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SCANNED MAY 2 6 2017

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.

For	caler	ndar year 2016 or tax year beginning		, and ending		
Na	me o	foundation			A Employer identificatio	n number
_	_	. FOUNDATION, INC.	 		65-0848161	<u> </u>
		nd street (or P.O. box number if mail is not delivered to street		Room/suite	B Telephone number	
		8 EAST OAKLAND PARK BOU			(954)566-7	7559
	, -	own, state or province, country, and ZIP or foreign p T LAUDERDALE, FL 33306			C If exemption application is i	pending check here
		all that apply: Initial return		ormer public charity	D 1 Foreign organization	s check here
•		Final return	Amended return	,		,
		Address change	Name change		2. Foreign organizations m check here and attach c	eeting the 85% test
H (ineck	type of organization: X Section 501(c)(3) ex			7	
	_		Other taxable private found	ation	If private foundation sta under section 507(b)(1	
l Fa			ng method: X Cash	Accrual	F If the foundation is in a	
		· 1 —	ther (specify)		under section 507(b)(1	
	\$	10,684,147. (Part I, colu		basis)	(1)(,,-,,
Pa	art I		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	380,000.	 	N/A	(cash basis only)
	2	Check If the foundation is not required to attach Sch. B	300,000.		14/A	* * * * * * * * * * * * * * * * * * *
	2	Interest on savings and temporary	3,748.	3,748.	 	STATEMENT 1
	1	cash investments Dividends and interest from securities	155,068.	155,068.	 	STATEMENT 2
	52	Gross rents	133,000.	233,000.	 	可以表现
		Net rental income or (loss)			\$ 15	· 大大 · · · · · · · · · · · · · · · · ·
	1 _	Net gain or (loss) from sale of assets not on line 10	842,623.	11 72		1 2 2 4
Revenue	b	Gross sales price for all 1 700 1 FO				11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Ver	Į ī	Capital gain net income (from Part IV line 2)		842,623.		
æ	8	Net short-term capital gain		7		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	9	Income modifications		3	 	, ;
	10a	Gross sales less returns and allowances		·	*	
		Less Cost of goods sold		· - · · · · · · · · · · · · · · · · · ·		<u> </u>
	i .	Gross profit or (loss)				,
	11	Other income	2,459.	<61.	>	STATEMENT 3
	12	Total Add lines 1 through 11	1,383,898.	1,001,378.		
_	13	Compensation of officers, directors trustees etc	0.	0.		0.
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
ses	16a	Legal fees				
Expenses	b	Accounting fees STMT 4	5,130.	2,565.		2,565.
Ä	ſ	Other professional fees STMT 5	16,478.	16,478.	RECEIV	FD 0.
:ve	17	Interest			INCOLIT	L
trai	18	Taxes STMT 6	<5,562.	> 3,252.	H <u>a</u> l	ο. Ο Ο Ο Ο Ο Ο Ο Ο Ο Ο Ο Ο Ο Ο Ο Ο Ο Ο Ο
II.S	19	Depreciation and depletion			18 MAY 18	2017
Operating and Administrative		Оссирапсу			\mathrew{\pi}	RS S
Ψ̈́		Travel, conferences, and meetings			OGDEN	UT
au	1	Printing and publications			OGDEN	}
ıng	1	Other expenses STMT 7	111.	56.	 	55.
rat	24	Total operating and administrative	16 157	22 251		0.500
dc		expenses Add lines 13 through 23	16,157.	22,351.	<u> </u>	2,620.
_	1	Contributions, gifts, grants paid	450,000.		ļ	450,000.
	26	Total expenses and disbursements	166 157	20 251		450 600
	<u> </u>	Add lines 24 and 25	466,157.	22,351.	 	452,620.
		Subtract line 26 from line 12	017 741			
		Excess of revenue over expenses and disbursements	917,741.	070 007		
		Net investment income (if negative enter 0-)		979,027.) NT / 3	
	C	Adjusted net income (if negative enter -0-)	l	<u> </u>	N/A	<u> </u>

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_		Attached schedules and amounts in the description	beginning of year	Enu oi	year
L	art	Balance Sheets Atlached schedules and amounts in the description column should be for end of year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash - non-interest-bearing	85,543.	742,161.	742,161.
	2	Savings and temporary cash investments	794,387.	326,576.	326,576.
	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	1		
	7	Other notes and loans receivable			
		Less, allowance for doubtful accounts	-		
Ø	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments - U.S and state government obligations			
	1	Investments - corporate stock STMT 8	6,418,928.	7,144,880.	9,605,495.
	1	Investments - corporate bonds			
	Ι	Investments land buildings and equipment basis			
		Less accumulated depreciation	Trans.	·	
	12	Investments - mortgage loans			
	13	Investments - other STMT 9	6,933.	9,915.	9,915.
	14	Land, buildings, and equipment; basis			
	' '	Less accumulated depreciation		İ	
	15	Other assets (describe ►		-	
		Total assets (to be completed by all filers - see the			
	''	instructions. Also, see page 1, item I)	7,305,791.	8,223,532.	10,684,147.
_	17	Accounts payable and accrued expenses			
	18	Grants payable			
ß	19	Deferred revenue			
Ë	20	Loans from officers directors trustees and other disqualified persons			
Liabilities	ļ.	Mortgages and other notes payable			
Ë	l	Other habilities (describe >			
		Cities madmines (accounts >			
	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	ľ		
lance	1	Temporarily restricted			
173	Į.	Permanently restricted			
Fund B	120	Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31			
ō	27	Capital stock, trust principal, or current funds	0.	0.	
ets		Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.1	
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	7,305,791.	8,223,532.	
et/	30	Total net assets or fund balances	7,305,791.	8,223,532.	
Z	30	Total Het assets of fully valances	7,303,731.	0,223,332.	
	31	Total liabilities and net assets/fund balances	7,305,791.	8,223,532.	
				0,223,332.	
Р	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Intal	net assets or fund balances at beginning of year - Part II, column (a), line	30	T	
		t agree with end-of-year figure reported on prior year's return)		1	7,305,791.
		amount from Part I, line 27a		$\frac{1}{2}$	917,741.
		increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3		4	8,223,532.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund halances at end of year (line 4 minus line 5) - Part II on	lumn (h) tine 30		8.223.532.

623511 11-23-16

Form **990-PF** (2016)

Part IV. Capital Gains a	nd Losses for Tax on In	vestment	Income			
	be the kind(s) of property sold (e.g. ehouse; or common stock, 200 shs			(b) How acquired P - Purchase D - Donation	(c) Date acqui (mo , day, yr	
1a JP MORGAN 5002						
b JP MORGAN 5002						
c JP MORGAN 5002						
d JP MORGAN 5002						
e CAPITAL GAINS D						
(e) Gross sales price	(f) Depreciation allowed / (or allowable)		t or other basis xpense of sale		(h) Gain or (e) plus (f) m	ninus (g)
a 68,719.			79,685			<10,966.
ь 123,275.			123,750			<475.
c 1,480,648.			737,100) •		743,548.
d 13.				 -		13.
e 110,503.		h a 4 a d - 4	40/04/00	-		110,503.
Complete only for assets snowing	gain in column (h) and owned by t) Gains (Col (h . (k), but not les	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any		Losses (from	col (h))
a				<u> </u>		<10,966
b						<475.
С						743,548.
d				_		13.
e						110,503.
2 Capital gain net income or (net cap	, (, , , , , , , , , , , , , , , , , ,	ın Part I, line	7 7	} 2	. <u> </u>	842,623.
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, c if (loss), enter -0- in Part I, line 8		d (6):		}	N	N/A
	der Section 4940(e) for	Reduced	Tax on Net I	nvestment Inc		*/
(For optional use by domestic private t	foundations subject to the section 4	940(a) tax on	net investment inco	ome.)		
	•			,		
If section 4940(d)(2) applies, leave the	s part blank.					
Was the foundation liable for the section of "Yes," the foundation does not qualify			•	d?		Yes X No
1 Enter the appropriate amount in ea				ries.		
(a)	(b)	T		(c)		(d)
Base periód years Calendar year (or tax year beginning	Advisted avalitings dist	ributions	Net value of nonc	haritable-use assets	(col (Distributión ratio b) divided by col. (c))
2015	38	6,551.		8,707,079		.044395
2014		3,030.		8,449,781	•	.038229
2013		2,632.		6,592,593	•	.039837
2012	25	4,591.		5,491,343		.046362
2011	24:	9,561.		5,538,282	•	.045061
2 Total of line 1, column (d)					2	.213884
3 Average distribution ratio for the 5-	year base period - divide the total o	n line 2 by 5,	or by the number of	f years	1 1	
the foundation has been in existence	ce if less than 5 years				3	.042777
4 Enter the net value of noncharitable	e-use assets for 2016 from Part X. I	ine 5			4	9,315,873.
	,					
5 Multiply line 4 by line 3					5	398,505.
6 Enter 1% of net investment income	e (1% of Part I, line 27b)				6	9,790.
7 Add lines 5 and 6					7	408,295.
8 Enter qualifying distributions from the R is equal to or greater than I	Part XII, line 4 ine 7, check the box in Part VI, line	th and come	late that part using	a 1% tay rata	8	452,620.
See the Part VI instructions	and a, under the box in Part VI, line	iu, anu cump	icie mat part using:	a i /o lax lalt		

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Part VI. Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - sec	instru	uctio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here \(\bigs \) and enter "N/A" on line 1			
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		۰ -	
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► X and enter 1%		9,7	790.
of Part I, line 27b			
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-)		<u> </u>	0.
3 Add lines 1 and 2		9,1	790.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0 5	
5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		9,1	790.
6 Credits/Payments:			
a 2016 estimated tax payments and 2015 overpayment credited to 2016 6a 4,240.			
b Exempt foreign organizations - tax withheld at source			
c Tax paid with application for extension of time to file (Form 8868)			
d Backup withholding erroneously withheld 6d		4 1	110
7 Total credits and payments. Add lines 6a through 6d		4,2	40.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			<u> </u>
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		3,3	50.
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11 Enter the amount of line 10 to be. Credited to 2017 estimated tax Refunded 11			
Part VII-A Statements Regarding Activities		Voc	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	10	163	X
any political campaign? New transfer of the C100 during the year (ather directly or indirectly) for political purposes (see instructions for the deficition)?	1a 1b	-	$\frac{1}{X}$
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	10	}	 ^ _
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year?	1.0	ļ	x
	1c		 ^ _
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ► \$ 0 • (2) On foundation managers. ► \$ 0 •	}		ĺ
(1) On the foundation. ► \$ U • (2) On foundation managers. ► \$ U • Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	1		}
managers. > \$		1	ĺ '
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
If "Yes," attach a detailed description of the activities	-	 	
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		Ī	1
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	<u> </u>	Х
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	 	X
b If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	<u> </u>	X
If "Yes," attach the statement required by General Instruction T			
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
By language in the governing instrument, or	,	l	
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	Х	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	\vdash
8a Enter the states to which the foundation reports or with which it is registered (see instructions)	-		
FL	-		1
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)	ا	Х	
of each state as required by General Instruction G? If "No," attach explanation	86		
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	9		х
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the lax year? If Yes, attach a schedule listing their names and addresses STMT 10		Х	- <u>~</u>
	orm 990		(20.16)

Part VII-A Statements Regarding Activities (continued)			
		Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			1,,
section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	├	X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?		ì	v
If "Yes," attach statement (see instructions) 13. Did the foundation comply with the public inspection requirements for its annual returns and exemption confliction?	12	X	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	<u> </u>	ـــــا
14 The books are in care of ► H I FOUNDATION, INC. Telephone no ► 954	-566-7	550	
	<u>3330€</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		_	
and enter the amount of tax-exempt interest received or accrued during the year	N	[/A	
16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
securities, or other financial account in a foreign country?	16		Х
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.		Yes	No
1a During the year did the foundation (either directly or indirectly):			
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	No)	}
(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) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	No	}	
(5) Transfer any income or assets to a disqualified person (or make any of either available		Į į	
for the benefit or use of a disqualified person)? $\ \ \ \ \ \ \ \ \ \ \ \ \ $	No		
(6) Agree to pay money or property to a government official? (Exception Check "No"		1	
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.)	Vo		
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)?	A 1b		
Organizations relying on a current notice regarding disaster assistance check here		İ	
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		į	3.5
before the first day of the tax year beginning in 2016? 7. Toyon on follows to distribute program (coston 4042) (does not apply for years the foundation was a private possessing foundation.	1c		_X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	ļ	İ	
before 2016?	lo	İ	
If "Yes," list the years \blacktriangleright ,,,,,			
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		1	
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
statement - see instructions.) N / A	A 2b		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	}		
during the year?	lo	.	
b If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after			
May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	.		
Form 4720, to determine if the foundation had excess business holdings in 2016) N/A	<u> </u>		-, -
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the lax year beginning in 2016?	46	-	77
			Х

orm 990-PF (2016) H.I. FOUNDATION, INC.	4700 14 - 5		05-08481	. 6 1	Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be I	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to				- }	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	` ''		es X No		
(2) Influence the outcome of any specific public election (see section 4955); o	or to carry on, directly or indir			}	1
any voter registration drive?			es X No	1	
(3) Provide a grant to an individual for travel, study, or other similar purposes		, L Y	es X No		(
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
4945(d)(4)(A)? (see instructions)		Y	es X No	Ì	1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or			1	}
the prevention of cruelty to children or animals?		Y	es X No	[-
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described	ın Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b	ì
Organizations relying on a current notice regarding disaster assistance check h	ere				1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it mainta	ined		l	
expenditure responsibility for the grant?		. —	es 🔲 No	1	ı
If "Yes," attach the statement required by Regulations section 53 4945				}	1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				l l	i
a personal benefit contract?	pay proniiding on	□ v	es X No	.	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	arconal hanefit contract?	· · · · · · · · · · · · · · · · · · ·	i	6b	Х
If "Yes" to 6b. file Form 8870	erzonar nenent contract.		<u> </u>	00	+^-
,	halta- turnaa-turnO		es X No	ļ	ł
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y(
b If "Yes," did the foundation receive any proceeds or have any net income attributed and the foundation About Officers. Directors. Trustometers and the foundation About Officers.				7b	—
Part VIII Information About Officers, Directors, Trustored Paid Employees, and Contractors	ees, Foundation Ma	inagers, riigni	y		
1 List all officers, directors, trustees, foundation managers and their	compensation				
Elst all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	(a) F	ASUOUA
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deterred	accon	xpense nt, other
	to position	enter -0-)	compensation	allow	vances
CDD CM MDVDVM 11	ı		_		•
SEE STATEMENT 11		0.	0.		0.
				ĺ	
		1			
				<u></u>	
		Į ,			
				<u> </u>	
				ļ	
				J	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	I-) Components	(d) Contributions to employee benefit plans		xpense
(a) Name and address of each employee paid more man \$50,000	devoted to position	(c) Compensation	and deferred compensation		nt, other vances
NONE			- Company		
		1	. (
		 			
		}	Ì		
		 			
			l		
		 			
			}		
		 			
		اــــــا			
Total number of other employees paid over \$50,000			<u> </u>	===	0
			_	^^^ DE	T 100 101

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Paid Employees, and Contractors (continued)	Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type	of service	(c) Compensation
NONE		
		}
		
		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as	the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 N/A		
1 N/A		
2		
3		
4		
<u> </u>		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A		
2		
<u> </u>		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	>	0.
		Form 990-PF (2016)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	8,645,925.
b		16	8,645,925. 811,814.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	9,457,739.
е	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	9,457,739.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	141,866.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	9,315,873.
6	Minimum investment return Enter 5% of line 5	6	465,794.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	465,794.
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)		
C	Add lines 2a and 2b	2c	9,790.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	456,004.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	456,004.
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	456,004.
P	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
' a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	īa l	452,620. 0.
	Program-related investments - total from Part IX-B	1b	132,020.
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		3a	
	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	452,620.
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	5	
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	442,830.
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years.		

Form **990-PF** (2016)

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,		 		
tine 7	(456,004
2 Undistributed income if any as of the end of 2016		· · · · · · · · · · · · · · · · · · ·		
a Enter amount for 2015 only			427,499.	
b Total for prior years				
		0.	[[
3 Excess distributions carryover, if any, to 2016.		 		
a From 2011			l i	
b From 2012			[
c From 2013				
d From 2014			ì	
e From 2015				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ▶\$ 452,620.	}		}	
a Applied to 2015, but not more than line 2a			427,499.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.	1	
c Treated as distributions out of corpus		······································		
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				25,121.
e Remaining amount distributed out of corpus	0.	`	, ,	
5 Excess distributions carryover applied to 2016	0.		, 3, 12	0.
(If an amount appears in column (d) the same amount must be shown in column (a))			, ,	
6 Enter the net total of each column as 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			<u> </u>	
amount - see instructions		0.		
e Undistributed income for 2015 Subtract line				
4a from line 2a Taxable amount - see instr.	j		0.	
f Undistributed income for 2016 Subtract				
lines 4d and 5 from line 1. This amount must	}			
be distributed in 2017	}			430,883.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	l i			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	0.	Ì		
9 Excess distributions carryover to 2017			· ·····	
Subtract lines 7 and 8 from line 6a	0.	j		
10 Analysis of line 9-				
a Excess from 2012	}	1	}	
b Excess from 2013				
c Excess from 2014	†			
d Excess from 2015	İ	ł	}:	
e Excess from 2016				
				Form 000 DE (2010)

	UNDATION, I				48161 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VII	A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter tha	t it is a private operating			
foundation, and the ruling is effective for	r 2016, enter the date of	the ruling	▶		
b Check box to indicate whether the found	lation is a private operati	ng foundation described i	n section	4942(j)(3) or49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
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		l			
b 85% of line 2a					
c Qualifying distributions from Part XII,				1	
line 4 for each year listed					
d Amounts included in line 2c not				1	
used directly for active conduct of		{			
exempt activities		ĺ	(
e Qualifying distributions made directly		 	 	 	
for active conduct of exempt activities.		į	ĺ		
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the				 	
alternative test relied upon:			Ì		
a "Assets" alternative test - enter(1) Value of all assets		Í	1	}	
` '	<u> </u>	 	 	 	
(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,		<u> </u>		1	1
dividends, rents, payments on				ļ	I
securities loans (section		ļ	[ļ	Į
512(a)(5)), or royalties)	<u> </u>	 	 	 	·
(2) Support from general public and 5 or more exempt				ļ	
organizations as provided in					
section 4942(j)(3)(B)(III)	<u> </u>		ļ	ļ <u></u> -	
(3) Largest amount of support from		}		1	
an exempt organization				ļ	
(4) Gross investment income		An Abin mark and r	is also standardisas	lood 65 000 amount	
Part XV Supplementary Info at any time during t			ir the roundation	nad \$5,000 or mo	ore in assets
					
1 Information Regarding Foundation	•	than 20/ of the total cents	ributions recoved by the	foundation before the elec	a of any tay
a List any managers of the foundation who year (but only if they have contributed m			nuutions received by the	Tournation before the clos	e of any lax
NONE					
b List any managers of the foundation who	o own 10% or more of th	a stock of a corporation /	or an aqually large porte	on of the ownership of a pa	artnership or
other entity) of which the foundation has			or an equally large portic	in or the ownership of a pa	ittlersing of
NONE	· ·				
2 Information Regarding Contributi	on Cront Cift Loon	Scholarchin etc. Dr	oarame:		
				ot accept unsolicited requi	acts for funds. If
the foundation makes gifts, grants, etc. (
a The name, address, and telephone number					
MS. LUCIE SMITH, 954		ne person to whom appir	cations should be addres	3564	
2848 E. OAKLAND PARK		LAUDERDALE	FL 33306		
b The form in which applications should b					
LETTER OF REQUEST	c sportition and informati	non and materials they sh	iodia molado.		
c Any submission deadlines					
NONE					
d Any restrictions or limitations on awards	such as by geographics	il areas, charitable fields	kinds of institutions, or o	other factors	
NONE	, cash as ay goograpmor	2. 300, 5.70. 11000 110103,	55 66.114110110, 01 0		
					
623601 11-23-16					Form 990-PF (2016)
					123.0)

3 Grants and Contributions Paid During the Y		Payment		
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 of business)	or substantial contributor	recipient	**	
a Paid during the year				
AMERICAN CANCER SOCIETY	NONE	PUBLIC CHARITY	FOR CANCER RESEARCH	
P.O. BOX 13600	TO THE	TOBBIC CHARTII	EDUCATION, ADVOCACY,	
TAMPA, FL 33681			AND SERVICE	20,00
·	 	 		
AMERICAN HEART ASSOCIATION	NONE	PUBLIC CHARITY	TO BUILD HEALTHER	
7272 GREENVILLE AVE	}		LIVES FREE OF	
DALLAS, TX 75231			CARDIOVASCULAR	
, 			DISEASES AND STROKE	5,00
AMERICAN RED CROSS SOUTH FLORIDA	NONE	PUBLIC CHARITY	TO PROVIDE DISASTER	
6710 W SUNRISE BOULEVARD			RELIEF AT HOME AND	
PLANTATION, FL 33313	l l		ABOARD CPR	
·			CERTIFICATION AND	
			FIRST AID COURSES, AND	10,000
AMERICAN RED CROSS-PALM BEACH COUNTY	NONE	PUBLIC CHARITY	TO PROVIDE DISASTER	
RELIEF			RELIEF AT HOME AND	
825 FERN STREET			ABOARD, CPR	
WEST PALM BCH, FL 33401		į	CERTIFICATION AND	
	ļ <u>.</u>		FIRST AID COURSES, AND	500
	}	1		
ART AND CULTURE CENTER OF HOLLYWOOD	NONE	PUBLIC CHARITY	TO FOSTER A CREATIVE	
1650 HARRISON STREET		1	ENVIRONMENT WHERE NEW	
HOLLYWOOD, FL 33020			and challenging work	
	<u> </u>	<u> </u>	CAN FLOURISH	5,000
 	TINUATION SHEE	T(S)	▶ 3a	450,000
b Approved for future payment				
NONE				
	ļ			
Total	<u> </u>	L	▶ 3b	0

er gross amounts unless otherwise indicated.	Unrelated I	usiness income		oy section 512 513 or 514	(e)
-	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
Program service revenue.	code		1000		
å					
b			+		
c			+		
d	-		+		
e	-		+		
Total and contracts from account of the contracts of the contracts of the contract of the cont	-		 		
g Fees and contracts from government agencies	 		 -		-
Membership dues and assessments	<u> </u>		-}}		
Interest on savings and temporary cash	1		14	2 740	
investments	 			3,748.	
Dividends and interest from securities		 	14	155,068.	· · · · · · · · · · · · · · · · · · ·
Net rental income or (loss) from real estate			 		· ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `
a Debt-financed property	ļļ.				
b Not debt-financed property			 		
Net rental income or (loss) from personal	1		1 1	}	
property			 _ _ _ _ _ _ _ _ _ _		
Other investment income			14	2,459.	
Gain or (loss) from sales of assets other	1 1				
than inventory			18	842,623.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:			1	1	
a	_	· 			
b	_				
c	_				
d	_				
e	1				
٠	_ ———			1 002 000 1	
Subtotal. Add columns (b), (d), and (e)		0	<u>·</u>	1,003,898.	
·		0	<u>•</u>	13	1,003,89
Subtotal. Add columns (b), (d), and (e)		0	<u>•</u>		1,003,89
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.)				13	1,003,89
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) Relationship of Activities	to the Accom	plishment of E	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) ART XVI-B Relationship of Activities the No Explain below how each activity for which income.	to the Accom	plishment of E	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) ART XVI-B Relationship of Activities	to the Accom	plishment of E	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations.) ART XVI-B Relationship of Activities The No Explain below how each activity for which income and income and income activity for which income activity for	to the Accom	plishment of E	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculations.) BET XVI-B Relationship of Activities Explain below how each activity for which income.	to the Accom	plishment of E	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) BET XVI-B Relationship of Activities Explain below how each activity for which income	to the Accom	plishment of E	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculations.) BET XVI-B Relationship of Activities Explain below how each activity for which income.	to the Accom	aplishment of E	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculations.) BET XVI-B Relationship of Activities Explain below how each activity for which income.	to the Accom	aplishment of E	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations.) ART XVI-B Relationship of Activities The No Explain below how each activity for which income and income and income activity for which income activity for	to the Accom	aplishment of E	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations.) ART XVI-B Relationship of Activities The No Explain below how each activity for which income and income and income activity for which income activity for	to the Accom	aplishment of E	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations.) ART XVI-B Relationship of Activities The No Explain below how each activity for which income and income and income activity for which income activity for	to the Accom	aplishment of E	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculations.) BET XVI-B Relationship of Activities Explain below how each activity for which income.	to the Accom	aplishment of E	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculations.) BET XVI-B Relationship of Activities Explain below how each activity for which income.	to the Accom	aplishment of E	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) BET XVI-B Relationship of Activities Explain below how each activity for which income	to the Accom	aplishment of E	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) BET XVI-B Relationship of Activities Explain below how each activity for which income	to the Accom	aplishment of E	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) BET XVI-B Relationship of Activities Explain below how each activity for which income	to the Accom	aplishment of E	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations.) ART XVI-B Relationship of Activities The No Explain below how each activity for which income and income and income activity for which income activity for	to the Accom	aplishment of E	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) ART XVI-B Relationship of Activities the No Explain below how each activity for which income.	to the Accom	aplishment of E	xempt P	urposes	
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculations.) BET XVI-B Relationship of Activities Explain below how each activity for which income.	to the Accom	aplishment of E	xempt P	urposes	

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

1 Di	d the or	ganization directly or indir	rectly engage in any	of the following	ng with any other organiza	ition d	described in sect	ion 501(c) of		Yes	No
th	e Code	(other than section 501(c))(3) organizations) o	r in section 52	27, relating to political orga	anızat	tions?				
a Tr	ansfers	from the reporting founda	ation to a noncharita	ble exempt or	ganization of						l
(1) Cash								1a(1)		Х
(2	t) Other	r assets							1a(2)		X
b 01	ther tran	nsactions.		•							1
•	•	s of assets to a noncharital	, ,						1b(1)		X
	•	hases of assets from a noi	•	organization					1b(2)		Х
•	•	al of facilities, equipment,							1b(3)		X
•	•	bursement arrangements							1b(4)		X
•	•	s or loan guarantees							1b(5)		X
	-	rmance of services or me	•	=					1b(6)		X
	_	f facilities, equipment, ma	-		· ·	-6			1c	لـــا	X
					• •			narket value of the goods, o		ets,	
		is given by the reporting to d) the value of the goods, (alue III	rany transaction	or sharing arrangement, sl	10W III		
(a)Line	 -	(b) Amount involved			e exempt organization		(d) Description	of transfers transactions, and s	haring ar		
(4)2	``	(b) / illiourie illivolvou	(c) traine of	N/A	o oxompt organization		- (a) Bescription	of transfers transactions, and s	anaring an	angeme	
	-+-		<u></u>			-+					
			<u> </u>								
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		•	*	-	or more tax-exempt orga	ınızatıc	ons described	<u></u>	٦.,	177	1
		501(c) of the Code (other)(3)) or in sect	tion 5277			Ĺ	Yes	X) No
וו פ	yes, co	omplete the following sche (a) Name of org			(b) Type of organization	π-		(c) Description of relationsh	·n		
		N/A	amzanon		(b) Type of organization	' 		(c) Description of relationship	<u>-</u>		
		IV/A				+-					
					 	+-	 	 			
						+-					
					 						
					ng accompanying schedules an				the IRS d	iscuse fi	nie .
Sign	1 🕟	elief it is true correct and com	iplete Declaration of pre	eparer (other tha	n taxpayer) is based on all info	ormation	n of which preparer	nas any knowledge retur	n with the	prepare	er l
Here		16	5/2		5-9-/	フ	DIRECT		Yes		No
	Sign	nature of officer or trustee			Date		Title				
		Print/Type preparer's na	me	Preparer's s	ignature /	Da	ite	Check If PTIN			
.							,	self- employed			
Paid		KAREN A. B		Marie	- O->>-	<u>- ਪ</u>	7-8-17		096		
Prep		Firm's name ► RSM	US LLP		•			Firm's EIN ► 42-07	143	25	
Use	Unity	Firm's address > 10	O NIE WITT	J 3 17 17 17 1	TIE CUTTON 3	00		ļ			
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		IFO.	RT LAUDER	י ייידאר	тп 2230T			Phone no. 954-46			2010
								FO	m 990	-FF ()	20 lb)

Part XV Supplementary Information 3 Grants and Contributions Paid During the		<u></u>	 	
Recipient	If recipient is an individual,		 	
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
AUTISM RESEARCH INSTITUTE	or substantial contributor		TO HELD INDIVIDUALS	
4182 ADAMS AVENUE	NONE	FOBLIC CHARTII		
SAN DIEGO, CA 92116			1	
······,				
			RESEARCH	5,500
AUTISM SPEAKS	NONE	PUBLIC CHARITY	TO ADVANCE AUTISM	
1 EAST 33RD STREET, 4TH FLOOR			RESEARCH AND ADVOCACY	
NEW YORK, NY 10016	l			500.
BLANK PARK ZOO FOUNDATION	NONE	PUBLIC CHARITY	TO ENHANCE QUALITY OF	
7401 SW 9TH STREET			LIFE IN IOWA AS AN	
DES MOINES, IA 50315			AFFORDABLE DESTINATION	
			AND AS A CENTER FOR	
			EDUCATION AND	10,000.
BOCA HELPING HANDS	NONE	PUBLIC CHARITY	TO PROVIDE FOOD AND	
138 NW 16TH STREET			EMERGENCY ASSISTANCE	
BOCA RATON, FL 33432			TO MEET BASIC HUMAN	
			NEEDS AND LONG TERM	
PONNER WOULD	- LOVE	DVIDA GUADAMI	SOLUTIONS TO BREAK THE	500.
BONNET HOUSE	NONE	PUBLIC CHARITY		
900 N. BIRCH ROAD				
FORT LAUDERDALE, FL 33304			†	
				10 000
		 	OF ERRATIONS	10,000.
BREVARD MUSIC CENTER	NONE	PUBLIC CHARITY	TO PROVIDE SUPPORT TO	
349 ANDANTE LN			THE MUSIC CENTER FOR	
BREVARD, NC 28712			ASPIRING CHILDREN	1,000.
BROWARD PERFORMING ARTS FOUNDATION	NONE	PUBLIC CHARITY	TO PROVIDE SUPPORT TO	
201 SW FIFTH AVENUE			THE BROWARD CENTER FOR	
FORT LAUDERDALE, FL 33312			PERFORMING ARTS	15,000.
BROWARD PUBLIC LIBRARY FOUNDATION	NONE	PUBLIC CHARITY	TO PROVIDE EDUCATIONAL	
100 SOUTH ANDREWS AVENUE			RESOURCES	
FORT LAUDERDALE, FL 33301				25,000.
CHILDREN'S HOME SOCIETY OF FLORIDA	NONE	PUBLIC CHARITY	TO PROTECT AND HEAL	
401 NE 4TH STREET		1	CHILDREN WITHIN THE	
FORT LAUDERDALE, FL 33301		 	COMMUNITIES OF FLORIDA	5,000.
CONNESTEE FALLS SCHOLARSHIP FUND	NONE	PUBLIC CHARITY		
33 CONNESTEE TRAIL			1	
			STUDENTS FOR	
BREVARD, NC 28/12		PUBLIC CHARITY TO ADVANCE AUTIST RESEARCH AND ADVANCE QUALT LIFE IN IOWA AS AFFORDABLE DESTIAND AS A CENTER EDUCATION AND PUBLIC CHARITY TO PROVIDE FOOD EMERGENCY ASSIST TO MEET BASIC HUNEEDS AND LONG TO SOLUTIONS TO BREED THE HISTORICAL MEEDS AND LONG THE HISTORICAL MEEDS AND LONG THE MAINTENANCE OPERATIONS PUBLIC CHARITY TO PROVIDE SUPPORT THE MUSIC CENTER ASPIRING CHILDRED ASPIRING CHILDRED PUBLIC CHARITY TO PROVIDE SUPPORT THE BROWARD CENTER ASPIRING ARTS PUBLIC CHARITY TO PROVIDE EDUCA RESOURCES PUBLIC CHARITY TO PROVIDE EDUCA RESOURCES PUBLIC CHARITY TO PROVIDE EDUCA RESOURCES		
BREVARD, NC 28712			1	1,000.

Part XV Supplementary Information				
3 Grants and Contributions Paid During the	Year (Continuation)			
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	Contribution	rimodin
				
COVENANT HOUSE	NONE	PUBLIC CHARITY	TO PROVIDE SHELTER TO	
P.O. BOX 39282			THE HOMELESS YOUTH	
FORT LAUDERDALE, FL 33339-0282			ACROSS AMERICA	10,000
DOCTORS WITHOUT BORDERS	NONE	DIIDI TO CUADITY	TO PROVIDE HEALTH CARE	
333 SEVENTH AVENUE, 2ND FLOOR	NONE	TOBBIC CHARTII	AND MEDICAL TRAINING	
NEW YORK, NY 10001			TO MULTIPLE COUNTRIES	10 000
EAGLE RANCH	NONE	PUBLIC CHARITY		10,000
P.O. BOX 7200	NONE	TOBBIC CHARITI	CHRIST-CENTERED	
CHESTNUT MOUNTAIN, GA 30502			CHILDREN'S HOME FOR	
CHESINGI MOUNTAIN, GA 30302			BOYS AND GIRLS IN	
			CRISIS	2 000
FAU DEPARTMENT OF ECONOMICS	NONE	DIDLIC CUARTRY	TO PREPARE STUDENTS	3,000.
777 GLADES ROAD	NONE	FOBLIC CHARITI	1	
			FOR CAREERS IN	
BOCA RATON, FL 33431			BANKING, GOVERNMENT,	
			DATA ANALYSIS, TEACHING AND ADVANCED	F 000
FEEDING SOUTH FLORIDA	NONE	DUDI TO CHARTTY	TO HELP END HUNGER IN	5,000.
426 CLAREMORE DRIVE	NONE	FORDIC CHARTII	SOUTH FLORIDA BY	
WEST PALM BCH, FL 33401			PROVIDING IMMEDIATE	
WEST TARM BOIL, TO 33401			ACCESS TO NUTRITIOUS	
			FOOD AND LEADING	10 000
FEEDING SOUTH FLORIDA	NONE	PUBLIC CHARITY	TO HELP END HUNGER IN	10,000.
5850 NW 32ND AVENUE			SOUTH FLORIDA BY	
MIAMI, FL 33142			PROVIDING IMMEDIATE	
HIIII, 18 33142			ACCESS TO NUTRITIOUS	
			FOOD AND LEADING	500.
FLORENCE FULLER CHILD DEVELOPMENT	NONE	PUBLIC CHARITY	 	
200 NE 14TH STREET	TONE.	TOBBIC CIMINITI	ORGANIZATION'S MISSION	
BOCA RATON, FL 33432		-	OF PROVIDING CHILDREN	
book Milon, TE 33132			A PATHWAY OUT OF	
		-	POVERTY	5,000.
		-		
FUNDING ARTS BROWARD	NONE	PUBLIC CHARITY	TO PRESERVE AND	
401 EAST LAS OLAS BLVD STE 2200			CULTIVATE THE ARTS IN	
FORT LAUDERDALE, FL 33301			BROWARD COUNTY	10,000.
GILDA'S CLUB SOUTH FLORIDA	NONE	PUBLIC CHARITY	TO CREATE WELCOMING	
119 ROSE DRIVE			COMMUNITIES OF FREE	
FORT LAUDERDALE, FL 33316			SUPPORT FOR EVERYONE	
			LIVING WITH CANCER	2,000.
GOLD COAST JAZZ SOCIETY	NONE	PUBLIC CHARITY	TO PRESERVE JAZZ MUSIC	
1350 E. SUNRISE BOULEVARD			WITH AN ANNUAL CONCERT	
FORT LAUDERDALE, FL 33304			SEASON IN FORT	
			LAUDERDALE, FL AND	
			VARIOUS EVENTS TO	25,000.
Total from continuation sheets			•	

3 Grants and Contributions Paid During the	e Year (Continuation)			
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	
HEIFER PROJECT INTERNATIONAL	NONE	PUBLIC CHARITY	TO HELP TO END WORLD	
P.O. BOX 8058			HUNGER	4 500
LITTLE ROCK, AR 72203		DUDI TO GUADIMY	TO PROVIDE HELP TO ALL	1,500
HENDERSON MENTAL HEALTH CENTER	NONE	POBLIC CHARITY	PEOPLE ACROSS SOUTH	
4740 NORTH STATE ROAD 7 STE 201			FLORIDA INCLUDED	
FORT LAUDERDALE, FL 33319			SUPPORTIVE HOUSING,	
			PERMANENT HOUSING FOR	5,000
HOLY CROSS HOSPITAL	NONE	PUBLIC CHARITY	TO PROVIDE EXCELLENT	
4725 N. FEDERAL HIGHWAY			MEDICAL CARE AND HIGH	
FORT LAUDERDALE, FL 33308			PERSONALIZED CARE	5,000
HOPE SOUTH FLORIDA	NONE	PUBLIC CHARITY	TO PARTNER WITH	
P.O. BOX 14156			CHRISTIAN COMMUNITY	
FORT LAUDERDALE, FL 33302			AND CHURCHES TO	
			PROVIDE HOUSING,	
		<u> </u>	MENTORING, AND	5,000
	NOVE	PUBLIC CHARITY	TO PROVIDE A	
JOE DIMAGGIO CHILDREN'S HOSPITAL	NONE	PUBLIC CHARITI	COMPREHENSIVE SCOPE OF	
3501 JOHNSON STREET			HEALTHCARE SERVICES TO	
HOLLYWOOD, FL 33021			CHILDREN	5,000
KIDS IN DISTRESS	NONE	PUBLIC CHARITY	TO PREVENT CHILD	- , , , ,
819 NE 26TH STREET			ABUSE, PRESERVE THE	
WILTON MANOR, FL 33305			FAMILY, AND TREAT	
,	ŀ		CHILDREN WHO HAVE BEEN	
			ABUSED AND NEGLECTED	10,000
MACULAR DEGENERATION RESEARCH	NONE	PUBLIC CHARITY	TO SUPPORT SCIENTIFIC	
PO BOX 515			RESEARCH FOR THE	
NORTHAMPTON, MA 01061			PREVENTION, TREATMENT,	
			AND CURE OF MACULAR	
			DENEGERATION	10,000
MAKE A WISH FOUNDATION	NONE	PUBLIC CHARITY	TO GRANT THE WISH OF A	
4491 SOUTH STATE ROAD 7, #201			CHILD DIAGNOSED WITH A	
FORT LAUDERDALE, FL 33314			LIFE-THREATENING	
			MEDICAL CONDITION IN	500
		DIDLES CUSTOM	THE UNITED STATES	500
MEALS ON WHEELS OF BREVARD	NONE	POBLIC CHARITY	TO PROVIDE SENIOR	
431 E MAIN ST.			ADULTS WITH THE	
BREVARD, NC 28712			OPPORTUNITY TO LIVE ON	
			THEIR OWN WITH HOT, NUTRITIOUS MEALS	1,000
MORETUM CANCED CENTED FOUNDATION	NONE	PUBLIC CHARITY	TO PREVENT AND CURE	1,000
MOFFITT CANCER CENTER FOUNDATION	NOME	LOBBIC CHARITI	CANCER, CARE FOR	
12902 MAGNOLIA DRIVE			PATIENTS, AND PROVIDE	
TAMPA, FL 33612			EDUCATION AND CONDUCT	
			CANCER RESEARCH	5,000
Total from continuation sheets		<u></u>		

Part XV Supplementary Information Grants and Contributions Paid During the				
Recipient	If recipient is an individual,	E. adatas		
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
MUSEUM OF DISCOVERY AND SCIENCE	NONE	PUBLIC CHARITY	TO PROVIDE	
401 SW 2ND STREET			EXPERIENTIAL PATHWAYS	
FORT LAUDERDALE, FL 33312			TO LIFELONG LEARNING	
			IN SCIENCE FOR	
			CHILDREN AND ADULTS	10,000
MUSIC RESOURCE CENTER	NONE	PUBLIC CHARITY	TO CREATE A SENSE OF	
105 RIDGE STREET			EMPOWERMENT AND	
CHARLOTTESVILLE, VA 22902			ACCOMPLISHMENT THROUGH	
			RECORDING AND	
			PERFORMING ARTS	6,000
OPERATION MOBILIZATION	NONE	PUBLIC CHARITY	TO PREACH THE GROSPEL	
PO BOX 444			OF JESUS CHRIST TO	
TYRONE, GA 30290			PEOPLE WORLDWIDE	5,000
DARGENER C. IN URAL OU	NONE	DITELLO CHARLEN	TO PRINC DENERING OF	
PARTNERS IN HEALTH	NONE	POBLIC CHARITY	TO BRING BENEFITS OF	
800 BOYLSTON ST, SUITE 1400			MODERN MEDICAL SCIENCE	F.0.0
BOSTON, MA 02199	NONE	DUDITC CHARTEY	TO THOSE MOST IN NEED TO OFFER A CHALLENGING	500
PINE CREST PREPATORY SCHOOL INC	NONE	PUBLIC CHARITY	Į į	
1501 NE 62ND STREET			ACADEMIC EXPERIENCE	
FORT LAUDERDALE, FL 33334			COMPLEMENTED BY	
			EXCELLENCE IN THE ARTS AND ATHLETICS	25 000
PLANNED PARENTHOOD	NONE	PUBLIC CHARITY		25,000
123 WILLIAM ST	, and	TOBBIC CIMICIT	COMPREHENSIVE	
NEW YORK, NY 10038			REPRODUCTIVE AND	
MIN JOINE, MI 10000			COMPLEMENTARY HEALTH	
		{	CARE SERVICES	10,000
SALVATION ARMY OF BREVARD	NONE	PUBLIC CHARITY	TO PREACH THE GROSPEL	
P.O. BOX 748			OF JESUS CHRIST AND TO	
BREVARD, NC 28712)	MEET HUMAN NEEDS IN	
		 	HIS NAME	500
		İ		
SHERIDAN HOUSE FAMILY MINISTRIES	NONE	PUBLIC CHARITY	TO HONOR CHRIST BY	
1700 S. FLAMINGO ROAD			SERVING THE NEEDS OF	
DAVIE, FL 33325		-	CHILDREN AND FAMILIES	10,000
SOS CHILDREN'S VILLAGE OF FLORIDA	NONE	PUBLIC CHARITY	TO PROVIDE FOSTER CARE	
3681 NW 59TH PLACE			SERVICES TO MORE THAN	
COCONUT CREEK, FL 33073-9903			70 FOSTER CHILDREN	10,000
SOUTH FLORIDA MUSEUM	NONE	PUBLIC CHARITY	TO PROVIDE EDUCATIONAL	
201 10TH ST W			RESOURCES	
BRADENTON, FL 34205				500
Total from continuation sheets				

Part XV Supplementary Information			· · · · · · · · · · · · · · · · · · ·	
3 Grants and Contributions Paid During the				
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
SOUTHEASTERN GUIDE DOGS	NONE		TO CREATE AND NURTURE	
4210 77TH STREET EAST			A PARTNERSHIP BETWEEN	
PALMETTO, FL 34221			A VISUALLY IMPARED	
,	Į.	1	INDIVIDUAL AND A GUIDE	
			bog	1,000
SPANISH RIVER COMMUNITY HIGH SCHOOL	NONE	PUBLIC CHARITY	TO PROVIDE SECONDARY	
5100 JOG ROAD			EDUCATION TO THOSE IN	
BOCA RATON, FL 33496			THE BOCA RATON AND	
		1	DELRAY BEACH	
		<u> </u>	COMMUNITIES	3,000.
		}		
ST JUDE CHILDREN'S RESEARCH HOSPITAL	NONE	PUBLIC CHARITY	TO FIND CURES AND SAVE	
P.O. BOX 50			CHILDREN WITH	
MEMPHIS, TN 38101		Ì	PEDIATRIC CANCER AND	
	 	 	OTHER DISEASES	22,000.
		1		
STETSON UNIVERSITY	NONE	PUBLIC CHARITY	TO PROVIDE	
421 NORTH WOODLAND BLVD UNIT 8279		}	POST-SECONDARY	
DELAND, FL 32723		1	EDUCATION	3,000.
SYMPHONY OF THE AMERICAS SOCIETY	NONE	PUBLIC CHARITY	TO IMPROVE THE LIVES	
2425 E COMMERCIAL BLVD STE 405			OF CHILDREN THROUGH	
FORT LAUDERDALE, FL 33308		1	THE MAGIC OF MUSICAL	
			INVESTIGATIONS	13,000.
TAYLORS CLOSET FOUNDATION, INC,.	NONE	PUBLIC CHARITY	TO CREATE A COMMUNITY	
200 NE 2ND STREET			IN WHICH GRILS IN NEED	
POMPANO BEACH, FL 33060			WILL BE EMPOWERED TO	
	İ		BREAK THE CYCLE OF ABUSE AND NEGLET	10,000.
			THE RESERVE	10,000.
TERRACE HILL PARTNERSHIP	NONE	PUBLIC CHARITY	TO PRESERVE AND	
2300 GRAND AVENUE			ENHANCE THE PROPERTY	
DES MOINES, IA 50312	İ		AND PROGRAMS OF	
			TERRACE HILL	5,000.
THE BOYS AND GIRLS CLUBS OF BROWARD	NONE	DUDI IC CUADITY	TO CIVE LOCAL DOVC AND	
	NONE	PUBLIC CHARITY	TO GIVE LOCAL BOYS AND	
COUNTY 877 NW 61ST STREET			GIRLS A POSITIVE ALTERNATIVE TO THE	
FORT LAUDERDALE, FL 33309	ĺ		STREETS	10 000
TOKT BRODERDADE, TH 33303	 	 	STREETS	10,000.
THE BOYS AND GIRLS CLUBS OF PALM	NONE	PUBLIC CHARITY	TO GIVE LOCAL BOYS AND	
BEACH COUNTY			GIRLS A POSITIVE	
800 NORTHPOINT PKWY, STE 204	1		ALTERNATIVE TO THE	
WEST PALM BCH, FL 33407		<u> </u>	STREETS	500.
	Ĺ <u>.</u>			
THE SALVATION ARMY	NONE	PUBLIC CHARITY	TO PREACH THE GROSPEL	
1445 W. BROWARD BOULEVARD			OF JESUS CHRIST AND TO	
TODE - 110000015 22212	}	1		
FORT LAUDERDALE, FL 33312			MEET HUMAN NEEDS IN HIS NAME	10,000.

	Year (Continuation)	T		
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		
TRANSYLVANIA COMMUNITY HOSPITAL	NONE	PUBLIC CHARITY	TO PROVIDE MEDICAL	
FOUNDATION			CARE AND HELP THE	
P.O. BOX 2440	1		LOCAL HOSPITAL	
BREVARD, NC 28712			MAINTAIN, EXPAND, AND	
			IMPROVE QUALITY HEALTH	1,000
			,	
TRANSYLVANIA COUNTY RESCUE SQUAD	NONE	PUBLIC CHARITY	TO PROVIDE EMERGENCY	
233 FISHER ROAD	-		SERVICES TO THE LOCAL	
BREVARD, NC 28712			AREA	500
UNITED WAY OF BROWARD	NONE	PUBLIC CHARITY	TO FOCUS AND UNITE OUR	
1300 SOUTH ANDREWS AVENUE			ENTIRE COMMUNITY TO	
FORT LAUDERDALE, FL 33316	İ		CREATE SIGNIFCANT	
			LASTING CHANGE IN THE	
			COMMUNTITY	10,000
UNITED WAY OF TRANSYLVANIA COUNTY	NONE	PUBLIC CHARITY	TO FOCUS AND UNITE OUR	
P.O. BOX 53	1		ENTIRE COMMUNITY TO	
BREVARD, NC 28712			CREATE SIGNIFCANT	
			LASTING CHANGE IN THE	
			COMMUNTITY	1,000
USO WORLD HEADQUARTERS	NONE	PUBLIC CHARITY	TO HELP PROVIDE A HOME	
P.O. BOX 96860	ł		AWAY FROM HOME FROM	
WASHINGTON, DC 20077-7677	1		OUR TROOPS	5,000
WEDGEWOOD CHRISTIAN YOUTH & FAMILY	NONE	PUBLIC CHARITY		,,,,,,
SVCS			PROFESSIONAL	
3300 36TH ST, S.E.	ł		COUNSELING TO	
GRAND RAPIDS, MI 49518~0007			CHILDREN, YOUTH AND	
,	1		FAMILIES WITH THE	5,000
WOMEN IN DISTRESS	NONE	PUBLIC CHARITY	TO STOP DOMESTIC	
P.O. BOX 676	1		VIOLENCE FOR EVERYONE	
FORT LAUDERDALE, FL 33302			THROUGH INTERVENTION	
,	İ	1	EDUCATION, AND	
			ADVOCACY	25,000
WORLD VISION	NONE		TO WORK WITH CHILDREN	
P.O. BOX 9716	1		AND FAMILIES WORLDWIDE	
FEDERAL WAY, WA 98063-6462	i	1	TO REACH THEIR FULL	
,		1	POTENTIAL BY TACKLING	
	Ì	1	POVERTY	5,000
		 		
		_		
		·		

Part XV Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - AMERICAN RED CROSS SOUTH FLORIDA

TO PROVIDE DISASTER RELIEF AT HOME AND ABOARD, CPR CERTIFICATION AND

FIRST AID COURSES, AND EMERGENCY PREPAREDNEDD.

NAME OF RECIPIENT - AMERICAN RED CROSS-PALM BEACH COUNTY RELIEF

TO PROVIDE DISASTER RELIEF AT HOME AND ABOARD, CPR CERTIFICATION AND

FIRST AID COURSES, AND EMERGENCY PREPAREDNEDD.

NAME OF RECIPIENT - BLANK PARK ZOO FOUNDATION

TO ENHANCE QUALITY OF LIFE IN IOWA AS AN AFFORDABLE DESTINATION AND AS

A CENTER FOR EDUCATION AND ENDANGERED SPECIES CONSERVATION.

NAME OF RECIPIENT - BOCA HELPING HANDS

TO PROVIDE FOOD AND EMERGENCY ASSISTANCE TO MEET BASIC HUMAN NEEDS AND

LONG TERM SOLUTIONS TO BREAK THE CYCLE OF DEPENDENCE

NAME OF RECIPIENT - FAU DEPARTMENT OF ECONOMICS

TO PREPARE STUDENTS FOR CAREERS IN BANKING, GOVERNMENT, DATA ANALYSIS,

TEACHING AND ADVANCED GRADUATE OR DOCTORAL WORK

NAME OF RECIPIENT - FEEDING SOUTH FLORIDA

TO HELP END HUNGER IN SOUTH FLORIDA BY PROVIDING IMMEDIATE ACCESS TO

NUTRITIOUS FOOD AND LEADING HUNGER AND POVERTY ADVOCACY EFFORTS.

NAME OF RECIPIENT - FEEDING SOUTH FLORIDA

TO HELP END HUNGER IN SOUTH FLORIDA BY PROVIDING IMMEDIATE ACCESS TO

NUTRITIOUS FOOD AND LEADING HUNGER AND POVERTY ADVOCACY EFFORTS.

Part XV Supplementary Information
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution
NAME OF RECIPIENT - GOLD COAST JAZZ SOCIETY
TO PRESERVE JAZZ MUSIC WITH AN ANNUAL CONCERT SEASON IN FORT
LAUDERDALE, FL AND VARIOUS EVENTS TO CELEBRATE JAZZ
NAME OF RECIPIENT - HENDERSON MENTAL HEALTH CENTER
TO PROVIDE HELP TO ALL PEOPLE ACROSS SOUTH FLORIDA INCLUDED SUPPORTIVE
HOUSING, PERMANENT HOUSING FOR THOSE WITH CO-OCCURRING SUBSTANCE ABUSE
AND MENTAL HEALTH, AND EMERGENCY HOMELESS SHELTER
NAME OF RECIPIENT - HOPE SOUTH FLORIDA
TO PARTNER WITH CHRISTIAN COMMUNITY AND CHURCHES TO PROVIDE HOUSING,
MENTORING, AND ONE-STOP SERVICE CENTERS FOR BROKEN FAMILIES
NAME OF RECIPIENT - TRANSYLVANIA COMMUNITY HOSPITAL FOUNDATION
TO PROVIDE MEDICAL CARE AND HELP THE LOCAL HOSPITAL MAINTAIN, EXPAND,
AND IMPROVE QUALITY HEALTH CARE
NAME OF RECIPIENT - WEDGEWOOD CHRISTIAN YOUTH & FAMILY SVCS
TO PROVIDE PROFESSIONAL COUNSELING TO CHILDREN, YOUTH AND FAMILIES WITH
THE PROBLEMS THEY ARE FACING

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs gov/form990.

OMB No 1545-0047

2016

Employer identification number

65-0848161 FOUNDATION, INC. H.I. Organization type (check one) Filers of: Section. 501(c)(Form 990 or 990 EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990 EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990 PF) but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990 PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990 EZ or 990 PF)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

	B (Form 990, 990 EZ, or 990-PF) (2016) rganization	Em	Pag ployer identification number
н.І.	FOUNDATION, INC.		65-0848161
Part I	Contributors (See instructions) Use duplicate copies of Part I if ad		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RICHARD S. INGHAM		Person Payroll
	2848 EAST OAKLAND PARK BOULEVARD	\$\$,174,300	Noncash X
	FORT LAUDERDALE, FL 33306	_	(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\ \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ \$	Person Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
(a) No			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)

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

Employer identification number

H.I. FOUNDATION, INC.

65-0848161

art II	Noncash Property (See instructions) Use duplicate copies of Par	rt II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	10,000 SHARES OF FACEBOOK, INC.	_	
		s1,174,300.	12/05/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
No. from Part I (a) No. from Part I (a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

Name of orga	anization		Employer identification number				
	OUNDATION, INC.	ntributions to organizations describe	65-0848161 ed in section 501(c)(7), (8), or (10) that total more than \$1,000				
Part III	the year from any one contributor. Complete completing Part III enter the total of exclusively religious. Use duplicate copies of Part III if additional and the completing Part III if additional and the copies of Part III is additional and the copies of Part III if additional and the copies of Part III is additional and the copies of Part III is additional and the copies of Part III is additional and the copies of Part III is additional and the copies of Part III is additional and the copies of Part III is additional and the copies of Part III is additional and the copies of Part III is additional and the copies of Part III is additional and the copies of Part III is additional and the copies of Part III is additional and the copies of Part III is additional and t	e columns (a) through (e) and the follows charitable etc., contributions of \$1,000 c	lowing line entry. For organizations				
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gi	gift				
	Transferee's name, address,		Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		-					
		(e) Transfer of gi					
-	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee				
:							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gi					
-	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee				

FORM 990-PF INTERE	ST ON SAVING	S AND TI	EMPORAR	Y CASH	IN	/ESTMENTS	ຮາ	PATEMENT	1
SOURCE		RE	(A) VENUE BOOKS	NET	IN	(B) VESTMENT COME	1	(C) ADJUSTED NET INCOMI	€
AMERICAN NATIONAL B. JP MORGAN K-1 THE CARLYLE GRO		3,046 236 466	•		3,046. 236. 466.				
TOTAL TO PART I, LI	NE 3		3,748	<u>. </u>		3,748.		=	
FORM 990-PF	DIVIDENDS	AND INT	EREST F	ROM SE	CUR	ITIES	SI	ГАТЕМЕПТ	2
SOURCE	GROSS AMOUNT	CAPITA GAINA DIVIDE	S	(A) REVENU ER BOO		(B) NET INVES MENT INCC		(C) ADJUSTI NET INCO	
JP MORGAN - DIVIDENDS K-1 THE CARLYLE GROUP	262,994. 2,577.	107,	926. 577.	155,0	68.	155,06	8.		
TO PART I, LINE 4	265,571.	110,	503.	155,0	68.	155,06	58.		
FORM 990-PF		OTHER	INCOME			· · · ·	SI	ГАТЕМЕНТ	3
DESCRIPTION			(A REVE PER B	NUE		(B) ET INVEST- ENT INCOME		(C) ADJUSTEI NET INCON	
JP MORGAN - NONTAXA K-1 THE CARLYLE GRO)S		2,520						
TOTAL TO FORM 990-P	F, PART I, L	INE 11		2,459	<u>. </u>	<61	 . •>		

FORM 990-PF	ACCOUNTI	NG FEES	S	TATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	5,130.	2,565.		2,565.
TO FORM 990-PF, PG 1, LN 16B	5,130.	2,565.		2,565.
FORM 990-PF (OTHER PROFES	SIONAL FEES	S	TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEES	16,478.	16,478.		0.
TO FORM 990-PF, PG 1, LN 16C	16,478.	16,478.		0.
FORM 990-PF	TAX	ES	S	TATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAX REFUND FOREIGN TAX WITHHELD	<8,814. 3,252.			0.
TO FORM 990-PF, PG 1, LN 18	<5,562.	> 3,252.		0.
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
STATE FILING FEE	61.	31.		30.
STATE RENEWAL OF FICTITIOUS NAME	50.	25.		25.
TO FORM 990-PF, PG 1, LN 23	111.	56.		55.
	2,21	: =======		

FORM 990-PF CORE	PORATE STOCK		STATEMENT (
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	
US LARGE CAP EQUITIES, JPM 5002 (STAUS MID/SMALL CAP EQUITIES, JPM 5002		4,107,701.	5,325,398	
A)	(211112112111	659,793.	903,914	
NON US EQUITIES, JPM 5002 (STATEMENT	r A)	1,626,812.	1,659,348.	
US LARGE CAP EQUITIES, JPM 2001 (STA		686,125.	1,133,062	
US MID CAP EQUITIES, JPM 2001 (STATE	EMENT A)	40,500.	22,875.	
NON US EQUITIES, JPM 2001 (STATEMENT	гв)	23,949.	560,898.	
TOTAL TO FORM 990-PF, PART II, LINE	10B	7,144,880.	9,605,495.	
FORM 990-PF OTHER	RINVESTMENTS		STATEMENT 9	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
PARTNERSHIP ADDITIONAL BASIS	COST	9,915.	9,915.	
TOTAL TO FORM 990-PF, PART II, LINE 13		9,915.	9,915.	
FORM 990-PF LIST OF SUBSTA	ANTIAL CONTRIB	UTORS	STATEMENT 10	
NAME OF CONTRIBUTOR	ADDRESS			
RICHARD INGHAM 2848 EAST OAKLAND PARK BOULEVARD FORT LAUDERDALE, FL 33306			VARD	

	JIST OF OFFICERS, DAND FOUNDATION MANA		STAT	EMENT 11
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
RICHARD S. INGHAM 2848 E. OAKLAND PARK BLVD FORT LAUDERDALE, FL 33306	DIRECTOR 1.00	0.	0.	0.
RICHARD S. INGHAM, JR 2848 E. OAKLAND PARK BLVD FORT LAUDERDALE, FL 33306	DIRECTOR 1.00	0.	0.	0.
TIMOTHY C. INGHAM 2848 E. OAKLAND PARK BLVD FORT LAUDERDALE, FL 33306	DIRECTOR 1.00	0.	0.	0.
ANNELLE I. CARNEY 2848 E. OAKLAND PARK BLVD FORT LAUDERDALE, FL 33306	DIRECTOR 1.00	0.	0.	0.
HILARY I. HICKMAN 2848 E. OAKLAND PARK BLVD FORT LAUDERDALE, FL 33306	DIRECTOR 1.00	0.	0.	0.
SHARON I. HORAL 2848 E. OAKLAND PARK BLVD FORT LAUDERDALE, FL 33306	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	C 6, PART VIII	0.	0.	0.

GENERAL EXPLANATION

STATEMENT 12

FORM/LINE IDENTIFIER

FORM 990-PF, PART I, LINE 16, COLUMN (A)

EXPLANATION:

NAME OF PROVIDER TYPE OF SERVICE PROVIDED AMOUNT PAID

LINE 16B, ACCOUNTING FEES:

RSM US LLP

PREPARATION OF 2015 FQRM 990-PF \$5,130

LINE 16C, OTHER PROFESSIONAL FEES:

JP MORGAN BANK MANAGEMENT FEES

\$16,478

HI Foundation Equity Detail - Attachment A JPM #5002 HI FOUNDATION INC ACCT. A24735002
For the Period 12/1/16 to 12/31/16

Equity Detail

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J.P.Morgan

HI Foundation Equity Detail -, Attachment A JPM #5002 H I FOUNDATION INC. ACCT. A24735002
For the Period 12/1/16 to 12/31/16

	Рпсе	Quantity	Value	Adjusted Tax Cost Onginal Cost	Unrealized Gain/Loss	Est Annual Inc Accrued Div	Yield
US Large Cap Equity							
CULLEN HIGH DIVIDEND EQ-1 230001 40-6 CHDV X	17.35	32,725 553	567,788 34	433,860 42	133,927 92	15,970 06	281%
JPM GRWTH ADVANTAGE FD - SEL FUND 1567 4812A3-71-8 JGAS X	15 54	40,126 475	623,565 42	376,635 37	246,930 05		
JPM US LARGE CAP CORE PLUS FD - SEL FUND 1002 4812A2-38-9 JLPS X	28 12	22,074 760	620,742 25	454,924 81	165,817 44	2,075 02	0 33%
NEUBERGER BER MU/C OPP-INS C 64122Q-30-9 NMUL X	16 44	39,049 444	641,972 86	388,639 98	253,332 88	5,662 16	0 88 %
SPDR S&P 500 ETF TRUST 78462F-10-3 SPY	223 53	10,553 000	2,358,912 09	1,978.274 50	380,637 59	47,900 06	2 03%
Total US Large Cap Equity			\$5,325,398.24	\$4,107,701.04	\$1,217,697.20	\$71,607.30 \$14,024.20	1.34%
US Mid Cap Equity ISHARES CORE S&P MIDCAP ETF 464287-50-7 IJH	165 34	5,467 000	903,913 78	659,792 86	244,120 92	14,427 41	1 60%
EAFE Equity							
ARTISAN INTL VALUE FD-ADV VO4314H-66-7 APDK X	32 41	9,548 083	309,453 37	272,830 93	36,622.44		
DODGE & COX INTL STOCK FD 256206-10-3 DODF X	38 10	5,784 412	220,386 10	219,553 72	832 38	4,922 53	2 23%

J.P.Morgan

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H I FOUNDATION INC ACCT. A24735002 For the Period 12/1/16 to 12/31/16

	Рпсе	Quantity	Value	Adjusted Tax Cost Original Cost	Unrealized Gain/Loss	Est Annual Inc Accrued Div	Yield
EAFE Equity	,						
ISHARES MSCI EAFE SMALL-CAP / 464288-27-3 SCZ	49 84	4,205 000	209,577 20	214,186 29	(4,609 09)	5,916.43	2 8 2 %
ISHARES MSCI EAFE INDEX FUND 7464287-46-5 EFA	57 73	3,774 000	217,873 02	227,741 50	(9,868 48)	6,683 75	3 07 %
Total EAFE Equity			\$957,289.69	\$934,312.44	\$22,977.25	\$17,522.71	1.83%
Japanese Large Cap Equity Brown adv Japan alpha opp-is	89 6	12,397 444	120,007 26	132,500 00	(12,492 74)	11,765 17	%086
Global Equity JPM GLBL RES ENH INDEX FD - SEL ✓ FUND 3457 46637K-51-3 JEIT X	18 72	31,092 470	582,051 04	560,000 00	22,051.04	12,934 46	2 22%

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HI Foundation Equity Detail - Attachment B JPM #2001 H. Morgan

H.I. FOUNDATION, INC. ACCT. Q47512001 For the Period 12/1/16 to 12/31/16

	Price	Quantity	Vaiue	Adjusted Tax Cost Onginal Cost	Unrealized Gain/Loss	Est Annual Inc Accrued Div	Yield
US Large Cap Equity KAR AUCTION SERVICES INC VA8238T-10-9 KAR	42 62	100 000	4,262 00	2,125 00	2,137 00	128 00 32 00	3 00%
C THERMO FISHER SCIENTIFIC INC 883556-10-2 TMO	141 10	8,000 000	1,128,800 00	684,000 00	444,800 00	4,800 00	0 43%
Total US Large Cap Equity			\$1,133,062.00	\$686,125.00	\$446,937.00	\$4,928.00 \$1,232.00	0.44%

G The position contains gifted shares. Pursuant to IRS Publication 551, the Tax Cost of gifted shares is equal to either the adjusted cost basis or the fair market value of the shares at the time they were gifted, depending on whether the shares expenenced a gain or loss in the value since that time

US Mid Cap Equity CARLYLE GROUP/THE 14309L-10-2 CG	Non-US Equity ing groep n.vsponsored adr
15 25	14 10
1,500.000	39,780 000
22,875 00	560,898 00
40,500 00	23,948 99
(17,625 00)	536,949 01
2,520 00 11 02%	23,788 44
11 02%	4 24%

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