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EXTENDED TO NOVEMBER 15, 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. OMB No 1545-0052

		t of the freasury	social security numbers or			2010
			m 990-PF and its separate 1 15 , 2016			Open to Public Inspection
			15, 2016	, and ending	DEC 31, 2016	
Nam	e of	foundation			A Employer identification r	number
m		GWADW BANTIN BINID			01 2207021	
		SMART FAMILY FUND nd street (or PO box number if mail is not delivered to street	address)	Room/suite	81-2297831	
			. audress)	l i	B Telephone number	- ^
		1 WARRENVILLE ROAD	and and a	500	331-702-276	
		own, state or province, country, and ZIP or foreign p LE . IL 60532–4306	ostarcode		C If exemption application is per	nding, check here
			Lastial satura of a f		D 4 Carrier avanamentana	abaali basa 🔊 🗔
G C	ieck	all that apply: X Initial return		ormer public charity	D 1. Foreign organizations,	check here
		Final return	Amended return		Foreign organizations meet check here and attach com	ing the 85% test,
		Address change	Name change		check here and attach com	putation
HC		type of organization: X Section 501(c)(3) ex		-4	E If private foundation statu	
			Other taxable private found		under section 507(b)(1)(/	•
		arket value of all assets at end of year J Account	-	Accrual	F If the foundation is in a 60	
(tro		Part II, col. (c), line 16)	ther (specify)	hacic)	under section 507(b)(1)(l	3), cneck nere
		Analysis of Revenue and Expenses				/d\ 0h
riga.	, 181	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(0) Disbursements for charitable purposes
				\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Mary short of the State	(cash basis only)
ļ	1	Contributions, gifts, grants, etc., received	26,185,402.		N/A	
į	2	Check I if the foundation is not required to attach Sch. B. Interest on savings and temporary	The state of the same of the s		8, 47.5° - 7. ° - 7. ° 37.5° 38.7°	
Ì	3	cash invesoments	45	45	 	2794
1	4	Dividends and interest from securities	45.	45.		TATEMENT 1
Ì		Gross cents	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			3.4
		Net rental income or (loss)	Part of the second	7 A 3 96 Be	A STATE OF THE STA	
e	_	Ner gain or (ioss) from sale of assets not on line 10 Gross sales price for all	2\82\2\100000000000000000000000000000000	~	2-40 4 4 4 4 4 4 4	
ē	b	ascets on line 6a		***************************************	ALL AND DESCRIPTION OF THE PARTY OF THE PART	
Revenue	7	Cantal gain has facome from Partily, line 2)		0.		
_	8	Net short-term capital gain	Walter Street			
1	9	indome module ations Grass tales lets Blyms 712017	348 x x x x x x x x x x x x x x x x x x x	79.7	W NO THE STATE OF	
	10a	Grand Howanos (1997) [7] [2017] [9] and Howanos (1997) [9] [9]				
1			The state of the s			
}		Gross profit (F) (1035)	250 000	747.50	l	
	11	Other income	370,000.	0.		TATEMENT 2
-	12	Total. Add lines 1 through 11 .	26,555,447.	45.	 	<u> </u>
- 1	13	Compensation of officers, directors, trustees, erc	0.	0.	 	0.
1		Other employee salaries and wages		<u></u>	 	
စ္ခ		Pension plans, employee benefits	0.000		<u> </u>	0.000
ıse		Legal fees STMT 3	8,898.	0.		8,898.
<u>a</u>		Accounting fees				
<u> </u>	•	Other professional fees				
, <u>\$</u>	17	Interest				
Ę.		Taxes				7
Ë.	19	Depreciation and depletion	1 600		<u> </u>	Maria Commission Commission of
Ę		Occupancy	1,600.	0.	 	1,600.
~ ₽		Travel, conferences, and meetings	<u> </u>		h	
-E		Printing and publications	1 000			1 000
>= [Other expenses STMT 4	1,069.	0.		1,069.
rat	24	Total operating and administrative	11 500			11 660
١۾ي		expenses. Add lines 13 through 23	11,567.	Q.		11,567.
3		Contributions, gifts, grants paid	0.	 		0.
2	26	Total expenses and disbursements.	11 565			44 565
-		Add lines 24 and 25	11,567.	.0.	-	11,567.
1		Subtract line 26 from line 12:	LOC 543 333	٠.		,
-		Excess of revenue over expenses and disbursements	26,543,880.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	 	
- 1		Net investment income (if negative, enter -0-)		45.	N/A	
- 1	C	Adjusted net income (if negative, enter -0-)	Ī	۰ ' ،	ı N/A İ	4

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

FO	<u>ım 99</u>	00-PF (2016) THE SMART FAMILY FUND		81-	- <u> </u>
*-	7.184 Y	Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only	Beginning of year	End	of year
4.3		column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		411,919.	
	1	•		2,784,498	
	2	Savings and temporary cash investments	PERSONAL PROPERTY OF STREET	2, /04, 430 d	2, /04, 490.
	3	Accounts receivable ►			
	İ	Less: allowance for doubtful accounts			
	4	Pledges receivable -	1784 - 1		
	ĺ	Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	"				
	۱_	disqualified persons			
	7	Other notes and loans receivable			
	ŀ	Less: allowance for doubtful accounts			
23	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments - U.S. and state government obligations			
	1	Investments - corporate stock STMT 7	0.	11,021,144.	23,260,489.
		Investments assessed bands		11/021/111	23,230,2031
	111	Investments - land, buildings, and equipment basis			
	1	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
-	14	Land, buildings, and equipment basis ►			
	1	Less accumulated depreciation			
	15	Other assets (describe ► O'THER)	0.	573.	573.
		Total assets (to be completed by all filers - see the			
	ייי	•		14 210 124	26 457 470
_		instructions. Also, see page 1, rtem i)	0.	14,218,134.	26,457,479.
	1	Accounts payable and accrued expenses			
	18	Grants payable			
တ္ထ	19	Deferred revenue			
≝	20	Loans from officers, directors, frustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
Ë	I	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
	23				
	1	Foundations that follow SFAS 117, check here			
s	i	and complete lines 24 through 26 and lines 30 and 31.			
S	24	Unrestricted			
<u>a</u>	25	Temporarily restricted			
Ba	26	Permanently restricted			, , , , , , , , , , , , , , , , , , , ,
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here > X			
Ŀ		and complete lines 27 through 31.	ļ		
ö	27	Capital stock, trust principal, or current funds	0.	0.	
şţs	1		0.		
386	28	Paid-in or capital surplus, or land, bldg., and equipment fund		0.	
۲	29	Retained earnings, accumulated income, endowment, or other funds	0.	14,218,134.	
ž	30	Total net assets or fund balances	0.	14,218,134.	
	1				
	31	Total liabilities and net assets/fund balances	0.	14,218,134.	
		Analysis of Changes in Net Assets or Fund E	Ralancos		
(la	ahi	Milalysis of Changes in Net Assets of Fund E	palatices		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	2 30		T
•		st agree with end-of-year figure reported on prior year's return)			_
_					26 542 000
		amount from Part I, line 27a	٠	2	26,543,880.
		r increases not included in line 2 (itemize)			0.
		lines 1, 2, and 3		. 4	26,543,880.
		eases not included in line 2 (itemize)		ATEMENT 6 5	12,325,746.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	olumn (b), line 30	6	14,218,134.
					Form 990-PF (2016)

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Add lines 5 and 6

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.

