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For calendar year 2016, or tax year beginning 01-01-2016, and ending 12-31-2016

Name of foundation THE PAUL J DIMARE FOUNDATION		A Employer identification number 65-0537843	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 900460		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code HOMESTEAD, FL 330900460		B Telephone number (see instructions) (305) 245-4211	
G Check all that apply <div><input type="checkbox"/> Initial return</div> <div><input type="checkbox"/> Initial return of a former public charity</div> <div><input type="checkbox"/> Final return</div> <div><input type="checkbox"/> Amended return</div> <div><input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 47,846,911		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) (Part I, column (d) must be on cash basis)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	500			
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	209	209		
	4 Dividends and interest from securities	1,908,079	1,908,079		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	-687,335			
	b Gross sales price for all assets on line 6a	10,206,140			
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	1,221,453	1,908,288		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)				
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	179,507	0		0
	24 Total operating and administrative expenses. Add lines 13 through 23	179,507	0		0
	25 Contributions, gifts, grants paid	1,816,620			1,816,620
	26 Total expenses and disbursements. Add lines 24 and 25	1,996,127	0		1,816,620
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-774,674			
	b Net investment income (if negative, enter -0-)		1,908,288		
c Adjusted net income(if negative, enter -0-)					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing	-229,020	96,295	96,295
	2	Savings and temporary cash investments	727,262		
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	28,278,920	27,771,163	29,578,465
	c	Investments—corporate bonds (attach schedule)	17,721,987	18,172,151	18,172,151
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	46,499,149	46,039,609	47,846,911	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable.			
	19	Deferred revenue		315,134	
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule).			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22)	0	315,134	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds	46,499,149	45,724,475	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	0	0	
	30	Total net assets or fund balances (see instructions)	46,499,149	45,724,475	
31	Total liabilities and net assets/fund balances (see instructions) .	46,499,149	46,039,609		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	46,499,149
2	Enter amount from Part I, line 27a	2	-774,674
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	45,724,475
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	45,724,475

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a GS high yield fund	P	2012-11-04	2016-12-23
b GS short tem securities	P	2015-10-14	2016-07-11
c GS equities	P	2014-06-22	2016-12-20
d GS other	P	2014-08-17	2016-12-23
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 1,200,000		1,354,259	-154,259
b 4,977,917		5,308,612	-330,695
c 3,922,452		4,230,603	-308,151
d 105,771		1	105,770
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			-154,259
b			-330,695
c			-308,151
d			105,770
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	-687,335
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

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

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

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

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

☐ Yes☒ No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	2,154,134	42,607,008	0 050558
2014	1,689,881	37,944,181	0 044536
2013	1,259,635	36,726,931	0 034297
2012	596,500	34,414,171	0 017333
2011	1,339,756	31,914,000	0 041980

2 Total of line 1, column (d)	2	0 188704
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 037741
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	4	46,811,365
5 Multiply line 4 by line 3	5	1,766,708
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	19,083
7 Add lines 5 and 6	7	1,785,791
8 Enter qualifying distributions from Part XII, line 4	8	1,816,620

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	19,083
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	19,083
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	19,083
6	Credits/Payments		
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	29,318
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	24,000
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	53,318
8	Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	
9	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	34,235
11	Enter the amount of line 10 to be Credited to 2017 estimated tax <input type="checkbox"/> 34,235 Refunded <input type="checkbox"/>	11	0

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ 0 (2) On foundation managers <input type="checkbox"/> \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	No
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> 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? <i>If "No," attach explanation</i> .	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	Yes	
14	The books are in care of ► ANTHONY DIMARE Telephone no ► (305) 245-4211			

Located at **►** 258 NW1st Ave Florida City FL ZIP+4 **►** 33034

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year ► 15			
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 instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ►	16	Yes	No

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

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

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

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

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
PAUL J DIMARE 258 NW 1st Ave Florida City, FL 33034	TRUSTEE 8 00	0	0	0
ANTHONY DIMARE 258 NW 1st Ave Florida City, FL 33034	Vice President 2 00	0	0	0
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				
Total number of other employees paid over \$50,000.				0

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

3 Five highest-paid independent contractors for professional services (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 relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	47,495,917
b	Average of monthly cash balances.	1b	28,311
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	47,524,228
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	47,524,228
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	712,863
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	46,811,365
6	Minimum investment return. Enter 5% of line 5.	6	2,340,568

