

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990-PF

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

D	epartm	nent of the Treasury				rity numbers			•				<u> </u>	
<u>In</u>	temal	Revenue Service		and its separ					v/form990pf.	Оре	en to Public Inspec	_		
		lendar year 2016	or tax year	beginning		1	2/1	1,2016	, and end	ling			12/31,20	16
- 1	Vame	of foundation									A Employer ide	ntific		
	THE	DELLOAKES F	OITADNUO	N							81-4697451			
	Numbe	er and street (or P O	box number if ma	ail is not delivered	to street address) Room/suite			e	B Telephone number (see instructions)					
													,	
	FOU	NDATION SOUR	CE 501 S	ILVERSIDE	. RD				İ	ŀ	(800)	830	1-1754	
_		town, state or province							L	-	(000)	033	-1734	
	•	, ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	J							C If exemption application is			
	wтт∶	MINCHON DE	10000_127	7 7						i	pending, check h	here.	····· •	X
_		MINGTON, DE									-			
G	Cne	ck all that apply		l return	_	Initial return		tormer p	oublic cha	rity	D 1 Foreign organ	nızatıo	ns, check here 🕨	
				return	ļ	Amended re					2 Foreign orgai 85% test, che			
_				ess change		Name chan			_		computation			
H	Che	ck type of organi	zation X	Section 501							F If private found:	ation s	status was terminated	
1	<u> </u> _s	ection 4947(a)(1) r	nonexempt cha			her taxable p			tion				1)(A), check here	
I		market value o		1	_	nethod 🔀 0	Cash	Acc	rual	İ	F If the foundation	n is in	a 60-month termination	
	end	of year (from Pai	rt II, col (c), li	ıne 💹 O	ther (sp	ecify))(B), check here .	
	16)	▶ \$	10,000.	(Part I, c	olumn (d) must be on ca	ish ba	sis)	_	_				
G	art	Analysis of Rev			(a) R	evenue and					•		(d) Disbursemen	
		total of amounts in may not necessar	columns (b), ((c), and (d)		enses per	(b) Net inve		(0	Adjusted net		for charitable	
		column (a) (see in:		поинк ІП	·	books	1	incom	i c		ıncome		purposes (cash basis only	v)
_	1	Contributions, gifts, grant		ttach schedule)		10,000	1	,			• • • • • • • • • • • • • • • • • • • •	\top		··
	2	Chack I if the	e foundation is n	ot required to			 					+		
	3	Interest on savings a	ch Sch B				 					-		
	4	Dividends and inte					+					-+		
	_						 				-	-		
		Gross rents				 :	 			-		-		
۸.		Net rental income or (-		
ĭ		Net gain or (loss) from Gross sales price for a		not on line 10			-				,,	_	4	
Revenue		assets on line 6a		 -								_	**	
é	7	Capital gain net in	come (from Pa	rt IV, line 2) .			-		0.			_		-9
_	8	Net short-term cap	-			<u>-</u>	ļ							
	9	Income modification	ons											
	100	and allowances					<u> </u>				·			
		Less Cost of goods so					-							
	С	Gross profit or (los												
	11	Other income (atta												
	12	Total. Add lines 1	through 11	<i></i>		10,000	<u> </u>		0.		<u> </u>		•	
s	13	Compensation of office	cers, directors, tru	ustees, etc		0	<u> </u>							
Ses	14	Other employee sa	alaries and wag	<u>es</u>			1							
Ë	15	Pension plans, em	ployee benefits	7		_								
ă	16 a	Legariees (attach	sehedule)											
Щ	ģ	Accounting fees (a	attach schedule	۸۱										
<u>ĕ</u> .	d,	Cher professional	fees)(attach se	nedule)										
rat	17	Bterest PK 2	10	<i>13</i> 1										_
<u>इ</u>	18	Takes_(attach-sche	dule)"(SEE inch	ructions)										
를	19	Deprecation Detta	h schedule) a	indidepletion										
튱	20	Occupancy	, 1, 5, 7, 7						-			\dashv		
۲	21	Travel, conference	s and meeting	s			1					-		
Š	22	Printing and public	-				\vdash			-		+		
Operating and Administrative Expense	23	Other expenses (a					1 -					+		
Ë	23 24		•				\vdash					+		—
ra	24	Total operating ar		-		0	_[
Ž	2-	Add lines 13 throu	-				+					+		
J		Contributions, gifts				0	1					+		
_	26	Total expenses and dish		ines 24 and 25		<u> </u>	+					+		0
	27	Subtract line 26 fro				10 000							·	
		Excess of revenue over	-			10,000	-					-		
		Net investment in		•	. ,		1		0.			-		
	C	Adjusted net inco	me (if negative,	, enter -0-)		_	1						-	

	art II	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year		End o	f year
	artii	amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash - non-interest-bearing				
	2	Savings and temporary cash investments		10,0	00.	10,000.
	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule)				
		Less allowance for doubtful accounts ▶				
Assets	8	Inventories for sale or use		···		
SS	9	Prepaid expenses and deferred charges				
∢	10a	Investments - U S $$ and state government obligations (attach schedule), $$.				
	b	Investments - corporate stock (attach schedule)				
	4.4 C	Investments - corporate bonds (attach schedule)				
	11	Investments - land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)				
	12	Investments - mortgage loans				
	13 14	Investments - other (attach schedule)				
	'*	equipment basis	<u> </u>			
		Less accumulated depreciation (attach schedule)				
	15	Other assets (describe ▶)				
	16	Total assets (to be completed by all filers - see the		10.0		10.000
_		Instructions Also, see page 1, item I)	0.	10,0	000.	10,000
	17	Accounts payable and accrued expenses				
	18	Grants payable				
ies	19	Deferred revenue				
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons	i I			
Liabilities	21	Mortgages and other notes payable (attach schedule)				
_	22	Other liabilities (describe)				
		T			0	
_	23	Total liabilities (add lines 17 through 22)	0.		0.	
s		Foundations that follow SFAS 117, check here. >				
Š		and complete lines 24 through 26 and lines 30 and 31.				
alances	24	Unrestricted				
Ba	25	Temporarily restricted				
Þ	26	Permanently restricted	-			
Ē	26 27 28 29 30 31	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.				
9	27	Capital stock, trust principal, or current funds				
ets	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
SS	29	Retained earnings, accumulated income, endowment, or other funds		10,0	000.	
t A	30	Total net assets or fund balances (see instructions)	0.	10,0	000.	
Ž	31	Total liabilities and net assets/fund balances (see				
_		instructions)	0.	10,0	000.	
		Analysis of Changes in Net Assets or Fund Bala				
1		al net assets or fund balances at beginning of year - Part				
		-of-year figure reported on prior year's return)			1	0
2		er amount from Part I, line 27a			2	10,000
:	Oth	er increases not included in line 2 (itemize) ▶			3_	
4		I lines 1, 2, and 3			4	10,000
	De	creases not included in line 2 (itemize) ▶			5	
•	Tot	al net assets or fund balances at end of year (line 4 minu	s line 5) - Part II, column (b	o), line 30	6	10,000

Page 3

Pa		and Losses for Tax on Inv		(6) u		
	` ·	d describe the kind(s) of property sold (rick warehouse, or common stock, 200	. • .	(b) How acquired P - Purchase D - Donation		(d) Date sold (mo , day, yr)
1 a						
_b						
<u> </u>				<u> </u>		
d						
<u>e</u>		(5 Depresenting allowed	(g) Cost or other basis		(h) Cara as (la	>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
<u>a</u>						
<u>b</u>	1					
<u>c</u> d						
e e						-
		howing gain in column (h) and owned	by the foundation on 12/31/69		Corpo (Cal. (b) as	
(i	i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		Gains (Col. (h) ga (k), but not less to Losses (from col.	nan -0-) or
			• • • • • • • • • • • • • • • • • • • •			
<u>_a</u> b						
C				<u> </u>		
d			-	· · · · · · · · · · · · · · · · · · ·		
e						
		(If a	ain, also enter in Part I, line 7			, , , , , , , , , , , , , , , , , , ,
2	Capital gain net income	or (net canital loss)	oss), enter -0- in Part I, line 7	2		
3	Net short-term capital g	ain or (loss) as defined in sections	· · · · · · · · · · · · · · · · · · ·			,
		art I, line 8, column (c) (see ins				
	Part I, line 8			3		
Pai			duced Tax on Net Investment li	ncome		
Nas		the section 4942 tax on the distrib	outable amount of any year in the b			Yes No
4		not qualify under section 4940(e)	ar, see the instructions before make	22 221 22	triaa	
1	(a)			ng any en I	(d)	
Cal	Base period years	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra	
Call	endar year (or tax year beginning in) 2015				(cor (b) divided by	ωι (<i>c</i>))
	2013					
	2013					
	2012			<u>-</u>		
	2011					-
2	Total of line 1, column (d)		2		
3			de the total on line 2 by 5, or by the	 		
	_	•	ess than 5 years	3		
4	Enter the net value of ne	oncharitable-use assets for 2016 t	from Part X, line 5	4		
5	Multiply line 4 by line 3.			5		
6	Enter 1% of net investm	nent income (1% of Part I, line 27b)		6		
7	Add lines 5 and 6			7		
8			x in Part VI, line 1b, and complete		t using a 1% ta	x rate See th

Par	tVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948- see in	struc	tions)
1a	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)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0.
	here ▶ and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of ${\cal J}$			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	_		0.
6	Credits/Payments			
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			0.
7	Total credits and payments Add lines 6a through 6d			.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			0.
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			<u> </u>
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 t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
та	participate or intervene in any political campaign?	1a	103	X
_	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see		_	
D	Instructions for the definition)?	1b		Х
	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?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
_	(1) On the foundation ►\$(2) On foundation managers ►\$			
e	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		Х
	If "Yes," attach a detailed description of the activities			1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
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?	4b		ļ
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			l
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	<u> X</u>	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			ļ
	DE,		İ	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	8b	х	
	(or designate) of each state as required by General Instruction G ² If "No," attach explanation	80	\ \frac{\Lambda}{2}	+-
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"	9		X
	complete Part XIV	┌╸		†
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	10	Х	
	names and addresses . ATCH. 1	<u> </u>	0 DE	<u></u>

₽ar	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	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	1 1	1	
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X_
13	Did the foundation comply 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 ▶ FOUNDATION SOURCE Telephone no ▶ 800-839	-175	1	
	Located at ▶501 SILVERSIDE ROAD, SUITE 123 WILMINGTON, DE ZIP+4 ▶ 19809-1	377		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		. ▶	\Box
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, 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 foreign country ▶			
Par	t 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? Yes X No		ļ	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No		,	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		ľ	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	l l	ł	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		,	
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		Ì	
	foundation agreed to make a grant to or to employ the official for a period after		ľ	
	termination of government service, if terminating within 90 days)		İ	
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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2016?	1c		<u> X</u>
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))		ŀ	
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and		ľ	
	6e, Part XIII) for tax year(s) beginning before 2016?		1	
	If "Yes," list the years ,,			
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		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		ì	
	·		ľ	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		į	
	at any time during the year?		į	
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)	3b		
	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	-		v
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		<u> X</u>

ςPar	t VII-B	Statements Regarding Activities	for Which Form	1720 May Be Req	uired (continued)					
5a	During ti	he year did the foundation pay or incur any amo	unt to							
	(1) Carr	y on propaganda, or otherwise attempt to influe	ence legislation (section	4945(e))?	. Yes X No	,				
	(2) Influ	(2) Influence the outcome of any specific public election (see section 4955), or to carry on,								
	direc	ctly or indirectly, any voter registration drive?			. Yes X No	,				
		ride a grant to an individual for travel, study, or o				,				
	` '	nde a grant to an organization other than a	• •							
		ion 4945(d)(4)(A)? (see instructions)				,				
		ride for any purpose other than religious, ch								
		oses, or for the prevention of cruelty to children				,				
b	If any a	inswer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the ex	xceptions described in	1				
	Regulation	ons section 53 4945 or in a current notice regar	ding disaster assistand	ce (see instructions)?	· · · · · · · · · · · ·	5b				
	Organiza	ations relying on a current notice regarding disas	ster assistance check h	ere						
С	If the a	inswer is "Yes" to question 5a(4), does the	foundation claim ex	emption from the ta	ax	_				
_		it maintained expenditure responsibility for the		•		,				
		attach the statement required by Regulations sec								
6a		foundation, during the year, receive any fun		ctly, to pay premiun	ns					
		sonal benefit contract?				,				
b		oundation, during the year, pay premiums, dire				6b	X			
		to 6b, file Form 8870	<i>3</i> .	'						
7a		me during the tax year, was the foundation a pa	arty to a prohibited tax	shelter transaction?	Yes X No	,				
b		did the foundation receive any proceeds or have								
Pai	t VIII	Information About Officers, Director	rs, Trustees, Fou	ndation Managers	s, Highly Paid Emp	oloyees,				
_	l ist all d	<u>and Contractors</u> officers, directors, trustees, foundation n	nanagers and their	compensation (see	instructions)					
<u> </u>	LIST GIT C		(b) Title and average	(c) Compensation	(d) Contributions to	(e) Expen	se account.			
		(a) Name and address	hours per week devoted to position	(if not paid, enter -0-)	employee benefit plans and deferred compensation		lowances			
ATC	н 2			0.	0.		0.			
2	Comper "NONE."	sation of five highest-paid employees	(other than those	e included on line	e 1 - see instructi	ons). If n	one, enter			
(a)	Name and	address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation		se account, lowances			
	NONE									
		<u> </u>								
										
		<u> </u>								
<u>Tota</u>	l number	of other employees paid over \$50,000		<u></u>	<u></u>					
						Form 99	0-PF (2016)			

Form 990-PF (2016) Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE 0. Total number of others receiving over \$50,000 for professional services Part IX-A **Summary of Direct Charitable Activities** List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 NONE All other program-related investments See instructions 3 NONE

Form 990-PF (2016)

Page	8

Par	Minimum Investment Return (All domestic foundations must complete this part see instructions.)	Foreign foundation	S,
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	
b	Average of monthly cash balances,	1b	5,000.
С	Fair market value of all other assets (see instructions)	1c	
d	i Total (add lines 1a, b, and c)	1d	5,000.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	5,000.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount	, see	
	instructions)	4	75.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, I	ine 4 5	4,925.
6	Minimum investment return. Enter 5% of line 5	6	12.
Par	To the property of the proper	ng foundations	
1	Minimum investment return from Part X, line 6	1	12.
2a	Tax on investment income for 2016 from Part VI, line 5 2a		
b	Income tax for 2016 (This does not include the tax from Part VI).		
С		2c	
3	Distributable amount before adjustments Subtract line 2c from line 1		12.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	<u> </u>	12.
6	Deduction from distributable amount (see instructions)		
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part		
	line 1		12.
Par	rt XII Qualifying Distributions (see Instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	
b			····
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		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII,	line 4 4	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment in	come	
	Enter 1% of Part I, line 27b (see instructions)	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		0.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years w qualifies for the section 4940(e) reduction of tax in those years		ther the foundation

Form **990-PF** (2016)

Page **9**

Par	t XIII Undistributed Income (see instri	uctions)			
		(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
	Distributable amount for 2016 from Part XI,	· · ·			12.
	line 7	*		· · · · · · · · · · · · · · · · · · ·	12.
	Undistributed income, if any, as of the end of 2016				
	Enter amount for 2015 only				
	Total for pnor years 20_14_,20_13_,20_12_				
	Excess distributions carryover, if any, to 2016				
_	From 2011				
_	From 2012				
	From 2013				
	From 2014				
	From 2015				
	Total of lines 3a through e				
	Qualifying distributions for 2016 from Part XII,				
	line 4 🕨 \$				
	Applied to 2015, but not more than line 2a		· · · · · · · · · · · · · · · · · · ·		
	Applied to undistributed income of prior years				
	(Election required - see instructions)				
	Treated as distributions out of corpus (Election				
	required - see instructions)				
	Applied to 2016 distributable amount				
	Remaining amount distributed out of corpus				
3	(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:				
	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
	Prior years' undistributed income Subtract				•
ь	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
u	amount - see instructions				
е	Undistributed income for 2015 Subtract line				
	4a from line 2a Taxable amount - see instructions				
	Undistributed income for 2016 Subtract lines				
'	4d and 5 from line 1. This amount must be				
	distributed in 2017				12.
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be		,		
	required - see instructions)				
8	Excess distributions carryover from 2011 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2017.	_			
	Subtract lines 7 and 8 from line 6a	0.			-1
	Analysis of line 9				
	Excess from 2012				
	Excess from 2013				
	Excess from 2014				
	Excess from 2015				
е	Excess from 2016		<u> </u>	l	1

Рa	rt XIV Private Op	erating Foundations	(see instructions ar	nd Part VII-A, question	on 9)	NOT APPLICABLE
1 a	If the foundation has foundation, and the rulin	-		•	ting	
h	Check box to indicate	•	=		section 4942()(3) or 4942(j)(5)
-	Official Box to indicate	Tax year	is a private specialing	Prior 3 years		
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
	I or the minimum investment return from Part X for each year listed					
b	85% of line 2a					
	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	!				
е	Qualifying distributions made					
	directly for active conduct of exempt activities. Subtract line	1				
_	2d from line 2c				····	
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets				<u> </u>	
	(2) Value of assets qualifying under section					
	4942(j)(3)(B)(i)					"·
D	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X,					
	line 6 for each year listed			-		
С	"Support" alternative test - enter					
	 Total support other than gross investment income (interest, dividends, rents, payments on securities 					
	loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942					
	(j)(3)(B)(III)					
	organization					
	(4) Gross investment income.		2	amba if the farmed of		
Рa		luring the year - see		only if the foundar	uon nad \$5,000 o	r more in assets at
1	Information Regarding					
а	List any managers of before the close of an	the foundation who ly tax year (but only if th				
	BRUCE AIDE		400/	Cales and the of		
b	List any managers of	the foundation who rship or other entity) o				y large portion of the
	Ownership of a partile	ramp or other entry) o	which the roundation	nas a 10 % of greater	merest	
	N/A					
2	Information Regarding	ng Contribution, Grant	, Gift, Loan, Scholarsh	ip, etc., Programs:		
	unsolicited requests t		ation makes gifts, gra			and does not accept or organizations under
	The name, address, a	•		he person to whom ap	plications should be a	Idressed
10	The form in which app	dications should be su	bmitted and information	on and materials they	snoula include	
	Any submission dead	lines				
	Any restrictions or factors	limitations on awards	s, such as by geogra	aphical areas, charita	able fields, kinds of	institutions, or other

Part XV Supplementary Information (continued)

Page **11**

Recipient Name and address (home or business)	If recipient is an individual,	Foundation	Burnasa of areat or	
Necipient	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Name and address (nome or business)	or substantial contributor	recipient		
a Paid during the year				
			1	
				•
		1		
		ŀ		
			1	
	İ			
		!		
	1	1		
	1			
	i			
		1		
	1	1		
			!	
	1			
	1			
			1	1
	<u> </u>			
Total	<u></u>		<u></u> 3a	
b Approved for future payment		1		
- , , pp				
		Į.		
			1	
		1		
				İ
	· · ·			
		ì		

Page **12**

Part XVI-	A Analysis of Income-Prod	ucing Act	ivities			
	amounts unless otherwise indicated	Unrela (a)	ated business income (b)	Excluded by	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program	service revenue	Business code	Amount	Exclusion code		(See instructions)
a						
b						
c						
d						
e						
f						
g Feesa	and contracts from government agencies					
2 Members	ship dues and assessments			1		
3 Interest or	n savings and temporary cash investments .			 		
	s and interest from securities					
	al income or (loss) from real estate			 		
	financed property					
	ebt-financed property			 		
	income or (loss) from personal property.			 		
	vestment income			1		
•	oss) from sales of assets other than inventory					
	me or (loss) from special events · · · · ofit or (loss) from sales of inventory					
	venue a	-				
е		,				
12 Subtotal	Add columns (b), (d), and (e)					
13 Total. Ad	ld line 12, columns (b), (d), and (e)				13	
	eet in line 13 instructions to verify calc					
Part XVI-	B Relationship of Activitie	s to the A	ccomplishment of E	xempt Pur	poses	
▼	Explain below how each activit accomplishment of the foundation	•	-		•	· · · · · · · · · · · · · · · · · · ·
						-
-					-	
. .						
		-				
						
				<u> </u>		
	-					
					· · · · · · · · · · · · · · · · · · ·	

THE DELLOAKES FOUNDATION

orm 990-PF (2			JOAKES FOU			81-469			<u>je 13</u>
Part XVII	Information R Exempt Orga	egarding Tra	ansfers To	and Transac	tions an	d Relationships With Non	charit	able)
1 Did the	e organization direct	tly or indirectly	engage in ar	ny of the followi	ng with ar	ny other organization described		Yes	No
	tion 501(c) of the Co zations?	ode (other than	section 501(c)(3) organizatio	ons) or in s	section 527, relating to political			
-	ers from the reportir	ng foundation to	a noncharita	able exempt orga	anization of	•			
(1) Cas	sh						1a(1)		Х
` '							1a(2)		X
	transactions								v
								\rightarrow	- <u>X</u>
								$\neg \neg$	- <u>x</u>
							1 1		Х
									Х
(6) Pe	rformance of service	es or membersl	hip or fundrai	sing solicitations			1b(6)		Х
									Х
						Column (b) should always show			
						If the foundation received less of the goods, other assets, or s			
(a) Line no	(b) Amount involved			empt organization		scription of transfers, transactions, and sha			
'	N/A				N/A				
							,		
				-					
					_				
					ļ				
		 							
		 			 				
		 	·· – – – ··		 				
	·								
		 			-				
					-				
descri) of the Code (o				re tax-exempt organizations n 527?	Ye	s X	No
	(a) Name of organization	on	(b) ¹	Type of organization		(c) Description of relation	ship		
		$\overline{}$		-					
Unde	r penalties of penury, decl	are that have exam	med this return in	ncluding accompanying	schedules and	statements, and to the best of my knowled	ge and be	elief it	ıs true
Sign	grand Europiete Degraration	il bredaler (olimana)	axpayer) is based o		Doc.		S discuss	this	roturn
Here	nature of officer profrustee	/	Date	112/17	Title		reparer s		below
	Deut/Tune		De	nian atura	<u>-</u> .	TD-1-	DTIA!		
Paid	Print/Type preparer's na JEFFREY D HAS		Preparer's	-		Cileck I	PTIN DO134	1577	۸
Preparer		OUNDATION S		Y D HASKELI		04/07/2017 self-employed Firm's FIN ▶ 5103	P0134 98347		<u> </u>

800-839-1754 Form **990-PF** (2016)

Firm's EIN ► 510398347

Phone no

11042

Firm's name

▶ FOUNDATION SOURCE

LAKE SUCCESS, NY

Use Only Firm's address ▶ ONE HOLLOW LN, STE 212

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

THE DELLOAKES FOUN	DATION	81-4697451			
Organization type (check o	ine)				
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				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a pr	rivate foundation			
	501(c)(3) taxable private foundation				
	is covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General	Rule and a Special Rule See			
General Rule					
	ion filing Form 990, 990-EZ, or 990-PF that received, during the yey or property) from any one contributor. Complete Parts I and II al contributions	-			
Special Rules					
regulations unde 13, 16a, or 16b,	ion described in section 501(c)(3) filing Form 990 or 990-EZ that is rections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule and that received from any one contributor, during the year, total 6 of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990.	A (Form 990 or 990-EZ), Part II, line contributions of the greater of (1)			
contributor, durir	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				
contributor, during contributions total during the year for General Rule ap	tion described in section 501(c)(7), (8), or (10) filing Form 990 or sing the year, contributions exclusively for religious, charitable, etc., alled more than \$1,000. If this box is checked, enter here the total for an exclusively religious, charitable, etc., purpose. Don't complete plies to this organization because it received nonexclusively religious or more during the year	purposes, but no such contributions that were received te any of the parts unless the us, charitable, etc., contributions			
990-EZ, or 990-PF), but it i	hat isn't covered by the General Rule and/or the Special Rules do must answer "No" on Part IV, line 2, of its Form 990, or check the 2, to certify that it doesn't meet the filing requirements of Schedule	box on line H of its Form 990-EZ or on its			

Employer identification number 81-4697451

Part I	Contributors (See instructions) Use duplicate cop	pies of Part I if additional space is n	eeded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	P.O. BOX 2332 HEALDSBURG, CA 95448	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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)

Name of organization THE DELLOAKES FOUNDATION

Employer identification number 81-4697451

Part II	Noncash Property	(See instructions)	. Use duplicate copies	of Part II if additiona	I space is needed
		, (

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
		,	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

Employer identification number

81-4697451

Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc.,							
	contributions of \$1,000 or less for the y Use duplicate copies of Part III if addition			ee instructions) ►\$				
(a) No. from Part I	(b) Purpose of gift	(c) Use o		(d) Description of how gift is held				
		(e) Transfe	of gift					
	Transferee's name, address, and	ZIP + 4	Relation	nship of transferor to transferee				
(a) No.								
from Part I	(b) Purpose of gift	(c) Use o	f 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) U		f gift	(d) Description of how gift is held				
	(e) Transfer of gift							
	Transferee's name, address, and	ZIP + 4	Relation	nship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use o	f gift	(d) Description of how gift is held				
	(e) Transfer of gift							
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee					
								

81-4697451

ATTACHMENT 1

THE DELLOAKES FOUNDATION

NAME AND ADDRESS

95448 AIDELLS, BRUCE P.O. BOX 2332 HEALDSBURG, CA

95448 OAKES, NANCY P.O. BOX 2332 HEALDSBURG, CA

81-4697451		e J	·	
81-	ATTACHMENT 2	EXPENSE ACCT AND OTHER ALLOWANCES		
	ATTACH	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS		0.
		COMPENSATION	.0	0
2016 FORM 990-PF	ERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRES / DIR / SEC / TREAS 1.00	GRAND TOTALS
THE DELLOAKES FOUNDATION	FORM 990PE, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	NAME AND ADDRESS	BRUCE AIDELLS FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	