Enter qualifying distributions from Part XII, line 4

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1	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	1948 -	- see instructions)
18	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.		
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	3000	
ì	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1 339339	1
_	of Part I, line 27b		
_	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	3133333	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Add lines 1 and 2	2	<u>0</u> 1
3 A	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	3	<u> </u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	0
6	Credits/Payments:		
-	2016 estimated tax payments and 2015 overpayment credited to 2016		
	Exempt foreign organizations - tax withheld at source		
	Tax paid with application for extension of time to file (Form 8868) 6c 15,000.		
	Backup withholding erroneously withheld 6d		
7	Total credits and payments. Add lines 6a through 6d	7	15,000
8	Enter any penalty for underpayment of estimated tax. Check here 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	14,999
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax 14,999. Refunded	11	0
Pa	Statements Regarding Activities		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	in	Yes No
	any political campaign?		1a X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ned or	
	distributed by the foundation in connection with the activities.		
	Did the foundation file Form 1120-POL for this year?		. 1c X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		
	(1) On the foundation. \blacktriangleright \$ 0. (2) On foundation managers. \blacktriangleright \$ 0.		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		
	managers. • \$		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2 X
3	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, of bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	11	2 7
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	•• •••	. 3 X 4a X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N,	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. •••	5 X
·	If "Yes," attach the statement required by General Instruction T.		i i e i i
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 X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	,	7 X
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		
	IL		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		
	of each state as required by General Instruction G? If "No," attach explanation		8b X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar	
4-	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV		9 X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses S	TMT	8 10 X
			Form 990-PF (2016

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на	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]
	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?	1	ł	1
	If "Yes," attach statement (see instructions)	12		x
13	Did the foundation compty with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► THE FOUNDATION Telephone no. ► 331-76	12-2	760	
•	Located at ► 1001 WARRENVILLE ROAD, NO. 500, LISLE, IL ZIP+4 ►60			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	, <u>, , , , , , , , , , , , , , , , , , </u>		<u>, </u>
13	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
10		16	103	
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
<u></u>	foreign country			
J.d	Statements Regarding Activities for Which Form 4720 May Be Required	122122		
	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? Yes X 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?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			1
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
U	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	1b	******	10000

	Organizations relying on a current notice regarding disaster assistance check here			
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			37
_	before the first day of the tax year beginning in 2016?	1c	الساش	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			17
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	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? Yes X No			
	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			
	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.)	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.			· · · :
	>	100		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
J -	Vac V Na			
h	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,			
		25		
4 -	Form 4720, to determine if the foundation had excess business holdings in 2016.)	36		75
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
Þ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		الكرو	7-
	had not been removed from econardy before the first day of the tax year beginning in 2016?	1 4h		X

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!PartiVIII#	Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)			
3 Five highes	st-paid independent contractors for professional services. If none, en	ter "NONE."		
`	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Co	mpensation
N	ONE			
				-
Total number o	f others receiving over \$50,000 for professional services		>	0
PartixeA	Summary of Direct Charitable Activities	ر با نے پہلے ہوت ۔ ۔ ۔ ۔ ۔ ۔ ۔ ۔ ۔ ۔ ۔ ۔ ۔ ۔ ۔ ۔ ۔ ۔ ۔		
number of orga	tion's four largest direct charitable activities during the tax year. Include relevant sta nizations and other beneficiaries served, conferences convened, research papers pi	tistical information such as the roduced, etc.	Expens	es
1N	/A			
2				
3				
4				
in-anyini				
Describe the tw	Summary of Program-Related Investments o largest program-related investments made by the foundation during the tax year of	on lines 1 and 2	Amoun	t
	A	on mics Tanu Z.	Alliouli	
2				
All other progra	m-related investments. See instructions.			
3				

| Pactx | Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 1,137,509. Average monthly fair market value of securities 1a 332,319. b Average of monthly cash balances 1b 10 c Fair market value of all other assets 1,469,828. 1d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d 4 22,047. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 1,447,781. 5 Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD 51,763. 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.) 51,763. Minimum investment return from Part X, line 6 2a Tax on investment income for 2016 from Part VI. line 5 Income tax for 2016. (This does not include the tax from Part VI.) Add lines 2a and 2b 3 Distributable amount before adjustments. Subtract line 2c from line 1 4 Recoveries of amounts treated as qualifying distributions 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, PartXIII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 1b Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the: 3a Suitability test (prior IRS approval required) Cash distribution test (attach the required schedule) 11,567 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income, Enter 1% of Part I, line 27b Adjusted qualifying distributions. Subtract line 5 from line 4 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.

PartXIII Undistributed Income (see instructions)

-	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,				2010
line 7				51,762.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			0.	
ь Total for prior years:		0		
3 Excess distributions carryover, if any, to 2016:		0.		
a From 2011				
b From 2012				
c From 2013				
d From 2014	Land a state of the state of th		San San San San San San San San San San	
e From 2015				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ► \$ 11,567. a Applied to 2015, but not more than line 2a				
b Applied to undistributed income of prior		**	**************************************	
years (Election required - see instructions)		0.1	0 1/2 1 3/2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
c Treated as distributions out of corpus	PACE.			
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				11,567.
e Remaining amount distributed out of corpus	0.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount	0.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0.
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	843. × 38 1 2	73 \$6. 07.500		
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	* ;		, , <u>*</u>	
the section 4942(a) tax has been previously			· , , , , , , , , , , , , , , , , , , ,	
assessed	· · · · · · · · · · · · · · · · · · ·	0.	 	
d Subtract line 6c from line 6b. Taxable		^	·	, , , , , , , , , , , , , , , , , , ,
amount - see instructions e Undistributed income for 2015. Subtract line		0.	<u> </u>	Y 8466
4a from line 2a. Taxable amount - see instr.		1.5	0.	
f Undistributed income for 2016. Subtract			3,7.	
lines 4d and 5 from line 1. This amount must	*	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	° \$~.	
be distributed in 2017	`,'	, (40,195.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				, , 3 ,
section 170(b)(1)(F) or 4942(g)(3) (Election	,			` ``
may be required - see instructions) 8 Excess distributions carryover from 2011	0.			· · · · · · · · · · · · · · · · · · ·
not applied on line 5 or line 7	0.	1		
9 Excess distributions carryover to 2017.	0.			
Subtract lines 7 and 8 from line 6a	0.			*. 3
0 Analysis of line 9:				
a Excess from 2012	~ •		ļ	, 2 ₀
b Excess from 2013				1
c Excess from 2014		•		٨-
d Excess from 2015				,,,
e Excess from 2016.				

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Rant XIVA Private Operating F			I-A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter that	it is a private operating			
foundation, and the ruling is effective fo					
b Check box to indicate whether the found			in section	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	lg roundation doodsibou	Prior 3 years	<u> </u>	
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for	, , , , , , , , , , , , , , , , , , ,	,	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `		<u> </u>
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	<u> </u>				
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
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)		<u> </u>			
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year		ļ			
listed			<u> </u>		
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on	1				1
securities loans (section					
512(a)(5)), or royalties)			<u> </u>		
(2) Support from general public					
and 5 or more exempt organizations as provided in		1			
section 4942(j)(3)(B)(iii)					<u> </u>
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income	<u> </u>		<u> </u>		<u> </u>
PartXV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during	the year-see insti	ructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh			tributions received by th	e foundation before the cl	ose of any tax
year (but only if they have contributed r	nore than \$5,000). (See s	ection 507(d)(2).)			
NONE			<u>.</u>	·	
b List any managers of the foundation wh	no own 10% or more of th	e stock of a corporation	(or an equally large port	tion of the ownership of a	partnership or
other entity) of which the foundation ha	is a 10% or greater intere	st.			
NONE					_
2 Information Regarding Contribut	ion, Grant, Gift, Loan	, Scholarship, etc., P	rograms:		
Check here > X if the foundation	only makes contributions	to preselected charitable	organizations and does		
the foundation makes gifts, grants, etc.	(see instructions) to indi-	viduals or organizations	under other conditions,	complete items 2a, b, c, ar	nd d.
a The name, address, and telephone num	ber or e-mail address of	the person to whom app	lications should be addr	essed:	
, =					
b The form in which applications should	be submitted and informa	tion and materials they s	should include:		
		······································			
c Any submission deadlines:					
They bear motion added to the control of the contro					
d Any restrictions or limitations on award	s. such as by geographic	al areas, charitable fields	, kinds of institutions. oi	r other factors:	
,	-, , =, g, g, ap, ap, no		,,,	·	

Form 990-PF (2016)

Total

art XVI A	Analysis	of Income	-Producina	Activities
	Allulysis	OI IIIOOIIIC	1 Toddoning	ACCITICO

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		by section 512, 513, or 514	(e)
•	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	COUE				· · · · · · · · · · · · · · · · · · ·
a					
• ·					
d					
e					
•		· · · · · · · · · · · · · · · · · · ·			F.M.
g Fees and contracts from government agencies					· · · · · · · · · · · · · · · · · · ·
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	45.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property				nii 1,000 f n minn air bhiir 6 i minii 16 a a an an a an an a an an a an a a an a a an a a an a fu	
b Not debt-financed property					
6 Net rental income or (loss) from personal		- · ·			
• • •				:	
property					
8 Gain or (loss) from sales of assets other			1	· · · · · · · · · · · · · · · · · · ·	
than inventory					
O. Not in company (long) from appeal promts					
10 Gross profit or (loss) from sales of inventory		· · · · · · · · · · · · · · · · · · ·	+-+-		
11 Other revenue:					
a PAYMENT FOR THE					
b ASSUMPTION OF					
c OBLIGATIONS (SEE					
d STATEMENT 4)	-		01	370,000.	
			1 0 1	370,000.	
e		0	. 1931	370,045.	0
					370,045
(See worksheet in line 13 instructions to verify calculations.)		• •-	•		
RankXVIIB Relationship of Activities t	_			· · · · · · · · · · · · · · · · · · ·	
Line No. Explain below how each activity for which inco the foundation's exempt purposes (other than			-A contribute	d importantly to the accom	plishment of
					
			-		
T				·	
			-		
	-				

Form **990-PF** (2016)

623621 11-23-16

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023022 11-23-10

Form 990-PF (2016)

Phone no. (203)281-4933

HAMDEN. CT 06518

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

2016

Employer identification number Name of the organization 81-2297831 THE SMART FAMILY FUND Organization type (check one) Filers of: Section: Form 990 or 990-EZ ___ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 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 K 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) Name of organization

Employer identification number

91_2207021

THE S	MART FAMILY FUND		-229/831
Partil	Contributors (See instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THE SMART FAMILY FOUNDATION 133A NORTH AVENUE, # 432 NEW ROCHELLE, NY 10804	\$ <u>26,131,917.</u>	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	THE SMART FAMILY FOUNDATION 133A NORTH AVENUE, # 432 NEW ROCHELLE, NY 10804	\$53,485.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occupiete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$Schodule B /Form	Person Payroll Omnocash Omnocash If for noncash contributions.)

Employer identification number

THE SMART FAMILY FUND

81-2297831

	Noncash Property (See instructions). Use duplicate copies of F	art II if additional space is needed	
from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	PUBLICLY TRADED SECURITIES		
		\$ <u>26,131,917.</u>	12/23/16
(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
		\$	
No. from	(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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	3-16	Schadula B /Form 99	0, 990-EZ, or 990-PF) (2

Employer identification number

ART FAMILY FUND		81-2297831			
the year from any one contributor. Complete	rolumns (a) through (e) and the follow	WIND line entry. For organizations	1,000 f		
Use duplicate copies of Part III if addition	al space is needed.				
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is hel	d		
	(e) Transfer of gift	t	_		
Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is hel	d		
	(e) Transfer of gift	t			
Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	d		
	(e) Transfer of gift	t			
Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is hel	d		
(e) Transfer of gift					
	(e) Transfer of gif	t			
Transferee's name, address, a		Relationship of transferor to transferee			
	the year from any one contributor. Complete completing Part III, enter the total of exclusively religiou. Use duplicate copies of Part III if addition (b) Purpose of gift Transferee's name, address, a (b) Purpose of gift Transferee's name, address, a (b) Purpose of gift Transferee's name, address, a	Exclusively religious, charitable, etc., contributions to organizations described the year from any one contributor. Complete columns (a) through (e) and the follo complete part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or Use duplicate copies of Part III if additional space is needed. (b) Purpose of gift (c) Use of gift Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4	Exclusively Feligious charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$ the year from any one contributor. Complete columns (a) through (e) and the following line entity. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (fastr this advance) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		

SOURCE AMOUNT DIVIDENDS PER BOOKS MENT INCOME NET RUANE CUNNIFF 45. 0. 45. 45. TO PART I, LINE 4 45. 0. 45. 45. FORM 990-PF OTHER INCOME STATEM CA) REVENUE PER BOOKS NET INVEST- MENT INCOME ADJ PAYMENT FOR THE ASSUMPTION OF OBLIGATIONS (SEE STATEMENT 4) 370,000. 0. TOTAL TO FORM 990-PF, PART I, LINE 11 370,000. 0. FORM 990-PF LEGAL FEES STATEM (A) EXPENSES PER BOOKS MENT INCOME MENT INCOME CC) NET INCOME CHA LEGAL FEES 8,898. 0. TO FM 990-PF, PG 1, LN 16A 8,898. 0. FORM 990-PF OTHER EXPENSES STATEM (A) EXPENSES (B) NET INVEST- ADJUSTED CHA	PRM 990-PF	DIVIDENDS	AND INTER	EST FROM SE	CURITIES	ST	ATEMENT	1
TO PART I, LINE 4 45. 0. 45. 45. FORM 990-PF OTHER INCOME STATEM (A) (B) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C			GAINS	REVENUE	E NET II	WEST-		
FORM 990-PF OTHER INCOME STATEM (A) (B) (B) (C) PER BOOKS MENT INCOME NET PAYMENT FOR THE ASSUMPTION OF OBLIGATIONS (SEE STATEMENT 4) 370,000. 0. TOTAL TO FORM 990-PF, PART I, LINE 11 370,000. 0. FORM 990-PF LEGAL FEES STATEM (A) (B) (C) EXPENSES NET INVEST- ADJUSTED CHAPE BOOKS MENT INCOME PU LEGAL FEES 8,898. 0. TO FM 990-PF, PG 1, LN 16A 8,898. 0. FORM 990-PF OTHER EXPENSES STATEM (A) (B) (C) EXPENSES NET INVEST- ADJUSTED CHAPE BOOKS MENT INCOME PU DESCRIPTION BOOKS MENT INVEST- ADJUSTED CHAPE BOOKS MENT INCOME PU EXPENSES NET INVEST- ADJUSTED CHAPE BOOKS MENT INCOME PU FILING FEES 990. 0.	ANE CUNNIFF	45.		0.	45.	45.		
(A)	PART I, LINE 4 =	45.		0.	45.	45.		
REVENUE NET INVEST- ADJ DESCRIPTION	RM 990-PF		OTHER I	NCOME		ST.	ATEMENT	2
OBLIGATIONS (SEE STATEMENT 4) 370,000. 0. TOTAL TO FORM 990-PF, PART I, LINE 11 370,000. 0. FORM 990-PF LEGAL FEES STATEM (A) EXPENSES NET INVEST- ADJUSTED CHAPER BOOKS MENT INCOME NET INCOME PUBLICATION NET INCOME PUBLICATION LEGAL FEES 8,898. 0. TO FM 990-PF, PG 1, LN 16A 8,898. 0. FORM 990-PF OTHER EXPENSES STATEM (A) EXPENSES NET INVEST- ADJUSTED CHAPER BOOKS MENT INCOME PUBLICATION CD FILING FEES 990. 0.	SCRIPTION			REVENUE	NET INVE		(C) ADJUSTE: NET INCO	
FORM 990-PF LEGAL FEES (A) EXPENSES NET INVEST- ADJUSTED CHAPER BOOKS MENT INCOME PU LEGAL FEES 8,898. 0. TO FM 990-PF, PG 1, LN 16A 8,898. 0. FORM 990-PF OTHER EXPENSES STATEM (A) (B) (C) EXPENSES STATEM (A) EXPENSES DESCRIPTION PER BOOKS MENT INCOME PU FILING FEES 990. 0.	-			370,000	•	0.		
(A) (B) (C) EXPENSES NET INVEST- ADJUSTED CHA PER BOOKS MENT INCOME NET INCOME PU LEGAL FEES 8,898. 0. TO FM 990-PF, PG 1, LN 16A 8,898. 0. FORM 990-PF OTHER EXPENSES STATEM (A) (B) (C) EXPENSES NET INVEST- ADJUSTED CHA PER BOOKS MENT INCOME NET INCOME PU FILING FEES 990. 0.	TAL TO FORM 990-PF	, PART I, I	LINE 11	370,000	•	0.		
EXPENSES NET INVEST- ADJUSTED CHA PER BOOKS MENT INCOME NET INCOME PU LEGAL FEES 8,898. 0. TO FM 990-PF, PG 1, LN 16A 8,898. 0. FORM 990-PF OTHER EXPENSES STATEM (A) (B) (C) EXPENSES NET INVEST- ADJUSTED CHA PER BOOKS MENT INCOME NET INCOME PU FILING FEES 990. 0.	RM 990-PF		LEGAL	FEES		ST	ATEMENT	3
TO FM 990-PF, PG 1, LN 16A 8,898. 0. FORM 990-PF OTHER EXPENSES STATEM (A) (B) (C) EXPENSES NET INVEST- ADJUSTED CHA PER BOOKS MENT INCOME NET INCOME PU FILING FEES 990. 0.	SCRIPTION		EXPENSES	NET INVEST	- ADJUS	STED	(D) CHARITA PURPOS	
FORM 990-PF (A) (B) (C) EXPENSES NET INVEST- ADJUSTED CHA PER BOOKS MENT INCOME NET INCOME PU FILING FEES 990. 0.	GAL FEES		8,898.		0.	-	8,8	98.
(A) (B) (C) EXPENSES NET INVEST- ADJUSTED CHA PER BOOKS MENT INCOME NET INCOME PU FILING FEES 990. 0.	FM 990-PF, PG 1,	LN 16A	8,898.		0.		8,8	98.
EXPENSES NET INVEST- ADJUSTED CHA PER BOOKS MENT INCOME NET INCOME PU FILING FEES 990. 0.	RM 990-PF		OTHER E	XPENSES		ST	ATEMENT	4
	SCRIPTION		EXPENSES	NET INVEST	- ADJUS	STED	(D) CHARITAI PURPOSI	
								90.
TO FORM 990-PF, PG 1, LN 23 1,069. 0.	FORM 990-PF, PG 1	, LN 23	1,069.		0.		1,0	59.

STATEMENT 5 FOOTNOTES PAYMENT FROM THE SMART FAMILY FOUNDATION FOR THE ASSUMPTION OF CERTAIN EMPLOYMENT AND BENEFITS OBLIGATIONS 370,000.

FORM 990-PF OTHER DECREA	SES IN NET ASSETS	OR FUND BALANCES	STATEMENT	6
DESCRIPTION			AMOUNT	
FAIR MARKET VALUE IN EXCESS	12,325,746			
TOTAL TO FORM 990-PF, PART	III, LINE 5		12,325,74	6.
FORM 990-PF	STATEMENT	7		
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	1
CORPORATE STOCKS (STATEMENT	ATTACHED)	11,021,144.	23,260,48	9.
TOTAL TO FORM 990-PF, PART	II, LINE 10B	11,021,144.	23,260,48	9.
FORM 990-PF LIST	STATEMENT	8		

THE SMART FAMILY FOUNDATION, INC 1333A NORTH AVENUE NEW ROCHELLE, NY 10801-2120