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

1	Minimum investment return from Part X, line 6.	1	2,340,568
2a	Tax on investment income for 2016 from Part VI, line 5.	2a	19,083
b	Income tax for 2016 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	19,083
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	2,321,485
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	2,321,485
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	2,321,485

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	1,816,620
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	1,816,620
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	19,083
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,797,537

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				2,321,485
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only.			1,801,700	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2016				
a From 2011.				
b From 2012.				
c From 2013.				
d From 2014.				
e From 2015.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ <u>1,816,620</u>				
a Applied to 2015, but not more than line 2a			1,801,700	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2016 distributable amount.				14,920
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017				2,306,565
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9				
a Excess from 2012.				
b Excess from 2013.				
c Excess from 2014.				
d Excess from 2015.				
e Excess from 2016.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
2a Enter the lesser of the adjusted net income from Part I or the minimum 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 alternative test relied upon					
a "Assets" alternative test—enter					
(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 investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or email address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> See Additional Data Table				
Total ► 3a				1,816,620
b <i>Approved for future payment</i> SEED SCHOOL OF MIAMI 8004 NW 154th ST MIAMI LAKES, FL 33016			EDUCATION	200,000
Total ► 3b				200,000

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue					
a	_____					
b	_____					
c	_____					
d	_____					
e	_____					
f	_____					
g	Fees and contracts from government agencies					
2	Membership dues and assessments. . . .					
3	Interest on savings and temporary cash investments					209
4	Dividends and interest from securities. . . .					1,908,079
5	Net rental income or (loss) from real estate					
a	Debt-financed property.					
b	Not debt-financed property.					
6	Net rental income or (loss) from personal property					
7	Other investment income.					
8	Gain or (loss) from sales of assets other than inventory					-687,335
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a _____					
b	_____					
c	_____					
d	_____					
e	_____					
12	Subtotal Add columns (b), (d), and (e). .		0		0	1,220,953
13	Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations)			13		1,220,953

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

[illegible]

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

		Yes	No
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--	--	--

1a(1)		No
1a(2)		No

--	--	--

1b(1)	No
--------------	-----------

1b(2)		No
--------------	--	-----------

1b(3)		No
--------------	--	-----------

1b(4)		No
--------------	--	-----------

1b(5)	No
--------------	-----------

1b(6)		No
--------------	--	-----------

1c		No
-----------	--	-----------

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

**Sign
Here**

* * * * *

2017-05-26

* * * * *

Signature of officer or trustee

Date _____

Title

May the IRS discuss this return with the preparer shown below (see instr)? ☒ Yes ☐ No

**Paid
Preparer
Use Only**

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input checked="checked" type="checkbox"/>	PTIN
	JOHN S BUCKLEY		2017-05-26		P00651660
	Firm's name ▶ JOHN S BUCKLEY				Firm's EIN ▶
	Firm's address ▶ 42 BOOTH DRIVE WESTWOOD, MA 02090				Phone no (617) 645-9303

Form 990 PF 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ADRIENNE ARSHT CTR 1300 BISCAYNE BLVD MIAMI, FL 33135	NONE		ARTS	200,000
autism rescue mission COLLINS AVE MIAMI, FL 33090	NONE		HEALTH CARE	1,000
AMERICAN CANCER 8095 NW12TH ST S200 DORAL, FL 33126			MEDICAL RESEARCH	3
AMERICAN DIABETES 200 Biscayne BLVD MIAMI, FL 33135	NONE		SOCIAL SERVICES	15
YOUNG PATRONESS of OPERA 840 CORAL WAY MIAMI, FL 33134	NONE		ARTS	10,000
RONALD MCDONALD HOUSE 1145 NW 14th MIAMI, FL 33136	NONE		SOCIAL SERVICES	3,000
ARCHBISHOP CURLEY HIGH SCHOOL 4949 NE 2ND AVE MIAMI, FL 33137	NONE		EDUCATION	2,000
BARRY UNIVERSITY 11300 NE 2ND AVE MIAMI, FL 33161			EDUCATION	1
BELMONT HIGH SCHOOL ALUMNI FUND 101 BELMONT STREET BELMONT, MA 02478	NONE		EDUCATION	2,500
BIG BROTHER SISTER MIAMI 3100 SW 62 AVENUE MIAMI, FL 33145			SOCIAL SERVICES	1
BRIGHAM AND WOMENS HOSPITAL 10 FRANCIS ST BOSTON, MA 02116	NONE		HEALTH CARE SERVICES	1,000
BUONICONTI FUND 1095 NW 14TH TERRACE MIAMI, FL 33136			Medical research	1
CAMILLUS HOUSE BOX 011829 MIAMI, FL 33138	NONE		SOCIAL SERVICES	60,000
CAROLTON SCHOOL SACRED HEART 3747 Main highway MIAMI, FL 33133			education	1
CHAPMAN PARTNERSHIP 1550 north main avenue MIAMI, FL 33136	NONE		education	10,000
Total ► 3a				1,816,620

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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
CHRIST THE KING CHURCH 16000 SW 112th ave MIAMI, FL 33157	NONE		religious	500
Classical SO Florida po BOX 025 MIAMI, FL 33018			arts	1
CLEVELAND CLINIC 2950 Cleveland clinic blvd WESTON, FL 33331			HEALTH CARE	1
COLUMBUS HIGH SCHOOL 3000 SW 87 AVE MIAMI, FL 33165			EDUCATION	1
COMMUNITY PARTNERSHIP HOMELESS 1550 N MIAMI AVE MIAMI, FL 33136			SOCIAL SERVICES HOMELESS	1
CROSSROADS FOR KIDS 175 DERBY STREET HINGHAM, MA 02042			social services	1
FAirchild TROPICAL GARDENS 10901 OLD CUTLER RD CORAL GABLES, FL 33156	NONE		ARTS	186,290
FELLOWSHIP CHRISTIAN ATHLETES NW 17ST MIAMI, FL 33136			RELIGIOUS	1
FLORIDA PRADER WILLI SYNDROME BOX 344146 FLORIDA CITY, FL 33034	NONE		MEDICAL RESEARCH	1,000
GEORGETOWN UNIVERSITY DEPARTMENT 0734 WASHINGTON, DC 20073			EDUCATION	1
GUS MACHADO FOUNDATION 622 N KROME AVE HOMESTEAD, FL 33030			SOCIAL SERVICES	1
GWEN CHERRY PARK FNDN 1017 NW 9TH CT MIAMI, FL 33136			EDUCATION	1
HOMESTEAD HOSPITAL FNDN 975 BAPTIST WAY HOMESTEAD, FL 33033	NONE		FREE MEDICAL CARE	1
HUMANE SOCIETY BROWARD 7397 Garfield st HOLLYWOOD, FL 33032	NONE		EDUCATION	1
HUMANE SOCIETY GREATER MIAMI SW 8TH AVE MIAMI, FL 33130	NONE		SOCIAL SERVICES	1
Total ► 3a				1,816,620

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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JACKSON MEMORIAL FOUNDATION BISCAYNE BLVD MIAMI, FL 33016	NONE		HEALTH CARE SERVICES	1
KIWANIS CLUB HOMESTEAD PO box 1754 HOMESTEAD, FL 33090			Social services	1
KRISTI HOUSE 1265MW 12th ave MIAMI, FL 33136			social services	1
Mass EYE AND EAR Charles street BOSTON, MA 02126			HEAlth	1
MIAMI BALLET 2200 LIBERTY AVE MIAMI, FL 33139	NONE		ARTS	85,000
MIAMI CHILDRENS HOSPITAL 3000 SW 62 AVE MIAMI, FL 33135	NONE		HOSPITAL	5,000
MIAMI LIGHTHOUSE FOR BLIND 601SW 8TH AVE MIAMI, FL 33130			BLIND SERVICES	1
MIAMI SCIENCE MUSEUM 3280 S MIAMI AVE MIAMI, FL 33129			SCIENCE EDUCATION	1
MIAMI YOUTH FOR CHRIST 9350 SW 79 AVENUE MIAMI, FL 33156			RELIGIOUS EDUCATION	1
NTM RESEARCH 1550 MAGRUDA AVE CORAL GABLES, FL 33146			EDUCATION	1
ORCAT 24 Dockside lane key largo, FL 33037			SOCIAL SERVICES	1
PALMER TRINITY SCHOOL 7900 SW 176 STREET PALMETTO BAY, FL 33157			EDUCATION	1
RODMAN RIDE FOR KIDS FORBES RD BRAINTREE, MA 02184	NONE		YOUTH SERVICES	5,000
RYPLEN FOUNDATION W SPOKANE AVE SPOKANE, WA 99201			SOCIAL SERVICES	1
SCITUATE ANIMAL SHELTER 780 CUSHING HGWY SCITUATE, MA 02060			ANIMAL NOT FOR PROFIT CARE	1
Total ▶ 3a				1,816,620

Form 990 PF 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
SEED SCHOOL OF MIAMI 8004 NW 154th ST MIAMI LAKES, FL 33016	NONE		education	125,000
SHELL KEY WEST CHALLENGE BOX 310 HOMESTEAD, FL 33090	NONE		SOCIAL SERVICES	650
SOUTH SHORE HEALTH and ED FNDN 55 FOGG RD SO WEYMOUTH, MA 02190			HOSPITAL	1
ST HUGH CATHOLIC CHURCH 3460 ROYAL RD MIAMI, FL 33133	NONE		RELIGION CHURCH	5,000
ST MARY OF NATIVITY 1 KENT ST SCITUATE, MA 02066	NONE		CHURCH	10,000
ST VINCENT DE PAUL 3460 ROYAL RD MIAMI, FL 33133			SOCIAL SERVICES	1
U MIAMI WOMEN ATHLETICS MIAN CAMPUS CORAL GABLES, FL 33124	NONE		education	2,500
U MIAMI po BOX 248073 CORAL GABLES, FL 33124	NONE		University	19,000
U MIAMI DIMARE SCHOLARSHIPS 2014 po bOX 248073 CORAL GABLES, FL 33124	NONE		Education	150,000
U MIAMI FROST MUSIC MAIN CAMPUS MIAMI, FL 33146	NONE		EDUCATION	200,000
UM DAVINCI SURGICAL FUND po BOX 025 CORAL GABLES, FL 33132	NONE		EDUCATION	200,000
UM ATHLETIC CENTER PO BOX 025 CORAL GABLES, FL 33124	NONE		education	125,000
UM DIMARE MEDICAL main campus CORAL GABLES, FL 33124	NONE		EDUCATION	200,000
UM FROST MUSIC MAIN CAMPUS CORAL GABLES, FL 33124	NONE		SOCIAL SERVICES	45,455
UM PRESIDENTIAL MAIN CAMPUS CORAL GABLES, FL 33146	NONE		UNIVERSITY NOT FOR PROFIT	50,000
Total ► 3a				1,816,620

Form 990FP 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CORAL GABLES MUSEUM SO MAIN CORAL GABLES, FL 33146	NONE		MEDICAL RESEARCH	10,000
VITA NOVA 101 NE 1ST ST S592 MIAMI, FL 33132			SOCIAL SERVICES	1
VIZCAYA MUSEUM 3251 SOUTH MIAMI AVE MIAMI, FL 33129	NONE		MUSEUM and ARTS	10,000
WOMEN of TOMORROW 22 EAST FLAGLER ST MIAMI, FL 33131	NONE		CHILDRENS SERVICES	31,250
WESTMINISTER CHRISTIAN SCHOOL 62ND AVE MIAMI, FL 33155			EDUCATION	1
FOUNDATION for NEW EDUCATION INITIATIVE 1450NE 2nd ave MIAMI, FL 33132	NONE		SOCIAL SERVICES	25,000
MOURNING FAMILY FNDN 100SBISCAYNE BLVD MIAMI, FL 33131	NONE		SPCIAL SERVICES	10,000
VOICES for CHILDREN 601 NW 1ST COURT MIAMI, FL 33136	NONE		SOCIAL SERVICES	16,000
SACRED HEART CHURCH KROME AVE HOMESTEAD, FL 33090	NONE		EDUCATION	3,500
HUMANE SOCIETY of Greater Miami 16000 SW 112th ave MIAMI, FL 33131	NONE		SOCIAL SERICES	5,925
Total ▶ 3a				1,816,620

TY 2016 Investments Corporate Bonds Schedule

Name: THE PAUL J DIMARE FOUNDATION

EIN: 65-0537843

Name of Bond	End of Year Book Value	End of Year Fair Market Value
government bonds	18,172,151	18,172,151

TY 2016 Investments Corporate Stock Schedule**Name:** THE PAUL J DIMARE FOUNDATION**EIN:** 65-0537843

Name of Stock	End of Year Book Value	End of Year Fair Market Value
Goldman equities	5,969,393	5,969,362
stocks equities	21,801,770	23,609,103

TY 2016 Other Expenses Schedule**Name:** THE PAUL J DIMARE FOUNDATION**EIN:** 65-0537843**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
investment fees	179,507	0		0