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

2016

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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Open to Public Inspection

]	For cal	enda	r year 2016 or ta	ax year beginning	, 2016	, and ending		<u> </u>	
-	THE	JAM	ES & BARBAI	RA CIMINO FO	UNDATION,		Α	Employer identification nur 82-0474867	nber
	INC. PO B	XC	363328				В	Telephone number (see inst 787-781-2070	ructions)
_	SAN	JUA	N, PR 0093	6 			С	If exemption application is	pending, check here
•	G Che	ck a	that apply	Initial return Final return	Initial return of a form	ner public charity	D	1 Foreign organizations, chec	ck here
-	.			Address change	Name change			2 Foreign organizations meet here and attach computation	
]	H Che		pe of organization discrete ction 4947(a)(1)	nonexempt charitable		orivate foundation	E	If private foundation status	
			t value of all assets II, column (c), line 1		counting method XC Other (specify)	ash Accrual	F	under section 507(b)(1)(A) If the foundation is in a 60	
Q f	► \$ Part I	TA	12,284 nalysis of Re		l, column (d) must be of			under section 507(b)(1)(B)	, check here
2000 NO.	raiti	E: cc sa	xpenses (The plumns (b), (c), a	total of amounts in and (d) may not neces nounts in column (a)	(a) Revenue and expenses per books	(b) Net investmen income	nt	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
		1		s, etc., received (attach schedule)	34,260.				
J I		2	Check ► X If the fou	indation is not required to attach Sch	В				
2 A S		3	Interest on savings and te	emporary cash investments	24,052.	24,05	2	}	
\		4	Dividends and interest fro	om securities	326,410.	326,41			
N			Gross rents		13,800.	13,80			
્રે		١ ـ	Net rental income or (loss)	4,657.					
	R E		Net gain or (loss) from sa Gross sales price for					 	<u> </u>
ĵ	V	7	assets on line 6a	ome (from Part IV, line 2)	 		0.	 	
	E N	8	Net short-term capital	•			<u>u.</u>	<u> </u>	·
	Ü	9	Income modification	s					
	Ε	10 a	Gross sales less returns and						
		l t	allowances Less Cost of		 				
		_	goods sold Gross profit or (loss) (atta	ach schadula)	 				
	;		Other income (attack						
			S	ee Statement 1	-7,341.	-6,50	7.	ļ	
_		_	Total Add lines 1		391,181.	357,75		0.	
	,	13		icers, directors, trustees, etc.	0.				
		14 15	Other employee sala Pension plans, empl			<u> </u>		L	
			Legal fees (attach so		 	· · · · · · · · · · · · · · · · · · ·	_	RECEI	VED
	A D M	b	Accounting fees (atta	ach sch) See St 2	15,270.	15,27	0.	_ 4	70
	i N	C	Other professional fees (a	attach sch) See St 3	6,000.	6,00		181 1110	2022
	PS	17	Interest	Caa Ctm A	4,864.	4,86		MAY 8 &	2017 by
	O I S T R A T	18	Taxes (attach schedule)(sc		9,290.	9,29	0.		N N N N N N N N N N N N N N N N N N N
	ii	19 20	Depreciation (attach schedule) and deple Occupancy		10,000.	10,00	0.		I, UT
	N V G E	21	Travel, conferences,	and meetings	1,259.	1,25	9.	 	
	A E N X D P	22	Printing and publicat				_		
	Ď P	23	Other expenses (atta		42 205	40.00	_		-
	Ň	24	Total operating and	see Statement 5	42,285.	42,28	<u>5.</u>		
	Ě	24	expenses Add lines	13 through 23	88,968.	88,96	8.		
		25	Contributions, gifts, grants	s paid Stmt 6	5,557,765.		_		5,557,765.
		26	Total expenses and Add lines 24 and 25		5,646,733.	88,96	8.	0.	5,557,765.
		27	Subtract line 26 from Excess of revenue of						<u>- — , </u>
		•	and disbursements		-5,255,552.				
		l b	Net investment inco	ome (if negative, enter -0-)		268,78	7.		
		c	Adjusted net incom	e (if negative, enter -0-)	L			$\overline{0}$.	

Form 990-PF (2016) THE JAMES & BARBARA CIMINO FOUNDATION 82-0474867 Page 2 Attached schedules and amounts in the description column should be for end of-year amounts only (See instructions) Beginning of year End of year Part II Balance Sheets (a) Book Value (b) Book Value (c) Fair Market Value Cash - non-interest-bearing Savings and temporary cash investments 421,189 225,708 225,708. Accounts receivable Less allowance for doubtful accounts Pledges receivable Less allowance for doubtful accounts ▶ Grants receivable Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach sch) ASSETS Less allowance for doubtful accounts Inventories for sale or use Prepaid expenses and deferred charges **10 a** Investments — U S and state government obligations (attach schedule) **b** Investments — corporate stock (attach schedule) c Investments — corporate bonds (attach schedule) Investments - land, buildings, and equipment basis. 700,000. Less accumulated depreciation (attach schedule) See Stmt 7 (attach schedule) 30,000 2,550,000 670,000 670,000. 12 Investments - mortgage loans 13 Investments - other (attach schedule) 11,389,227. 11,307,471 11,389,227 14 Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) Other assets (describe 15 Total assets (to be completed by all filers see the instructions Also, see page 1, item I) 14,278,660 12,284,935 12,284,935 Accounts payable and accrued expenses 18 Grants payable Deferred revenue 19 Loans from officers, directors, trustees, & other disqualified persons Mortgages and other notes payable (attach schedule) Other liabilities (describe ► Ε s Total liabilities (add lines 17 through 22) 0 0. Foundations that follow SFAS 117, check here **►**|X| and complete lines 24 through 26 and lines 30 and 31. N E T F Unrestricted 14,278,660. 12,284,935 Ù 25 Temporarily restricted Ň Permanently restricted D ASSETS Foundations that do not follow SFAS 117, check here В and complete lines 27 through 31. Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Ē 30 Total net assets or fund balances (see instructions) 14,278,660 12, 284, 935 Total liabilities and net assets/fund balances (see instructions) 14,278,660 12,284,935 Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 14,278,660 Enter amount from Part I, line 27a 2 -5,255,552. Other increases not included in line 2 (itemize) 3 3 3,261,827 See Statement 8 Add lines 1, 2, and 3 4 12,284,935 Decreases not included in line 2 (itemize) 5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

6

	beginning in)		Horichantable-use assets	'	(cor (b) divided by cor (c))
	2015	601,710.	13,953,518.		0.043122
	2014	251,899.	14,501,904.		0.017370
	2013	195,007.	4,794,945.		0.040669
	2012	270,106.	734,289.		0.367847
	2011	124,475.	853,701.		0.145806
2	Total of line 1, column (d)			2	0.614814
3	Average distribution ratio for the 5 number of years the foundation has	5-year base period — divide the t as been in existence if less than	otal on line 2 by 5, or by the 5 years	3	0.122963
4	Enter the net value of noncharitab	ole-use assets for 2016 from Par	t X, line 5	4	10,552,829.
5	Multiply line 4 by line 3			5	1,297,608.
6	Enter 1% of net investment incom	ne (1% of Part I, line 27b)		6	2,688.
7	Add lines 5 and 6			7	1,300,296.
8	Enter qualifying distributions from	Part XII, line 4		8	5,557,765.
	If line 8 is equal to or greater than lii Part VI instructions	ne 7, check the box in Part VI, fine	1b, and complete that part using a 1%	tax ra	ate See the

Form 990-PF (2016)

Form 990-PF (2016) THE JAMES & BARBARA CIMINO FOUNDATION,		-0474867		P	age 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	1948 – se	e instruction	<u>s)</u>		
1 a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1	٦				
Date of ruling or determination letter. (attach copy of letter if necessary – see instructions)		1 _ 1		_	
b Domestic foundations that meet the section 4940(e) requirements in Part V,		1		2,6	<u> 588.</u>
check here X and enter 1% of Part I, line 27b		ł			1
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)	ل	\			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable		1 1			
foundations only Others enter -0-)		2			<u>0.</u>
3 Add lines 1 and 2		3		2,6	588.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others en	nter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5		2,6	588.
6 Credits/Payments		1 1			
a 2016 estimated tax pmts and 2015 overpayment credited to 2016	4,422.	<u>.</u>			
b Exempt foreign organizations — tax withheld at source 6b		<u> </u>			
c Tax paid with application for extension of time to file (Form 8868)		_			i
d Backup withholding erroneously withheld		<u> </u>			
7 Total credits and payments Add lines 6a through 6d		7		4,4	122.
8 Enter any penalty for underpayment of estimated tax. Check here I 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			0.
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	ı	10		1,7	734.
11 Enter the amount of line 10 to be Credited to 2017 estimated tax 1,734. Refunded	d '	11			0.
Part VII-A Statements Regarding Activities					
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation participate or intervene in any political campaign?	or did it		1 a	Yes	No X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?			1 b		Х
If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials pui	blished		10		
or distributed by the foundation in connection with the activities				—	
c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			1 c		X
(1) On the foundation \Rightarrow \$ 0. (2) On foundation managers. \Rightarrow \$		0.			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impose	ed on			ı	1
foundation managers •\$ 0.					!
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, artic	cles				L,
of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the c	hanges		3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4 a		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?			4 b	N	/A
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					
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			1		
 By language in the governing instrument, or 			1		
 By state legislation that effectively amends the governing instrument so that no mandatory directions that with the state law remain in the governing instrument? 	t conflict		6	<u>X</u>	
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	$\frac{\hat{x}}{X}$	
8a Enter the states to which the foundation reports or with which it is registered (see instructions)	•		- 		
ID	.				
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 <i>General Instruction G? If 'No,' attach explanation</i>			8 b	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4	942(1)(3) (or 4942(ı)(5)			
for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Ye	s,' comple	ete Part XIV	9		X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing the and addresses	ir names		10		 X
BAA		Fo	rm 99 (-PF (2	

	TYVII-A: Statements Regarding Activities (continued)	82-	04/486			age 5
			 -		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	163	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified per advisory privileges? If 'Yes,' attach statement (see instructions)	rson had		12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address N/A	on applica	tion?	13	X	
14	The books are in care of ► MR. ROBERT A. CIMINO Telephon	ne no 🕨	787-78		070	
• •	Located at PO BOX 363328 SAN JUAN PR ZIP + 4			21 2	<u> </u>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here		<u> </u>	N/Ā		- LT -
13	and enter the amount of tax-exempt interest received or accrued during the year		15			N/A
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority bank, securities, or other financial account in a foreign country?	over a		16	Yes	No 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.			1	Yes	No
1 a	During the year did the foundation (either directly or indirectly)				9	[1]
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No	1,2		
	(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	XNo	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No	3.5. W		200
	(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)?	Yes	XNo			
	(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)	Yes	X No			
t	If any answer is 'Yes' to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions	ın s)?	_	1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here	•				
Ċ	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?	5,		1 c		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 before 2016?	Yes	XNo			
	If 'Yes,' list the years ► 20 , 20 , 20 , 20	_	_		3	
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 494 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942 all years listed, answer 'No' and attach statement — see instructions)	2(a)(2) 2(a)(2) to		2 b	N	/A
c	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years 20 , 20 , 20 , 20	here				
3 <i>a</i>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No			
t	olf '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 approvable 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 red		3 b	N	/A
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4 a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?			4 b		X
BAA			Fo	rm 99	0-PF ((2016)

Form 990-PF (2016) THE JAMES & BARBA			82-04	74867 Page
Part VII-B Statements Regarding Activit		1 4720 May Be Req	uired (continued)	2 - Family comes at annual
5a During the year did the foundation pay or inci	•	- (a-at-a- 404E(a))2	□v _{ee} ⊍	
(1) Carry on propaganda, or otherwise attem(2) Influence the outcome of any specific put	olic election (see section	, , , , , ,	∐ Yes [X]	No
on, directly or indirectly, any voter registr	ation drive?			No
(3) Provide a grant to an individual for travel		•	Yes	No
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instruction	s)		Yes X	No
(5) Provide for any purpose other than religion educational purposes, or for the prevention	on of cruelty to children	or animals?	Yes X	No
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53 4945 or in (see instructions)?	f the transactions fail to n a current notice regard	qualify under the exce ding disaster assistance	ptions e	5 b N/A
Organizations relying on a current notice rega	arding disaster assistand	ce check here	► []	
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respor	sibility for the grant?	,	N/A Yes	No
If 'Yes,' attach the statement required by Reg		• •		
6 a Did the foundation, during the year, receive a on a personal benefit contract?			Yes [X]	No S
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	niums, directly or indirec	tly, on a personal bene	fit contract?	6b X
7a At any time during the tax year, was the foun	dation a party to a proh	ubited tax shelter transa	action? Yes X	No
b If 'Yes,' did the foundation receive any proces			transaction? N	I/A 7b
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manage	gers, Highly Paid E	mployees,
and Contractors				
1 List all officers, directors, trustees, foundation	(b) Title, and average			
(a) Name and address	hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ROBERT A. CIMINO	DIRECTOR/PRE	0.	0.	0
PO BOX 363328	0		,	
SAN JUAN, PR 00936 DAVID CIMINO	Director	0.	0.	0
PO BOX 363328	0	0.	0.	0
SAN JUAN, PR 00936			,	
JAMES A. CIMINO	Director	0.	0.	0
PO BOX 420	0		'	
SUN VALLEY, ID 83353				
			,	
	<u> </u>	<u></u>		<u></u>
2 Compensation of five highest-paid employees (o		on line 1 – see instructio		<u>'</u>
(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	(e) Expense account, other allowances
None				
	į	;		
	 	 		
	 			
				<u> </u>
	<u></u>	<u> </u>	<u></u>	<u> </u>
Total number of other employees paid over \$50,00	TEE 003061 15	20606		Form 990-PF (2016)

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

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Enter 1% of Part I, line 27b (see instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

BAA

Form 990-PF (2016)

2,688

555,077

5

6

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				524,953.
2 Undistributed income, if any, as of the end of 2016				324, 933.
a Enter amount for 2015 only			0.	
b Total for prior years 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2016				-
a From 2011				1
b From 2012 26, 755.				1
c From 2013				
d From 2014				ı
e From 2015				
f Total of lines 3a through e	26,755.			
4 Qualifying distributions for 2016 from Part				
XII, line 4 \ \ \ 5,557,765.				1
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus				
(Election required – see instructions)	0.			
d Applied to 2016 distributable amount	5 000 010			524,953.
e Remaining amount distributed out of corpus	5,032,812.			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the	0.			0.
same amount must be shown in column (a))				
				1
6 Enter the net total of each column as indicated below:				İ
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	5,059,567.			1
b Prior years' undistributed income Subtract	0,000,000.0			
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed				
income for which a notice of deficiency has been issued, or on which the section 4942(a)				
tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2015 Subtract line 4a from				
line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2016 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2017.				^
7 Amounts treated as distributions out of				0.
corpus to satisfy requirements imposed by				1
section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)	0.			
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions)	0.			·
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	E 050 567			
10 Analysis of line 9	5,059,567.			
a Excess from 2012 26,755.				
b Excess from 2013	1			
c Excess from 2014				İ
d Excess from 2015	1			•
e Excess from 2016 5, 032, 812.	1			
0,002,022.				Form 990 PF (2016)

Private Operating Foundat		FOUNDATION,	EVILA guestion	82-0474867	<u>~_</u>
1 a If the foundation has received a ruling or dete	rmination letter that				N/A
is effective for 2016, enter the date of the	ruling				
b Check box to indicate whether the foundate		erating foundation d		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for	Tax year (a) 2016	(b) 2015	Prior 3 years (c) 2014	(d) 2013	(e) Total
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					
 Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i) b 'Endowment' alternative test — enter 2/3 of	_				
minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter					
 Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties). 			;		
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income		<u> </u>			
Supplementary Information assets at any time during the	(Complete this	part only if the	foundation had	\$5,000 or more	in
1 Information Regarding Foundation Management					
a List any managers of the foundation who have close of any tax year (but only if they have	e contributed more t	han 2% of the total co than \$5,000) (See	ontributions received section 507(d)(2))	by the foundation befo	ore the
ROBERT A. CIMINO					
b List any managers of the foundation who own	10% or more of the	stock of a corporation	on (or an equally large	portion of the owner	ship of
a partnership or other entity) of which the None	foundation has a 1	0% or greater inter	est		
2 Information Regarding Contribution, Grant, (Gift Loan Scholars	hin etc Programs			
Check here ► ☐ If the foundation only marequests for funds. If the foundation makes gi	akes contributions to	preselected charitab	-		
a The name, address, and telephone number o	r e-mail address of t	he person to whom a	pplications should be	addressed	
		•			
<u>See Statement 9</u> b The form in which applications should be	cubmitted and info	rmation and materia	als they should inclu	<u></u>	
The form in which applications should be	submitted and imo	imation and materia	als they should inclu	ue	
See Statement for Line 2a					
• • • • • • • • • • • • • • • • • • •					
See Statement for Line 2a d Any restrictions or limitations on awards,	such as by geograp	phical areas, charita	able fields, kinds of i	nstitutions, or other	factors
See Statement for Line 2a					
				_	000 DE (001C)

Recipient show any relationship of solution introduction show any relationship of solution introduction show any relationship of solutionship	Grants and Contributions Paid During the	If recipient is an industrial	T		
Faid during the year GER STATCHENT 6 Total		show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Total		or substantial contributor	recipient		
Total > 3a	Paid during the year				
	GEE STATEMENT 6				
	Total			► 3a	
			T	3 6	
	· · · · · · · · · · · · · · · · · · ·				
			1		
				•	

	t XVI-A Analysis of Income-Producing					
Ente	r gross amounts unless otherwise indicated	Unrelate	d business income	Excluded by	section 512, 513, or 514	(e)
1	Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions)
-	•	<u> </u>		code		
_	<u> </u>					
t						
C				-		
C						
e	·		- <u> </u>			
f					<u>-</u>	
ç	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments				24,052.	
4	Dividends and interest from securities				326,410.	
5	Net rental income or (loss) from real estate			7 - 7		
а	Debt-financed property					
b	Not debt-financed property			15	-4,657.	
6	Net rental income or (loss) from personal property			1		
7	Other investment income			1	-7,341.	
8	Gain or (loss) from sales of assets other than inventory			- 	- ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
9	Net income or (loss) from special events.	 		 		
10	Gross profit or (loss) from sales of inventory	 		-1 - 1 -		
11	Other revenue			++		
a				1		
b		 				
-		 				
d		1		++		
e		++		 		
-	Subtotal Add columns (b) (d) and (e)	1			220 464	
12	Subtotal Add columns (b), (d), and (e) Total Add line 12 columns (b), (d) and (e)			1	338,464.	220 464
12 13	Total. Add line 12, columns (b), (d), and (e)	ions)		<u> </u>	338,464. 13	338,464.
12 13 (See	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate		shment of Even	nt Purpose	13	338,464.
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	
12 13 (See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculat t XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompli			13 95	

Form 990-PF (2016) THE JAMES & BARBARA CIMINO FOUNDATION, 82-0474867 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		Exempt Organ	inzauons							 -	
d	escribe	organization directed in section 501(to political organi	c) of the Code (engage in any c (other than section	of the following wi on 501(c)(3) orga	th any otl nizations)	her organization section s	on 527,		Yes	No
a Ti	ransfe	rs from the report	ing foundation f	to a noncharitabl	le exempt organiz	ation of			ļ		
(1) Cas	h							1 a (1)		X
(2	2) Oth	er assets							1 a (2)		Х
b O	ther tr	ansactions									
(1) Sale	es of assets to a r	noncharitable ex	xempt organizati	on				1 b (1)		_X_
•	•	chases of assets t			ganization				1 b (2)		Х
,-	-,	ital of facilities, ed	• •	ner assets					1 b (3)		X
•	•	mbursement arran	•						1 b (4)		_X_
•	•	ns or loan guaran							1 b (5)		X
•	•	formance of service		•	•				1 b (6)		X
c S	haring	of facilities, equip	pment, mailing	lists, other asset	ts, or paid employ	ees			1 c		X
d If th	the ar	nswer to any of th ls, other assets, or nsaction or sharing	e above is 'Yes services given b	s,' complete the f by the reporting for	following schedule undation If the four	e Column	(b) should alw ceived less than	vays show the	e fair market val alue in	ue of	
(a) Line		(b) Amount involved		e of noncharitable exe		,			ns, and sharing arrai	nement	<u> </u>
N/A	-	(a) ranount involved	(6)	- I I I I I I I I I I I I I I I I I I I	ompt organization	— (<u>u</u>)	Description of truit	iororo, transaction	io, and onlaring arrai	gomen	
11/ 11	_					 					
						}					
	$\neg o$					<u> </u>					
	$\neg \top$										
											-
		undation directly or ed in section 501(o complete the follo			d to, one or more to on 501(c)(3)) or in	ax-exempt section	organizations 527?		Yes	X	No
	(a	Name of organiz	ation	(b) Typ	oe of organization		(c) Description	of relationship		
N/A				<u> </u>							
	_										
				<u> </u>							
	,						_				
	Under p	penalties of perjury, I de and complete Declara	clare that I have exa tion of preparer (other	amined this return, incl er than taxpayer) is ba	luding accompanying so ised on all information o	hedules and of which prep	statements, and to parer has any know	the best of my kr ledge	nowledge and belief,	t is true,	
Sign	}	A			-1-1	-			May the this retur	RS disci	uss
Here	~				1/8/18	7- ▶ _D	IRECTOR/P	RESIDENT	preparer	shown b	elow
	Signa	ature of officer or trustee			Date	Titl			(see inst	Yes	No
	 -	Print/Type preparer's	name	Preparer	gnatud //	/_	Date /	Check	ıf PTIN		
Paid		G.L. Bill	Miller	L. Bill	BIJAL METE	r	3/4/17	self-employ	'	774	
Prepa	rer	Firm's name		allas Baile					27-3353485	2	
Use O		Firm's address		dows Rd, Su					-, 3333463		
U36 C	, iii y	5 4251555	Lake Oswe					Phone no	<u>(</u> 503) 239-	Udaa	
BAA			Dane Obwe	2907 OIL 270				1:	Form 99		
									-01111 99	U-FF (2010)

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Federal Statements THE JAMES & BARBARA CIMINO FOUNDATION, INC.

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Statement 1 Form 990-PF,		Line	11
Other Income	•		

		(a) Revenue <u>per Books</u>	(b) Net Investment <u>Income</u>	(c) Adjusted <u>Net Income</u>
Other Investment Income	Total	\$ -7,341. \$ -7,341.	\$ -6,507. \$ -6,507.	\$ 0.

Statement 2 Form 990-PF, Part I, Line 16b Accounting Fees

	(a)	(b) Net	(c)	(d)
	Expenses <u>per Books</u>	Investment Income	Adjusted <u>Net Income</u>	Charitable Purposes
			NCC INCOME	<u> </u>
ACCOUNTING AND LEGAL FEES	Total $\frac{$}{$}$ 15,270.	\$ 15,270. \$ 15,270.	\$ 0.	\$ 0.

Statement 3 Form 990-PF, Part I, Line 16c Other Professional Fees

		(a) Expenses per Books	(b) Net Investment <u>Income</u>	(c) Adjusted <u>Net Income</u>	(d) Charitable <u>Purposes</u>
SECRETARIAL	Total	\$ 6,000. \$ 6,000.	\$ 6,000. \$ 6,000.	\$ 0.	\$ 0.

Statement 4 Form 990-PF, Part I, Line 18 Taxes

	(a)	(b) Net	(c)	(d)
	Expenses	Investment	Adjusted	Charitable
	per Books	<u>Income</u>	<u>Net Income</u>	Purposes
FOREIGN TAXES PAID - MS 6200 FOREIGN TAXES PAID - RJ - L915 REAL PROPERTY TAXES	\$ 4,844. 1,824. 2,622. \$ 9,290.	\$ 4,844. 1,824. 2,622. \$ 9,290.	\$ 0.	<u>\$0.</u>

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Federal Statements THE JAMES & BARBARA CIMINO FOUNDATION, INC.

Page 2

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Statement 5	
Form 990-PF, Pa	art I, Line 23
Other Expenses	

		(a) xpenses r Books	Inve	o) Net estment <u>Income</u>	(c) Adjusted Net Income	(d) Charitable <u>Purposes</u>
CPI CAPITAL PTRS	\$	641.	\$	641.		
INSURANCE		4,625.		4,625.		
LAND RENTAL EXPENSES		6,691.		6,691.		
MORGAN STANLEY BROKER FEES		5,790.		5,790.		
OFFICE EXPENSES		5,181.		5,181.		
PAT WEAVER SUPPLIES		200.		200.		
RAYMOND JAMES BROKER FEES		10,700.		10,700.		
Rental Expenses		8,457.		8,457.		
-	Total \$	42,285.	\$	42,285.	\$ 0.	\$ 0.

Statement 6 Form 990-PF, Part I, Line 25 **Contributions, Gifts, and Grants**

Cach	Cranto	and	Allocations
casn	Grants	and	ATTOCALTORS

Class of Activity:	EDUCATIONAL
Donee's Name:	BOISE STATE UNIVERSITY
Relationship of Donee:	NONE
Organizational Status of Donee:	501(C)(3)
Amount Given:	, , , ,

15,000.

Class of Activity: Donee's Name: Relationship of Donee: Organizational Status of Donee: Amount Given:	CHARITABLE CENTRO PARA PUERTO RICO NONE 501(C)(3)
Class of Activity:	CHARITABLE

25,000.

Relationship of Donee: Organizational Status of Donee: Amount Given:	
Class of Activity:	

Donee's Name:

NONE 501(C)(3) 25,000.

CHARITABLE S V WRITERS CONFERENCE Donee's Name: Relationship of Donee: NONE Organizational Status of Donee: 501 (C) (3) Amount Given:

12,000.

Class of Activity: EDUCATIONAL

Donee's Name: SUN VALLEY SKI EDUCATION FUND Organizational Status of Donee: 501 (C) (3) Amount Given:

10,000.

Class of Activity: CHARITABLE Donee's Name: WOOD RIVER ABILITY PROGRAM Relationship of Donee: NONE Organizational Status of Donee: 501 (C) (3)

IDAHO PUBLIC TELEVISION

Amount Given: Class of Activity: CHARITABLE

3,000.

2016		ederal Statements BARBARA CIMINO FOUNDATION,	Page 3
		INC.	 82-0474867
Statement 6 (continued) Form 990-PF, Part I, Line Contributions, Gifts, and	25 Grants		
Donee's Name: Relationship of Done Organizational Statu	∍e: us of Donee:	CITY OF KETCHUM NONE 501(C)(3)	2 220
Amount Given:			\$ 3,000.
Class of Activity: Donee's Name: Relationship of Done		CHARITABLE DEFENDERS OF WILDLIFE NONE	
Organizational Statu Amount Given:	is of Donee:	501 (C) (3)	5,000.
Class of Activity: Donee's Name: Relationship of Done	22.	EDUCATIONAL WORLD WILDLIFE FUND NONE	
Organizational Statu Amount Given:		NONE 501 (C) (3)	5,000.
Class of Activity: Donee's Name: Pelationship of Done	22.	CHARITABLE IDAHO HUMANE SOCIETY NONE	
Relationship of Done Organizational Statu Amount Given:	is of Donee:	501 (C) (3)	5,000.
Class of Activity: Donee's Name: Relationship of Done	ee:	CHARITABLE IBBR (IDAHO BEAR) NONE	
Organizational Statu Amount Given:	ıs of Donee:	501 (C) (3)	2,500.
Class of Activity: Donee's Name: Polationship of Done		CHARITABLE AIDA NOME	
Relationship of Done Organizational Statu Amount Given:		NONE 501(C)(3)	2,500.
Class of Activity: Donee's Name: Relationship of Done	22.	CHARITABLE INSPIREMEXICO FOUNDATION NONE	
Organizational Statu Amount Given:	is of Donee:		20,000.
Class of Activity: Donee's Name:		EDUCATIONAL CO ROCKY MOUNTAIN SCHOOL	
Relationship of Done Organizational Statu Amount Given:		NONE 501(C)(3)	10,000.
Class of Activity: Donee's Name:		EDUCATIONAL AMERICAN PRAIRIE RESERVE	
Relationship of Done Organizational Statu Amount Given:	e: is of Donee:	NONE 501(C)(3)	15,000.
Class of Activity: Donee's Name:	22.	CHARITABLE YELLOWSTONE PARK FOUNDATION NONE	
Relationship of Done Organizational Statu	is of Donee:	501 (C) (3)	

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2016	Federal Statements THE JAMES & BARBARA CIMINO FOUNDATION,			Page 4
	THE JAMES & D	INC.		82-0474867
Statement 6 (continued) Form 990-PF, Part I, Line 25 Contributions, Gifts, and G	5 rants			
Amount Given:			\$	5,000.
Class of Activity: Donee's Name: Organizational Status Amount Given:	of Donee:	EDUCATIONAL ENTERPRISE EVENTS, INC. 501(C)(3)		20,000.
Class of Activity: Donee's Name: Relationship of Donee Organizational Status Amount Given:	: of Donee:	EDUCATIONAL KETCHUM COMMUNITY LIBRARY NONE 501(C)(3)		25,000.
Class of Activity: Donee's Name: Relationship of Donee Organizational Status Amount Given:	: of Donee:	CHARITABLE LADY OF SNOWS CHURCH NONE 501 (C) (3)		5,000.
Class of Activity: Donee's Name: Relationship of Donee Organizational Status Amount Given:	: of Donee:	EDUCATIONAL TEXAS STATE UNIVERSITY NONE 501(C)(3)		20,000.
Class of Activity: Donee's Name: Relationship of Donee Organizational Status Amount Given:	: of Donee:	CHARITABLE BALD MOUNTAIN RESCUE FUND NONE 501 (C) (3)		10,000.
Class of Activity: Donee's Name: Relationship of Donee Organizational Status Amount Given:	: of Donee:	CHARITABLE FUNDACION GARCIA RINALDI NONE 501(C)(3)		5,000.
Class of Activity: Donee's Name: Organizational Status Amount Given:	of Donee:	CHARITABLE IDAHO FISH AND WILDLIFE 501 (C) (3)		20,000.
Class of Activity: Donee's Name: Organizational Status Amount Given:	of Donee:	CHARITABLE KETCHUM FIRE DEPARTMENT 501 (C) (3)		5,000.
Class of Activity: Donee's Name: Organizational Status Amount Given:	of Donee:	CHARITABLE BLAINE COUNTY SHERIFFS 501 (C) (3)		5,000.
Class of Activity: Donee's Name: Organizational Status Amount Given:	of Donee:	CHARITABLE THE CONNECTION 501 (C) (3)		5,000.

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Federal Statements THE JAMES & BARBARA CIMINO FOUNDATION, INC.

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23,015.

5,000.

Statement 6 (continued) Form 990-PF, Part I, Line 25 **Contributions, Gifts, and Grants**

Class of Activity:

Donee's Name:

Organizational Status of Donee:

Amount Given:

Class of Activity: Donee's Name:

Organizational Status of Donee:

Amount Given:

Class of Activity:

Donee's Name: Organizational Status of Donee:

Amount Given:

Class of Activity: Donee's Name:

Organizational Status of Donee:

Amount Given:

Class of Activity:

Donee's Name:

Organizational Status of Donee: 501(C)(3)

Amount Given:

Class of Activity:

Donee's Name:

Organizational Status of Donee:

Amount Given:

Class of Activity:

Donee's Name:

Organizational Status of Donee:

Amount Given:

Class of Activity: Donee's Name:

Organizational Status of Donee:

Amount Given:

Class of Activity:

Donee's Name:

Organizational Status of Donee:

Amount Given:

Class of Activity:

Donee's Name: Organizational Status of Donee:

Amount Given:

Class of Activity:

Donee's Name:

Organizational Status of Donee:

Amount Given:

CHARITABLE

501 (C) (3)

CHARITABLE HOSPICE AND PALIATIVE CARE

CITY OF KETCHUM PARKS & REC.

501 (C) (3)

CHARITABLE BUTTE COUNTY SCHOOL

501 (C) (3)

5,000.

1,000.

5,000.

10,000.

40,750.

CHARITABLE

STANLEY COMMUNITY LIBRARY

501 (C) (3)

10,000.

CHARITABLE

LIVING WITH WOLVES

5,000.

CHARITABLE

WOOD RIVER ANIMAL SHELTER

501 (C) (3)

CHARITABLE KINESIS

501 (C) (3)

CHARITABLE

HOTEL AND TOURISM SCHOLARSHIP FOUND.

501 (C) (3)

5,000.

CHARITABLE

WILD LOVE PRESERVE

501 (C) (3)

CHARITABLE

WOOD RIVER LAND TRUST

501 (C) (3)

5,165,000.

EDUCATIONAL

SCHOLARSHIP PAYMENTS TO VARIOUS UNIV.

501 (C) (3)

Total \$ 5,557,765.

2016

Federal Statements THE JAMES & BARBARA CIMINO FOUNDATION, INC.

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Statement 7

Form 990-PF, Part II, Line 11

Investments - Land, Buildings, and Equipment

Category Bas		Basis	Accum. asis Deprec.		Book <u>Value</u>		Fair Market <u>Value</u>	
Buildings Land	\$	275,000. 425,000.	\$	30,000.	\$	245,000. 425,000.	\$	245,000. 425,000.
	Total 🖺	700,000.	\$	30,000.	\$	670,000.	\$	670,000.

Statement 8 Form 990-PF, Part III, Line 3 Other Increases

Net Unrealized Gains or Losses on Investments

3,261,827. 3,261,827. Total \$

Statement 9 Form 990-PF, Part XV, Line 2a-d **Application Submission Information**

Name of Grant Program:

Name:

MR. ROBERT CIMINO

Care Of:

Street Address:

PO BOX 363328

City, State, Zip Code:

SAN JUAN, PR 00936

Telephone:

E-Mail Address:

Form and Content:

BY LETTER, WITH SPECIFIC EXPLANATION OF PROGRAM FOR USE OF

FUNDS

Submission Deadlines:

NONE

AWARDS USUALLY BENEFIT EDUCATIONAL AND ENVIRONMENTAL AREAS Restrictions on Awards: