of Direct Charitable Activities		▶ 0
	Lucia makan ayah as tha	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistica number of organizations and other beneficiaries served, conferences convened, research papers product	ed, etc.	Expenses
1 THE FOUNDATION MAKES QUALIFYING DISTRIBUTIONS		
AND FOR THE ACTIVE CONDUCT OF QUALIFIED ORGAN		0
DISTRIBUTIONS ARE MADE DIRECTLY FOR THE ACTIVITY OF THE ACTIVITIES CONSTITUTING THE PURPOSE OR		0.
WHICH IT IS ORGANIZED AND OPERATED.	FUNCTION FOR	
WAICH II IS ORGANIZED AND OPERATED.		0.
3		
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 line	s 1 and 2.	Amount
1 NONE		
		_
2		0.
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	•	0.
		Form 990-PF (2016)

Form 990-PF (2016)

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 9,169,371. a Average monthly fair market value of securities 1a 1,389,096. 1b b Average of monthly cash balances c Fair market value of all other assets 10 10,558,467. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 10,558 3 Subtract line 2 from line 1d 158,377. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 10,400,090. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 520,005 Minimum investment return. Enter 5% of line 5 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.) 520,005. Minimum investment return from Part X, line 6 4,270. 2a Tax on investment income for 2016 from Part VI, line 5 b Income tax for 2016. (This does not include the tax from Part VI.) 2b c Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 Deduction from distributable amount (see instructions) Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 515,735. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 525,046. 1a b Program-related investments - total from Part IX-B 16 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3а b Cash distribution test (attach the required schedule) 3b 525,046. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 4,270. 520.776. Adjusted qualifying distributions. Subtract line 5 from line 4 6 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

Form **990-PF** (2016)

4940(e) reduction of tax in those years.

Page 9

Part XIII Undistributed Income (see instructions)

Subtract lines 7 and 8 from line 6a 0 .		(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
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may be required - see instructions) 8 Excess distributions carryover from 2011 not applied on line 5 or line 7 9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a 0 Analysis of line 9: a Excess from 2012 b Excess from 2013 c Excess from 2014 d Excess from 2015					
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not applied on line 5 or line 7 9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a 0 Analysis of line 9: a Excess from 2012 b Excess from 2013 c Excess from 2014 d Excess from 2015	· · · · · · · · · · · · · · · · · · ·	0.			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a 0 Analysis of line 9: a Excess from 2012 b Excess from 2013 c Excess from 2014 d Excess from 2015	8 Excess distributions carryover from 2011				
Subtract lines 7 and 8 from line 6a O Analysis of line 9: a Excess from 2012 b Excess from 2014 d Excess from 2015	not applied on line 5 or line 7	0.			
Subtract lines 7 and 8 from line 6a O Analysis of line 9: a Excess from 2012 b Excess from 2013 c Excess from 2014 d Excess from 2015	9 Excess distributions carryover to 2017.				
0 Analysis of line 9: a Excess from 2012 b Excess from 2013 c Excess from 2014 d Excess from 2015	Subtract lines 7 and 8 from line 6a	0.1	}		
a Excess from 2012 b Excess from 2013 c Excess from 2014 d Excess from 2015	O Analysis of line 9:				
b Excess from 2013 c Excess from 2014 d Excess from 2015		}	1		
d Excess from 2014			İ		
d Excess from 2015					
) 					li.
	<u> </u>	j			

623581 11-23-16

Form **990-PF** (2016)

MEMORIAL FOUNDATION

Part XIV Private Operating F	oundations (see in	structions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for					
b Check box to indicate whether the found	•	-	in section	4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	1	Prior 3 years		1
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for	(-,	(-,	 	 	
each year listed		 			
b 85% of line 2a		}			
c Qualifying distributions from Part XII,					
line 4 for each year listed				 	
d Amounts included in line 2c not					
used directly for active conduct of			+		
exempt activities		 	 		
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the		ļ. ——————		-	
alternative test relied upon:					
a "Assets" alternative test - enter:]	J		
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter;					
(1) Total support other than gross				1	
investment income (interest,					
dividends, rents, payments on securities loans (section			1		
512(a)(5)), or royalties)		1	1		
(2) Support from general public	"				
and 5 or more exempt organizations as provided in				j	
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	had \$5,000 or me	ore in assets
at any time during t	he year-see inst	ructions.)			
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation who			ributions received by the	foundation before the clos	se of any tax
year (but only if they have contributed m	ore than \$5,000). (See s	ection 507(d)(2).)			
NONE					
b List any managers of the foundation who			(or an equally large porti	on of the ownership of a pa	artnership or
other entity) of which the foundation has	a 10% or greater intere	SI.			
NONE					
2 Information Regarding Contributi		• • • •	•		
Check here ► if the foundation of	nly makes contributions	to preselected charitable	organizations and does i	not accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc. (1 a.
a The name, address, and telephone number	er or e-mail address of t	the person to whom appli	cations should be addre	ssed:	
SEE STATEMENT 12					
b The form in which applications should be	e submitted and informa	tion and materials they st	nould include;		
c Any submission deadlines:		-			
					
d Any restrictions or limitations on awards	, such as by geographica	al areas, charitable fields,	kinds of institutions, or	other factors:	

3 Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
ADOPT-A-FAMILY	NONE	PC	UNRESTRICTED	
1712 SECOND AVENUE NORTH LAKE WORTH, FL 33460				2,00
ALLIANCE FOR EATING DISORDERS	NONE	PC	UNRESTRICTED	
1649 FORUM PLACE, #2 WEST PALM BEACH, FL 33401			<u> </u>	3,50
	•			
ALZHEIMERS COMMUNITY CARE	NONE	PC	UNRESTRICTED	
800 NORTHPOINT PKWY #101 WEST PALM BEACH, FL 33407				5,00
AMERICAN CANCER SOCIETY	NONE	₽C	UNRESTRICTED	
32 EAST LAS OLAS BOULEVARD FORT LAUDERDALE, FL 33309				5,00
AMERICAN HEART ASSOCIATION	NONE	₽C	UNRESTRICTED	
6444 NW 5TH WAY FORT LAUDERDALE, FL 33309				5,00
	ONTINUATION SHE	T(S)	▶ 3a	403,00
b Approved for future payment				· · · · ·
NONE				
				····
Total	<u> </u>		▶ 3b'	

Part XVI-A Analysis of Income-Pro	ducing Activities
-----------------------------------	-------------------

	T Unrelated	business income	Excluded b	y section 512, 513, or 514	(e)
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		Code		
h	\ 				
c			+		
d			+		
e					
1	 -				
g Fees and contracts from government agencies	f				
2 Membership dues and assessments					
3 Interest on savings and temporary cash	 	. .	7		
Investments			14	75,729.	
4 Dividends and interest from securities	 		14	75,729. 327,116.	
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		<u> </u>			
than inventory			18	48,676.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					~ <u></u>
11 Other revenue:					
a	1 1			1	
b					
C					
d					
е					
12 Subtotal. Add columns (b), (d), and (e)		0		451,521.	0.
13 Total. Add line 12, columns (b), (d), and (e)	*			13	451,521.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accor	nplishment of E	Exempt P	urposes	
Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other than			-A contributed	importantly to the accomp	lishment of
NOT APPLICABLE					
			_		
		····			
					
		· · · · · · · · · · · · · · · · · · ·	-	·····	· · · · · · · · · · · · · · · · · · ·
		<u>-</u>			

Part AVII	Exempt Organ		ieis IU	and mansact	iviis ali	iu Heiations	inps with Noncha			
1 Did the oi	rganization directly or indi		f the follows	ng with any other or	ganization	described in sect	on 501(c) of		Yes	No
	(other than section 501(c									
	from the reporting found							1 -		
(1) Cash	l							1a(1)	ļ—.	X
(2) Othe	r assets							1a(2)		X
b Other tran	isactions:									
(1) Sales	s of assets to a noncharita	able exempt organization	on					16(1)		X
(2) Purc	hases of assets from a no	oncharitable exempt or	ganization					1b(2)	↓	X
(3) Rent	al of facilities, equipment,	or other assets						15(3)		X
(4) Reim	bursement arrangements	3						1b(4)	<u> </u>	X
(5) Loan	s or loan guarantees							1b(5)	-	X
(6) Perfo	ormance of services or mi	embership or fundraisi	ing solicitati	ons				1b(6)	ļ	X
_	of facilities, equipment, ma	- '						1c	ــــــــــــــــــــــــــــــــــــــ	X
							narket value of the goods,		sets,	
					rket value	in any transaction	or sharing arrangement, s	snow in		
,	d) the value of the goods,					1 (4) -	· . · . · · · · · · · · · · · · · · · ·			
(a)Line no	(b) Amount involved	1	noncharitabi	e exempt organizati	on	(0) Description	of transfers, transactions, and	sharing a	rangeme	nts
		N/A		 						
							<u> </u>			
		ļ								
				 			 	_		
										
							···			
				•						
ın section	ndation directly or indirectly or indirect 501(c) of the Code (other omplete the following school (a) Name of organization	r than section 501(c)(nedule.		<u>.</u>			(c) Description of relations	Yes	X] No
			 <u></u>	ļ						
							-			
										
Under	penalties of perjury, I peclare	that knave examined this	return, includi	ng accompanying sched	lules and sta	atements, and to the	best of my knowledge	y the IRS	digeries	hie
Sign Here	eliefat is true, correct/and co	property Declaration of prep	parer (other tha	an taxpayer) is based on MAY 0 4		lon of which prepare	reto	om with the	e prepar (see ins	er tr)?
 	nature of officer or trustee			Date		Title	[_ <u></u>	X Yes	· L	J No
Oigi	Print/Type preparer's n	Τ.	Dranararie e		<u> </u>		Check if PTIN			
	1 ** ' '		Preparer's s	1/ 1/	// /	Date	self- employed			
Paid	WILLIAM K.	CALEK,	[[].	Unulla	M you	AY 0 4 2017		0039	602	
	JR.	ED DOMES	T TET	TAID DO 37		7				
Preparer	Firm's name ► CAL	EK, DONTEN	и, ГЕЛ	INE ET AI	, P.	А.	Firm's EIN ► 59-2	0314	OΤ	
Use Only	Fileda address a F O	A A A T T T T T T T T T T T T T T T T T					ļ			
	Firm's address ► 50						564.0	20 0	200	
	WE	ST PALM BE	SACH,	FL 33401-	-5948		Phone no. 561-8			
							Fe	orm 99 0	D-PF	(2010)

JOHN E & WELLTE						IAMI IV
MEMORIAL FOUNDAT			61606	94 F	AGE 1	OF 1
Part IV Capital Gains and Lo				Z/33/18/19/19/19/19		
(a) List and 2-story br	d describe the kind(s) of property sol rick warehouse; or common stock, 2	d, e.g., real estate, 00 shs. MLC Co.		P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a K-1 ICAHN ENTE	RPRISES		· · ·			
b K-1 STONEMOR P.						
c BASIS ADJUSTME	NT MEMORIAL PROD	PTR LP				
	NT ICAHN ENTERPR			 		
e MORGAN STANLEY				· · · · · · · · · · · · · · · · · · ·		
f RAYMOND JAMES		*		 	 	
g CAPITAL GAINS	DIVIDENDS			 	 	
	<u> </u>			-	 	
<u>h</u>					 	
<u> </u>						
1		~		 	-	
<u>k</u>					_	
						
m				ļ. <u>-</u>	ļ	
<u>n</u>		······································			-	
0			· · · · · · · · · · · · · · · · · · ·		<u> </u>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (loss) blus (f) minus (g)	
a 69.				- <u></u>		69.
b 15.						15.
c 27,659.						27,659.
d 11,796.						11,796.
e 297,581.		290,38	0.			7,201.
1,417,767.		1,397,58				20,185.
21 200		2,337,30		 		21,290.
g 21,290.			-			21,250.
1						
			 			
1						
k					<u></u>	
1						
<u>m</u>						
n						
Complete only for agests chayen	ig gain in column (h) and owned by t	the foundation on 10 /01 /00				
Complete only for assets showin		····	_		ses (from col. (h))	aal (k)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis	(k) Excess of col. (i)	- 1	but n	of col. (h) gain over ot less than "-0-")	coi. (k),
	as of 12/31/69	over col. (j), if any				
<u>a</u>						69.
b						15.
С						27,659.
d						11,796.
е						7,201.
f						20,185.
g						21,290.
h				·		
l				 		
						
k						
1						
m			 			
n		·	_			
0						
<u> </u>						
A Canital gain not income or fact on	pital loss) { If gain, also enter "-0"	in Part I, line 7				00 015
2 Capital gain net income or (net cap			2			88,215.
3 Net short-term capital gain or (los		d (6):				
If gain, also enter in Part I, line 8, (þ			34 / 5	
If (loss), enter "-0-" in Part I, line 8			3		N/A	

Part XV Supplementary Information 3 Grants and Contributions Paid During the		_ 		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
AMERICAN LUNG ASSOC OF FLORIDA 2020 SOUTH ANDREWS AVENUE	NONE	PC	UNRESTRICTED	
FORT LAUDERDALE, FL 33301		Ĺ		3,000.
AMERICAN RED CROSS & RED CROSS DISASTER RELIEF	NONE	₽C	UNRESTRICTED	
825 FERN STREET WEST PALM BEACH, FL 33401				20,000.
AMVETS	NONE	PC	UNRESTRICTED	
2450 NE 51ST STREET SUITE 11				
FORT LAUDERDALE, FL 33308		 		7,500.
ANN STOCK CENTER	NONE	PC	UNRESTRICTED	
1790 SW 43RD WAY FORT LAUDERDALE, FL 33317				2,000.
AUTISM RESEARCH INSTITUTE	NONE	PC	UNRESTRICTED	
4182 ADAMS AVENUE	10.12		DAMAD TATOLOG	
SAN DIEGO, CA 92116		<u> </u>		5,000.
BIG BROTHERS & BIG SISTERS BROWARD	NONE	₽C	UNRESTRICTED	1
4101 RAVENSWOOD ROAD SUITE 226 FORT LAUDERDALE, FL 33312				2,000.
		 	 	1
BIT BY BIT THERAPY	NONE	PC	UNRESTRICTED	}
8000 NW 84TH AVENUE	10.12		DIREGIRICIED	
PARKLAND, FL 33067			<u></u>	5,000.
		1		1
BOY SCOUTS OF AMERICA	NONE	₽C	UNRESTRICTED	l
15255 NW 82 AVENUE PARKLAND, FL 33067		l		2,000.
111111111111111111111111111111111111111			<u> </u>	2,000.
BOYS AND GIRLS CLUBS OF BROWARD	NONE	PC	UNRESTRICTED	
COUNTY 877 NW 61ST STREET	•			\
FORT LAUDERDALE, PL 33309				5,000.
BOYS AND GIRLS CLUBS OF THE PALM	NONE	PC	UNRESTRICTED	
BEACHES		[
800 NORTHPOINT PARKWAY SUITE 204 WEST PALM BEACH, FL 33407			1	5 000
Total from continuation sheets	-	<u> </u>	<u> </u>	5,000. 382,500.

3 Grants and Contributions Paid During the				<u> </u>
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	-	
BREAD OF THE MIGHTY FOOD BANK	NONE	РC	UNRESTRICTED	
PO BOX 5086		}		4,00
GAINESVILLE, FL 32627		 -		-,,,
BREAST CANCER FOUNDATION	NONE	PC	UNRESTRICTED	
2600 NETWORK BLVD., SUITE 300				
FRISCO, TX 75034		 		5,00
BROWARD CHILDREN'S CENTER, INC.	NONE	PC	UNRESTRICTED	
200 SE 19TH AVENUE POMPANO BEACH, FL 33060)		5,00
BROWARD MEALS ON WHEELS	NONE	₽C	UNRESTRICTED	
451 N STATE RD 7		1		
PLANTATION, FL 33317				2,50
BROWARD PUBLIC LIBRARY FOUNDATION 100 SOUTH ANDREWS AVENUE	NONE	PC	UNRESTRICTED	
FORT LAUDERDALE, FL 33301				4,00
BROWARD SPECIAL OLYMPICS	NONE	₽C	UNRESTRICTED	
5101 NW 21ST AVENUE SUITE 440				
FORT LAUDERDALE, FL 33309				2,000
C.R.O.S MINISTRIES 301 FIRST AVENUE	NONE	₽C	UNRESTRICTED	1
LAKE WORTH, FL 33460				3,000
CANINE COMPANIONS FOR INDEPENDENCE	NONE	PC	UNRESTRICTED	
PO BOX 680388			}	
ORLANDO, FL 32868			 	2,000
ENTER FOR CHILD COUNSELING	NONE	PC	UNRESTRICTED	
7731 N. MILITARY TRAIL	10012		OHRESIKICIED	
PALM BEACH GARDENS, FL 33410	 			3,500
CHILDREN'S HOME SOCIETY OF FLORIDA	NONE	PC	UNRESTRICTED	
101 NE 4TH STREET FORT LAUDERDALE, FL 33301				1,000
Total from continuation sheets		<u> </u>		

Part XV Supplementary Information				·
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
CHILDREN'S PLACE AT HOMESAFE, INC.	NONE	PC	UNRESTRICTED	ì
2840 6TH AVE S LAKE WORTH, FL 33461		l		2,000.
DARD WORTH, PH 33401		 	 	2,000.
				1
CHILDREN'S TUMOR FOUNDATION 95 PINE STREET 16TH FLOOR	NONE	PC	UNRESTRICTED	
NEW YORK, NY 10005				5,000.
COOPERATIVE FEEDING PROGRAM	NONE	PC	UNRESTRICTED	1
1 NW 33RD TERRACE				}
FORT LAUDERDALE, FL 33311		ļ	 	2,000.
CROHN'S & COLITIS FOUNDATION OF	NONE	PC PC	UNRESTRICTED	
AMERICA				}
386 PARK AVE SOUTH		,		
NEW YORK, NY 10016	 	 	 	5,000.
DIABETES RESEARCH INSTITUTE 200 S. PARK RD, STE 100	NONE	PC	UNRESTRICTED	{
HOLLYWOOD, FL 33021		<u> </u>	}	4,000.
DUKE CHILDRENS HOSPITAL	NONE	PC	ADVO E GEO T GEED	<u> </u>
2301 ERWIN ROAD	HONE		UNRESTRICTED	}
DURHAM, NC 27710			<u> </u>	5,000.
		\		
DUKE COMPREHENSIVE CANCER CENTER	NONE	PC	UNRESTRICTED	
DUMC 3827		Ì		
DURHAM, NC 27710	- 	 	 	5,000.
EPISCOPAL CHURCH OF ST. MARK THE	NONE	PC	UNRESTRICTED	
EVANGELIST		ļ	}	I
1750 EAST OAKLAND PARK BOULEVARD FORT LAUDERDALE, FL 33334				5 000
, 12 333		 	 	5,000.
Building County Hyper-				
FEEDING SOUTH FLORIDA 2970 NW 27TH STREET	NONE	PC I	UNRESTRICTED	
FORT LAUDERDALE, FL 33311	}			3,000.
FIRST PRESBYTERIAN CHURCH OF NPB	NONE	PC	UNRESTRICTED	
717 PROSPERITY FARMS RD	1			
NORTH PALM BEACH, FL 33408		<u> </u>		5,000.
Total from continuation sheets				<u> </u>

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	00.11.00.10.11	
FISHER HOUSE FOUNDATION, INC.	NONE	₽C	UNRESTRICTED	
111 ROCKVILLE PIKE, SUITE 420				5,00
ROCKVILLE, MD 20850	 	 	 	, , , , , , , , , , , , , , , , , , ,
FLORENCE FULLER CHILD DEVELOPMENT	NONE	₽C	UNRESTRICTED	
CENTERS 200 NE 14TH STREET				
BOCA RATON, FL 33432		<u> </u>		5,00
FLORIDA LIONS EYE BANK	NONE	PC	UNRESTRICTED	
PO BOX 016880				
MIAMI, FL 33101	-	 		2,000
FLORIDA SHERIFF'S YOUTH RANCH	NONE	PC	UNRESTRICTED	
PO BOX 2000 BOYS RANCH, FL 32060				3,000
	 	 		
FLORIDA'S CHILDREN FIRST	NONE	₽C	TOTO TI COMP TI COMP D)
1801 N UNIVERSITY DR # 3B	HOME		UNRESTRICTED	ł
CORAL SPRINGS, FL 33071		ļ		5,000
]
FORT LAUDERDALE AREA YOUTH FOR CHRIST	NONE	₽C	UNRESTRICTED	
675 NORTHWEST 22ND ROAD				2 000
FT. LAUDERDALE, FL 33311	 	 	<u> </u>	2,000
				}
FORT LAUDERDALE CHILDREN'S THEATRE 2542B EAST SUNRISE BOULEVARD	NONE	PC	UNRESTRICTED	
FORT LAUDERDALE, FL 33304				2,000
	}	}		
FOUNDATION FIGHTING BLINDNESS	NONE	₽C	UNRESTRICTED	
5310 NW 33RD AVENUE SUITE 219				
FORT LAUDERDALE, FL 33309		 		5,000
FRIENDS OF ABUSED CHILDREN	NONE	PC	UNRESTRICTED	1
222 LAKEVIEW AVE WEST PALM BEACH, FL 33401				1,000
			† 	
GILDA'S CLUB OF SOUTH FLORIDA	NONE	PC	TIMB P CAR T CARD	
119 ROSE DRIVE			UNRESTRICTED	
FORT LAUDERDALE, FL 33316	<u> </u>		<u> </u>	2,000
Total from continuation sheets				

Part XV Supplementary Information				<u></u>
3 Grants and Contributions Paid During the Y	ear (Continuation) If recipient is an individual,			
Recipient Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
ivalite and address (notice of business)	or substantial contributor	recipient	 	
				1
GOSHEN VALLEY FOUNDATION 387 GOSHEN CHURCH WAY	NONE	PC	UNRESTRICTED	
WALESKA, GA 30183		1		5,000.
GUIDING EYES FOR THE BLIND	NONE	PC	UNRESTRICTED	
611 GRANITE SPRINGS ROAD	102.2	[
YORKTOWN, NY 10598				2,000.
HABITAT FOR HUMANITY OF BROWARD, INC.	NONE	PC	UNRESTRICTED	
3564 NORTH OCEAN BOULEVARD				
FORT LAUDERDALE, FL 33308		 		5,000.
HABITAT FOR HUMANITY OF PALM BEACH	NONE	PC	UNRESTRICTED	
COUNTY				1
6758 N MILITARY TRAIL, STE 301	l ₁	•		
RIVIERA BEACH, FL 33407		 	 	2,000.
				1
HANDY, INC 501 NE 8TH STREET	NONE	PC	UNRESTRICTED	
FORT LAUDERDALE, FL 33304				5,000.
				
HENDERGON MENTAL MANUAL ARMED				
HENDERSON MENTAL HEALTH CENTER 4740 NORTH STATE ROAD 7 BUILDING B	NONE	PC	UNRESTRICTED	
FORT LAUDERDALE, FL 33319				2,000.
	•			
HOLY CROSS HOSPITAL	NONE	₽C	UNRESTRICTED	
4725 NORTH FEDERAL HIGHWAY		}	Ì	
FORT LAUDERDALE, FL 33308		ļ ————	ļ	20,000.
HOSPICE & HOMECARE BY THE SEA	NONE	PC	UNRESTRICTED	
1531 W PALMETTO PARK ROAD BOCA RATON, FL 33486		j		F 000
BOCK RATON, FE 33400		 		5,000.
HOCDICE CARE OF COMMUNICATION	Lyony			
HOSPICE CARE OF SOUTHEAST FLORIDA 309 SE 18TH STREET	NONE	PC 	UNRESTRICTED	
FORT LAUDERDALE, FL 33316				5,000.
				1
HOUSE OF HOPE & STEPPING STONE	NONE	PC	UNRESTRICTED	
908 SW 1ST STREET		[]		
FORT LAUDERDALE, FL 33312			<u> </u>	2,000.
Total from continuation sheets				

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
INSIGHT FOR THE BLIND	NONE	PC	UNRESTRICTED	
1401 NE 4TH AVENUE				
FORT LAUDERDALE, FL 33304		 		2,000
JACK & JILL CHILDRENS CENTER	NONE	РC	UNRESTRICTED	
1315 W BROWARD BOULEVARD		Į .		į.
FORT LAUDERDALE, FL 33312		 		5,000
JEWISH FAMILY SERVICES OF BROWARD	NONE	₽C	UNRESTRICTED	ļ
COUNTY	,,,,,,	آ		
100 SOUTH PINE ISLAND ROAD SUITE 230		1		
PLANTATION, FL 33324		<u> </u>		1,000
JUNIOR ACHIEVEMENT	NONE	PC	UNRESTRICTED	
2335 E. ATLANTIC BOULEVARD SUITE 200			•	1
POMPANO BEACH, FL 33062		L	1	5,000
JUVENILE DIABETES RESEARCH	NONE	PC	INID DOME TO MED	
1450 CENTREPARK BOULEVARD SUITE 330	NONE		UNRESTRICTED	
WEST PALM BEACH, FL 33401				2,000
				<u> </u>
KIDNEY FOUNDATION OF SOUTH FLORIDA 2561 CORAL WAY	NONE	PC	UNRESTRICTED	
CORAL GABLES, FL 33145		l		2,000
			 	2,000
KIDS IN DISTRESS	NONE	PC	UNRESTRICTED	
819 NORTHEAST 26TH STREET FORT LAUDERDALE, FL 33305		1		F 000
ONI DAODENDADE, IL 33303	 			5,000
LEUKEMIA & LYMPHOMA SOCIETY	NONE	PC	UNRESTRICTED	ll
4360 NORTHLAKE BOULEVARD SUITE 109				
PALM BEACH GARDENS, FL 33410	 		 	2,500
LIFELINE FAMILY CENTER	NONE	PC	UNRESTRICTED	
907 SW 5TH AVENUE		ļ		
CAPE CORAL, PL 33090	-	ļ		5,000
LITERACY COALITION OF PALM BEACH	NONE	PC	UNRESTRICTED	ı
COUNTY		[_		
551 SE 8TH STREET		}		
DELRAY BEACH, PL 33483	<u> </u>			1,000
Total from continuation sheets				

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
LOCKS OF LOVE	none	₽C	UNRESTRICTED	ł
2925 10TH AVENUE NORTH SUITE 102		İ		5.01
LAKE WORTH, FL 33461	 	 	 	5,00
LOUISIANA STATE UNIVERSITY	NONE	₽C	UNRESTRICTED	
3418 PATRICK F. TAYLOR HALL	10142		ORRESTRICTED]
BATON ROUGE, LA 70803				5,00
				ļ
MAKE-A-WISH FOUNDATION	none	₽C	UNRESTRICTED	
4491 SOUTH STATE ROAD 7 SUITE 201		}	}	
FORT LAUDERDALE, FL 33314			 	3,00
MARCH OF DIMES	NONE	₽C	UNRESTRICTED	
712 NE 13 COURT	NONE		DWRESTRICTED	
FORT LAUDERDALE, FL 33304	}			2,00
MD ANDERSON CANCER CENTER	NONE	PC	UNRESTRICTED	
1400 S ORANGE AVENUE				
ORLANDO, FL 32806	1		<u> </u>	3,00
MEALS ON WHEELS 1300 S SOLIVE AVENUE	NONE	₽C	UNRESTRICTED	
WEST PALM BEACH, FL 33401				5,00
				·
NATIONAL MULTIPLE SCHLEROSIS SOCIETY	NONE	PC	UNRESTRICTED	
3201 W COMMERCIAL BOULEVARD SUITE 8				
FORT LAUDERDALE, FL 33309		 		2,00
				i I
WATIONAL OVARIAN CANCER COALITION 500 NE SPANISH RIVER BOULEVARD SUITE 8	NONE	PC	UNRESTRICTED	
BOCA RATON, FL 33431		ļ		5,00
NATIONAL PARKINSON FOUNDATION	NONE	PC	UNRESTRICTED	
501 NW 9TH AVENUE			[
MIAMI, FL 33145	 	<u> </u>		2,00
OPPORTUNITY EARLY LEARNING CENTER 713 QUAIL DRIVE	none	PC	UNRESTRICTED	
VEST PALM BEACH, PL 33414			1	2,00
Total from continuation sheets	L	·	\	

Part XV Supplementary Informatio				
3 Grants and Contributions Paid During the	If recipient is an individual,		<u> </u>	
Recipient Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
ivalite and address (notife of pusitess)	or substantial contributor	recipient	 	
OUR SAVIOR LUTHERAN CHURCH	NONE	₽C	UNRESTRICTED	
8001 NW 5TH STREET				3,000
PLANTATION, FL 33324				3,000
PACE CENTER FOR GIRLS OF BROWARD	NONE	₽C	UNRESTRICTED	
2225 NORTH ANDREWS AVENUE	NONE		ORKBOTKICIED	
WILTON MANORS, FL 33311				2,000
PALM BEACH ATLANTIC UNIVERSITY PAUL	NONE	PC	UNRESTRICTED	
C. BREMER ENDOWED	NO.		DARBBIRICIBB	
901 S. FLAGLER DRIVE				
WEST PALM BEACH, FL 33401				10,000
PALM BEACH GARDENS YOUTH ATHLETIC	NONE	PC	UNRESTRICTED	
ASSOCIATION				
425 E LAKEWOOD RD				
WEST PALM BEACH, FL 33405		ļ		2,000.
				1
PARALYZED VETERANS OF AMERICA	none	₽C	UNRESTRICTED	
801 EIGHTEEN STREET NW				
WASHINGTON, DC 20006				1,000.
PEDIATRIC ONCOLOGY SUPPORT TEAM 5325 GREENWOOD AVE STE 301	NONE	PC	UNRESTRICTED	
WEST PALM BEACH, FL 33407				4,000.
				,-
PLACE OF HOPE	NONE	₽C	UNRESTRICTED	1
9078 ISAIAH LANE			DAKESIKICIED	ļ
PALM BEACH GARDENS, FL 33418				10,000.
		l		
QUANTUM HOUSE	NONE	PC	UNRESTRICTED	
901 45TH STREET				
WEST PALM BEACH, FL 33407				10,000.
REHABILITATION CENTER FOR CHILDREN	NONE	PC	UNRESTRICTED	
AND ADULTS		1		
300 ROYAL PALM WAY				
PALM BEACH, FL 33480			-	2,000.
SALVATION ARMY	NONE	PC	UNRESTRICTED	
1445 WEST BROWARD BOULEVARD FORT LAUDERDALE, FL 33312		ŀ		5,000.
Total from continuation sheets		L		3,000.

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (nome or business)	or substantial contributor	recipient		
SAWGRASS NATURE CENTER & WILDLIFE	NONE	PC	UNRESTRICTED	
HOSPITAL 3000 SPORTSPLEX DR				
CORAL SPRINGS, FL 33065		j		2,500
				
SEAGULL INDUSTRIES FOR THE DISABLED 3879 WEST INDUSTRIAL WAY	NONE	₽C	UNRESTRICTED	
RIVIERA BEACH, FL 33404				2,000
SHERIDAN HOUSE FAMILY MINISTRIES	NONE	PC	UNRESTRICTED	
4200 SW 54TH COURT				
FORT LAUDERDALE, FL 33314				4,000
SOS CHILDREN'S VILLAGE	NONE	₽C	UNRESTRICTED	
3681 NW 59 PLACE		[
COCONUT CREEK, FL 33073				4,000
SOUTH FLORIDA BLOOD BANK FOUNDATION	NONE	ng.	TOWN DAMES TOWN	
8669 COMMODITY CIRCLE	NONE	₽C	UNRESTRICTED	
ORLANDO, FL 32819				2,000
				<u> </u>
SOUTHEAST FLORIDA HONOR FLIGHT, INC. PO BOX 1503	NONE	PC	UNRESTRICTED	
STUART, FL 334995				2,000
3.0				2,000
T. JUDE CHILDREN'S RESEARCH HOSPITAL	NONE	₽C	UNRESTRICTED	
501 ST. JUDE PLACE MEMPHIS, TN 38105				5
ALMERIS, IN 30105			 	5,000.
				ļ
PAKE STOCK IN CHILDREN	NONE	PC	UNRESTRICTED	
500 SE 3RD AVENUE 8TH FLOOR				
FORT LAUDERDALE, FL 33301				5,000.
			}	!
HE HAVEN	NONE	PC	UNRESTRICTED	
1441 BOCA RIO ROAD			1	
OCA RATON, FL 33433				5,000.
HE LORD'S PLACE	NONE	PC	UNRESTRICTED	
2600 SUNSET CROSSING RD			DIRECTED	
IAMOND BAR, CA 91765				2,000.
Total from continuation sheets				

3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	
NITED CEREBRAL PALSEY OF BROWARD CO	NONE	PC	UNRESTRICTED	
INC				
3117 SW 13TH COURT				
FORT LAUDERDALE, FL 33312				2,00
JNIV OF FLORIDA COLLEGE OF MEDICINE	NONE	₽C	UNRESTRICTED	
UNIVERSITY OF FLORIDA COMMUNTY				
DEVELOPMENT OFFICE PO BOX 100243				
GAINESVILLE, FL 32610		<u> </u>		5,00
UNIVERSITY OF FLORIDA INSTITUTE ON	NONE	PC	UNRESTRICTED	
AGING				
PO BOX 100107			1	
GAINESVILLE, FL 32610				4,00
URBAN YOUTH IMPACT	NONE	₽C	UNRESTRICTED	
2823 N. AUSTRALIAN AVE				
WEST PALM BEACH, FL 33407				2,00
VETERANS OF FOREIGN WARS FOUNDATION	none	₽C	UNRESTRICTED	
406 WEST 34TH STREET SUITE 514				
KANSAS CITY, MO 64111		<u> </u>		1,00
WEST PALM BEACH LIBRARY FOUNDATION	NONE	₽C	UNRESTRICTED	
411 CLEMATIS STREET				
WEST PALM BEACH, FL 33401		····		2,00
WOMEN IN DISTRESS OF BROWARD	NONE	PC	UNRESTRICTED	
PO BOX 676 FORT LAUDERDALE, FL 33302				5,00
			 	
Total from continuation sheets	<u> </u>	1		

FORM 99	00-PF	GAIN OR	(LOSS)	FROM	SALE	OF	ASSETS		STA	TEMEN'	T 1
DESCRIP	(A) PTION OF PROPERT	Y					MANNER ACQUIREL		ATE JIRED	DATE	SOLD
K-1 ICA	AHN ENTERPRISES										
	(B) GROSS	COST	C) F OR	EXI	(D) PENSE	OF	(E			(F)	
	SALES PRICE	OTHER	BASIS		SALE		DEPR	EC.	GAIN	OR LO	oss
	69.		69	•		0	•	0.			0.
DESCRIP	(A) TION OF PROPERT	Y					MANNER ACQUIRED		ATE JIRED	DATE	SOLD
K-1 STO	NEMOR PARTNERS	LP							-		
	(B)	(((D)		(E	:)		(F)	
	GROSS SALES PRICE	COST OTHER		EXI	PENSE SALE	OF	DEPR	EC.	GAIN	OR LO	oss
	15.		15	•		0.	•	0.			0.
DESCRIP	(A) TION OF PROPERT	Y				2	MANNER ACQUIRED	-	TE VIRED	DATE	SOLD
BASIS A	DJUSTMENT MEMOR	— IAL PROI	PTR LI	?							
	(B)	(0			(D)		(E	;)		(F)	
	GROSS SALES PRICE	COST OTHER		EXI	PENSE	OF	DEPR	EC.	GAIN	OR LO	oss
	27,659.		27,659			0.		0.			0.

DESCRIE	(A) PTION OF PROPERTY				MANNER CQUIRED		TE	DATE	SOLD
BASIS A	ADJUSTMENT ICAHN	ENTERPRISES LP		•					
	(B)	(C)	(D)	0.17	(E)			(F)	
	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE SALE	OF	DEPRE	c.	GAIN	OR L	oss
	11,796.	11,796.		0.		0.			0.
DESCRI	(A) PTION OF PROPERTY				MANNER CQUIRED		TE VIRED	DATE	SOLD
MORGAN	STANLEY	_							
	(B)	(C)	(D)		(E)			(F)	
	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE SALE	OF	DEPRE	c	GAIN	OR L	oss
	297,581.	290,380.		0.		0.		7	,201.
DESCRIE RAYMONI	(A) PTION OF PROPERTY D JAMES	-			MANNER CQUIRED		TE VIRED	DATE	SOLD
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	c.	GAIN	(F)	oss
	1,417,767.	1,397,582.	., 	0.		0.		20	,185.
DESCRI	(A) PTION OF PROPERTY				MANNER CQUIRED		TE URED	DATE	SOLD
CAPITAL	GAINS DIVIDENDS	_							
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	c.		(F)	oss
	21,290.	0.		0.		0.		21	,290.
CAPITAI	L GAINS DIVIDENDS	FROM PART IV							0.
	TO FORM 990-PF, P							48	,676.

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY CAS	H INVESTMENTS	STATEMENT 2
SOURCE		(A REVE PER B	NUE NE	(B) I INVESTMENT INCOME	(C) ADJUSTED NET INCOME
INTEREST INCOME		7	5,729.	72,123.	
TOTAL TO PART I, LI	INE 3	7	5,729.	72,123.	
FORM 990-PF	DIVIDEND	S AND INTER	EST FROM S	ECURITIES	STATEMENT 3
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVEN		
DIVIDENDS & INTEREST INCOME	327,116	•	0. 327,	116. 320,96	52.
TO PART I, LINE 4	327,116	•	0. 327,	320,96	52.
FORM 990-PF		ACCOUNTI	NG FEES		STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
ACCOUNTING FEES	_	13,485.	4,04	16.	9,439.
TO FORM 990-PF, PG	1, LN 16B	13,485.	4,04	16.	9,439.
FORM 990-PF		TAX	ES		STATEMENT 5
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
FOREIGN TAX PAYROLL TAXES		1,819. 1,701.	1,96	.0.	0. 1,191.
TO FORM 990-PF, PG	1, LN 18	3,520.	2,47	79.	1,191.

FORM 990-PF	OTHER E	XPENSES		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INSURANCE EXPENSE	1,954.	586.		1,368.
OFFICE EXPENSE	794.			556.
POSTAGE	145.			102.
TELEPHONE	1,442.	433.		1,009.
TO FORM 990-PF, PG 1, LN 23	4,335.	1,300.		3,035.
FORM 990-PF DEPRECIATION	OF ASSETS NOT	·	/ESTMENT	STATEMENT 7
DESCRIPTION		ACCUMULATED DEPRECIATION	BOOK VALUE	FAIR MARKET VALUE
FILE CABINETS	149.	149.	0.	0.
PEDESTAL	129.	129.	0.	
COPIER	600.	600.	0.	0.
FURNITURE	1,418.	1,418.	0.	
TYPEWRITER	500.	500.	0.	
SOFTWARE	265.	265.	0.	.
MONITOR/PRINTER	454.	454.	0.	
COMPUTER	1,023.	1,023.	0.	
BROTHER PRINTER	397.	356.	41.	
OFFICE EQUIPMENT	694.	528.	166.	166.
TO 990-PF, PART II, LN 14	5,629.	5,422.	207.	207.
FORM 990-PF U.S. AND	STATE/CITY G	OVERNMENT OBL	IGATIONS	STATEMENT 8
DESCRIPTION	U.S GOV'		OK VALUE	FAIR MARKET VALUE
GNMA SECURITIES	x		35,447.	7,225.
TOTAL U.S. GOVERNMENT OBLIG	ATIONS		35,447.	7,225.
TOTAL STATE AND MUNICIPAL G	OVERNMENT OBL	IGATIONS		

²⁸ STATEMENT(S) 6, 7, 8 10330504 139979 001084.000T 2016.03040 JOHN E & NELLIE J BASTIEN M 001084_1

FORM 990-PF C	CORPORATE STOCK		STATEMENT 9
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
PREFERRED STOCKS COMMON STOCK MUTUAL FUNDS PUBLICLY TRADED PARTNERSHIPS		680,000. 4,509,284. 2,212,364. 42,739.	720,301. 5,555,202. 2,209,200. 15,147.
TOTAL TO FORM 990-PF, PART II, LI	NE 10B	7,444,387.	8,499,850.
FORM 990-PF C	CORPORATE BONDS		STATEMENT 10
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
TEXTRON INC ALCOA INC GOLDMAN SACHS GROUP INC VERIZON COMMUNICATIONS AT&T INC CVS HEALTH CORP FEDEX CORP UNITED HEALTH GROUP WELLS FARGO & CO		47,981. 0. 106,625. 98,250. 105,007. 107,159. 100,048. 103,196. 103,081.	51,769. 0. 100,122. 96,591. 101,115. 103,160. 99,667. 100,343. 101,319.
TOTAL TO FORM 990-PF, PART II, LI	NE 10C	771,347.	754,086.
FORM 990-PF	OTHER ASSETS		STATEMENT 11
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
REFUNDABLE SECURITY DEPOSIT	1,277.	1,277.	1,277.
TO FORM 990-PF, PART II, LINE 15	1,277.	1,277.	1,277.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

12

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

N/A

FORM AND CONTENT OF APPLICATIONS

LETTER SUPPORTING FUNDING NEED AND COPY OF IRS DETERMINATION FOR CHARITABLE ORGANIZATION

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

N/A

990-PF AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS

STATEMENT

13

NAME OF AFFILIATED OR RELATED ORGANIZATION

N/A

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

PART XVII, LINE 2, COLUMN (C)

N/A

2016 DEPRECIATION AND AMORTIZATION REPORT

FORM	FORM 990-PF PAGE 1						990-PF							!
Asset No	Description	Date Acquired	Method	Life	C LINB	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	1 FILE CABINETS	04/23/92	SĽ	7.00	16	149.				149.	149.		0	149.
	2 PEDESTAL	06/23/94	SL	7.00	16	129.	ı			129.	129.		0	129.
	3 COPIER	03/15/96	SL	7.00	16	600.		;	-	600.	600.		0.	.009
	4 FURNITURE	TS 96/80/80	SL	7.00	91	1,418.	!			1,418.	1,418.		0	1,418.
	5 TYPEWRITER	09/27/00 SL	SL	7.00	7 6	500.		,	į	500.	500.		0	500.
	6 SOFTWARE	05/26/04 SL	SL	3.00	16	265.				265.	265.		0	265.
	7 MONITOR/PRINTER	05/26/04 SL	SL	7.00	- - 1	454.	}	!		454.	454.		0	454.
	8 COMPUTER	09/14/05 SL	TS ST	7.00	16	1,023.				1,023.	1,023.		0	1,023.
J1	9 BROTHER PRINTER	09/12/07 SL	SL	7.00	<u> 1</u>	397.	,		-	397.	356.		0	356.
_ _	10 OFFICE EQUIPMENT	02/01/12 SL	SL	7.00	9	694.	1	i	-	694.	429.		. 66	528.
	* TOTAL 990-PF PG 1 DEPR			-		5,629.	1	;		5,629.	5,323.		•66	5,422.
<u></u>		,				,	1 1							
							1							
	,					i.	•					1		
						;	1		·- ·					-
ŧ	1			-		,	;	,					,	
				-				,						
628111 (628111 04-01-16				$\left\{ \right.$	(D) - Asset disposed	peso			ITC, Salvage,	Bonus, Comm	nercial Revita	lization Deduc	* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone