Form 990-PF

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

	Dep	atment	of the Treasury enue Service	1 1 6 1	o not enter	social s	ecurity nun	ibers on	this form a	s it may be n	nade p	ublic.	4	1 20	
				or tax year beginning	on about For MAY		2016	separate	instruction and e			30 .		Open to Public	c Inspection
			foundation	or ran your boginning			2010		, 8114 6	iiuiiig	$\overline{}$	<del></del>	entificatio	<del></del>	
	_ [	IPF	ER_SUTT	ON FOUNDAT	ION, I	NC.					2	6-02	5915	5	
	Nu	mber an	d street (or PO b	oox number if mail is not di	elivered to stree	address	)			Room/suite	<del> </del>	ephone n			
	5	12	CAPITO	LA AVE	<del></del>						⊥ (	609)	924-	4001	
			wn, state or pro	ovince, country, and ZICA 95010	P or foreign p	ostal co	de		·		C If ex	emption a	oplication is	pending, check here	
	G	Check a	all that apply.	Initial retur	n		Initial retui	rn of a fo	rmer public o	harity	D 1.1	Foreign o	rganization	is, check here	▶□
				Final return			Amended	return		•	1	•	-		
				Address ch			Name char				2.1	Foreign org check here	anizations m and attach o	neeting the 85% test computation	▶□
	H (	_	type of organization 4947/a\/1	ation: X Section  ) nonexempt charitable	n 501(c)(3) e		rivate founda ixable privat		g tuan	4				atus was terminat	ted
	l Fa			assets at end of year	J Account			Cash	L Accr	ual	l			(A), check here	
			art II, col. (c),	•		-			ED CAS					: 60-month termir !)(B), check here	nation
		<b>\$</b>		1,351,102.							1	301 30000	507(0)(	May, check here	
	Pa	art [	(The total of amo	evenue and Expenses bunts in columns (b), (c), and the amounts in column (a	d (d) may not		) Revenue a Denses per b		(b) Net in		(	c) Adjust incon		(d) Disburs for chantable (cash basis	purposes
		1 (		gifts, grants, etc., recei	<del></del>				<del></del>	<del>,,,,,</del>	1	N/A	<del> </del>	(Gasii Basi	
$-\ell$	3	2 0	Check 🕨 🗓 ı	If the foundation is not required to					••••••		1				
Ŏ	u	3 2	Interest on saving cash investments	s and temporary				60.		60.			·	STATEME	NT 2
U	7	4 [	Dividends and i	interest from securities	;										
		5a (	Gross rents						······································						
		א מ	Net rental income	or (loss)	<del> </del>				<del></del>		<b> </b>	****		1	5 - <del>122</del>
	ě	64 1	Net gain or (loss) f	from sale of assets not on I			70,0	128.	·		ļ			STATEME	NT 1
	Revenue	1	Gross sales price assets on line 6a		,333.		· ,,;; ,-;·		- 4 4	) EEE	<del></del>	·	<del>, '</del>	<del></del>	<del>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</del>
	Re	1	· -	come (from Part IV, line 2)			······································		44	3,555.				-	
		-	Net short-term Income modific	. •			<del></del>				-		<u> </u>	<del> </del>	12717
		100.0	Gross sales less n			<b></b>	······································		······································	······································	<b>-</b>			<del></del>	
		l .	ess Cost of good	ds sold			n+ ''	<del>' '  </del>	· · · · · · · · · · · · · · · · · · ·	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>		<del>,, ,</del>	7	,·	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
SC		c @	Gross profit or	(loss)											
$\geq$		11 (	Other income			ļ									
Ź		12 1	Total. Add line:	s 1 through 11			70,0		44	<u>3,615.</u>					
SCANNED				officers, directors, trustees	; etc	<b> </b> -		0.		0.	<u> </u>			<del> </del>	0.
		14 (	Other employee	salaries and wages		<b> </b> -					<u> </u>				
Ä	S			employee benefits-	( ) ()	<u> </u>				<del></del>	<b>├</b>	<del></del>	<del></del>	<del> </del>	
~	Sus	108	egal fees	s> 9 9 2018	• 1	<del> </del>					<del> </del>			<del> </del>	
9	Š	6.0	Accounting feet Other professio	sz 🤋 🦻 2018 – I	).  -						_			<del> </del>	
22	Š	1	nteresti											<del> </del>	
0 9 2018	rati		Taxes 🤼 🖟	ેોરાં પ્ર <b>ે</b> ST	MT- 3		31,4	00.		0.					0.
·	nist	19 [	Depreciation an												
	Ē		Occupancy												
	Ă	ı		nces, and meetings											
	ě		Printing and pu			<b> </b>		20			<u> </u>				
	Operating and Administrative Expenses		Other expenses		MT 4			70.	<del></del>	0.	<b> </b>			<u> </u>	0.
	era(			and administrative		}	21 /	70		0.	1				0.
	ဝိ	ı	-	lines 13 through 23 gifts, grants paid		1	31,4 ,513,0	138		· ·	<del> </del>		<del></del>	1 513	,038.
				gnis, grants paid s and disbursements		<u>-</u> -	, , , , ,				-			1,513	7030.
		1	Add lines 24 an			1.	,544,5	808		0.	1			1,513	,038.
			Subtract line 26								-			7	<del>' </del>
		1		over expenses and disbu	rsements	_1	474,4	20.	<del></del>						
		b N	Vet investment	Income (if negative, enti-	er -0-)				44	3,615.					
		C A	<u>Adjusted net in</u>	ICOME (if negative, enter -	0-)	Ī						N/A		1	

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

Part IV Capital Gallis	and Losses for Tax on I	investmen	Lincome	1		quired (i			
(a) List and desc 2-story brick wa	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)						;) Date acqu (mo , day, y		(d) Date sold (mo , day, yr )
1a INVESTMENT IN	ORCHARD SOUARE			1-	- Dona		0/31/	11	10/28/16
	LIQUADATION DI	STRIBUT	TON	<del> </del>		P	<u> </u>	<u></u> -	10/20/10
C				1					
<u>d</u>	<del></del>			1					
e				<del>                                     </del>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale	<u> </u>			(h) Gain d (e) plus (f)	or (loss) minus (	g)
a 2,829,526.		<del>                                     </del>	2,400,00	0.			· · · · · ·		429,526.
b 14,029.			27 100 700						14,029.
C									11/0231
d		<del>                                     </del>							
6	<del></del>	<del>                                     </del>							
	ng gain in column (h) and owned by	v the foundation	on 12/31/69			(1) (	Page (Col. /	h) asia	minuc
(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col (i) col (j), if any	_		col (I	iains (Col. (i k), but not le Losses (froi	ess thar	1 -0-) ar
	43 01 12/01/03		(1), 11 ally						120 526
<u>a</u>		<del> </del>							429,526. 14,029.
b		<del> </del>				<del> </del>			14,023.
<u>c</u>									
<u>d</u>		-							<del> </del>
<u>e</u>	L			_					
2 Capital gain net income or (net ca	apital loss) $\begin{cases} & \text{if gain, also ent} \\ & \text{if (loss), enter} \end{cases}$	er in Part I, line O- in Part I, line	7 7	}	2				443,555.
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) a	and (6)							
If gain, also enter in Part I, line 8,		. ,		}					
If (loss), enter -0- in Part I, line 8				للِ	3			N/A	
Part V Qualification U	Inder Section 4940(e) fo	r Reduced	Tax on Net	inv	estm	ent Inco	me		
(For optional use by domestic private if section 4940(d)(2) applies, leave the Was the foundation liable for the sec	his part blank				•				Yes X No
If "Yes," the foundation does not qual			-						
	each column for each year, see the			ntries					
(a) Base period years	(b)			(c)			Ţ	Dietrik	(d) ution ratio
Base period years Calendar year (or tax year beginni	A #1 a b # #1 a b # #1 a b	istributions	Net value of no		itable-	use assets	(col	(b) div	ided by col (c))
2015		0.		3	,50	2,593.			.000000
2014		0.				2,165.		_	.000000
2013	7	73,546.				7,084.			.224406
2012		94,727.	<del></del>	3	, 65	9,397.			.025886
2011		25.		3	,40	8,312.	<del>                                     </del>		.00007
2 Total of line 1, column (d)							2		.250299
3 Average distribution ratio for the	5-year base period - divide the tota	Lon line 2 by 5	or by the number	of ve	ars				
the foundation has been in existe			or by the manner.	•.,•.			3		.050060
4 Enter the net value of noncharitat	ole-use assets for 2016 from Part X	(, line 5					4		
5 Multiply line 4 by line 3							5		0.
6 Enter 1% of net investment incon	ne (1% of Part I, line 27b)						6		4,436.
7 Add lines 5 and 6							7	···	4,436.
8 Enter qualifying distributions from	n Part XII, line 4						8		1,513,038.
If line 8 is equal to or greater than See the Part VI instructions	n line 7, check the box in Part VI, lin	ne 1b, and comp	plete that part usin	ng a 1°	% tax ı	rate			
	<del></del>								

DIDED GUMMON HOUSE HOLD		7		0.5				
Form 990-PF (2016) PIPER SUTTON FOUNDATION, INC.  Part VI Excise Tax Based on Investment Income (Section 494)	2/-> 4	040(5) 4040(5)			0259			Page 4
			or 4	940	- see	instru	ICTIO	15)
1a Exempt querating foundations described in section 4940(d)(2), check here \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					ĺ	**		1
Date of ruling or determination letter (attach copy of letter if nec  b Domestic foundations that meet the section 4940(e) requirements in Part V, check here				1	1		4,4	36
of Part I, line 27b	ا لما ا	and enter 1%		<del> !</del>		<del>,,,,,,,</del>	7,4	30.
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%	of Part	l line 12 col (h)						
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Ot		• •		2	1			0.
3 Add lines 1 and 2	11613 6111	61 -0-7		3			4,4	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only 0	thers en	ter -0-1		4			-,-	0.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				5			4,4	36.
6 Credits/Payments				, .		······································	<del></del>	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a	1,96	54.		20.0	8 3		y m
b Exempt foreign organizations - tax withheld at source	6b			"		26.34	446	200
c Tax paid with application for extension of time to file (Form 8868)	6c			and t	22 ( ) 20 ( )	11 m 14 m 11 m 14 m 14 m 14 m 14 m 14 m	100	attu 3
d Backup withholding erroneously withheld	6d			34		,		
7 Total credits and payments Add lines 6a through 6d				7	}		1,9	64.
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attain	ched			8				56.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			<b>•</b>	9			2,5	28.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				10				
11 Enter the amount of line 10 to be Credited to 2017 estimated tax		Refunded	<b></b>	11				
Part VII-A Statements Regarding Activities								
1a During the tax year, did the foundation attempt to influence any national, state, or local legis	lation or	did it participate or inte	rvene	ın			Yes	No
any political campaign?						1a		_X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	es (see	instructions for the defi	nition	)?		1b		X
If the answer is "Yes" to $1a$ or $1b$ , attach a detailed description of the activities a	nd copi	es of any matenals po	ıblisi	ned or				
distributed by the foundation in connection with the activities.								
c Did the foundation file Form 1120-POL for this year?						10	<u> </u>	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the								
(1) On the foundation 🕨 \$ O . (2) On foundation managers	▶ \$		0.					
e Enter the reimbursement (if any) paid by the foundation during the year for political expendi	ture tax	imposed on foundation						
managers > \$O.								
2 Has the foundation engaged in any activities that have not previously been reported to the IF	182					2		<u>X</u> _
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 i		nt, articles of incorporal	ion, d	r				v
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change						3	-	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the yea	r۶			18.7	/A	4a		
b If "Yes," has it filed a tax return on Form 990-T for this year?				1/	/ A	4b	<del> </del>	X
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?						5	ļ	<del></del>
If "Yes," attach the statement required by General Instruction T.	N							
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied ei	mer							
By language in the governing instrument, or      By state legislation that offertunity among the governing sections as that an expenditure in the section of the secti		ana shas manslins with the						
By state legislation that effectively amends the governing instrument so that no mandatory remain in the governing instrument?	y arrecut	ons that conflict with the	State	; law		6	Х	
remain in the governing instrument?  7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," con	onlata [	South and (a) and De	VI	,		7	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 145, Con	ipiete r	ait II, coi. (c), ailu ra	<i>11</i> / / /			···		
8a Enter the states to which the foundation reports or with which it is registered (see instructio	<b>■</b> (20					ļ		
NJ	-, -							
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttornev (	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 se	ction 49	42(J)(3) or 4942(J)(5) fo	r cale	ndar				_
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," c						9	<u>L</u>	X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedu	-					10		X
					F	rm <b>99</b>	0-PF	(2016)

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Pa	art VII-A Statements Regarding Activities (continued)			
		1	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	1		
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	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		X
	Website address ► N/A			
14	The books are in care of ► THE FOUNDATION  Telephone no ► (609)	924-	400	1
• •	Located at ▶512 CAPITOLA AVE, CAPITOLA, CA ZIP+4 ▶9			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
10	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
40			Yes	No
10	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,	16	1 63	X
	securities, or other financial account in a foreign country?	<del></del>	l	
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	1		
	foreign country			<u></u>
Pe	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required	7	V	NI.
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<del> </del>	Yes	No
1 a	During the year did the foundation (either directly or indirectly)	ì		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	j		
	(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	1		
	termination of government service, if terminating within 90 days )	1		
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			
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			
Ī	before the first day of the tax year beginning in 2016?	10	(	Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1		
-	defined in section $4942(j)(3)$ or $4942(j)(5)$ )			
,	a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	ļ		
۰	before 2016?  Yes X No			
	What has also			
1-	If "Yes," list the years >	Į		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	- [		
	37/3	2b	ĺ	1
_		20	<del> </del>	<del> </del>
C	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
_				1
32	i Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
t	of "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,			1
	Form 4720, to determine if the foundation had excess business holdings in 2016)  N/A	3b	<b>├</b>	
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ļ	X
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			1
	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		<u> X</u>
		~~ QQ	n oc	100461

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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	es X No	. 1 1
(2) Influence the outcome of any specific public election (see section 4955),		ectiv.	t	
any voter registration drive?	, , , ,		es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	.?		es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				1 1
4945(d)(4)(A)? (see instructions)	m described in section		es X No	
			3 (25) 110	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or to		es X No	
the prevention of cruelty to children or animals?			es LALINO	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	•	n Regulations	27 / 2	
section 53 4945 or in a current notice regarding disaster assistance (see instri	•		N/A	5b
Organizations relying on a current notice regarding disaster assistance check	here , ,, , .		······································	2. P. 18
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption			[	11 11 11 11 11 11 11 11
expenditure responsibility for the grant?	N	/A 🔲 Ye	as 🔲 No 😹	. 46 J.C.
If "Yes," attach the statement required by Regulations section 53.494	15-5(d).		1"	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to			1	<b>' l</b> l "
a personal benefit contract?	• • •	Y6	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	nersonal henefit contract?		1	6b X
If "Yes" to 6b, file Form 8870.	personal benefit contract.		-	
7a At any time during the tax year, was the foundation a party to a prohibited tax	oboltor transaction?		es X No	
		T		75
Part VIII Information About Officers, Directors, Trust				7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	tees, Foundation Ma	nagers, Highly	y	
1 List all officers, directors, trustees, foundation managers and their	companyation			
List an officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	(a) Evnage
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	to position	enter -0-)	compensation	allowances
JAMES S. REGAN	PRES., TREAS.	& ASST.	SEC.	
512 CAPITOLA AVE		_		_
CAPITOLA, CA 95010	1.00	0.	0.	0.
AMY H. REGAN	V.P., ASST. T	REAS. & S	EC.	}
512 CAPITOLA AVE				
CAPITOLA, CA 95010	1.00	0.	0.	0.
DAVID W. MILLS	TRUSTEE			
1205 PACIFIC AVENUE, SUITE 203	7			
SANTA CRUZ, CA 95060	0.00	o.	٥.	0.
3,000	1			
<del></del>	-		)	
2 Compensation of five highest-paid employees (other than those in	cluded on line 1) If none	enter "NONE "	L	L
- Compensation of the inglicest-paid employees former than those in	(b) Title, and average	Ctel 140142.	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	account, other
	devoted to position		compensation	allowances
NONE	_		ļ	Į
<del></del>				
<del></del>	_		1	
	<u> </u>			
	_			
	<u> </u>	<u> </u>	<u> </u>	
	7		1	}
<del></del>	1			
Total number of other employees paid over \$50,000	<del> </del>		<b>•</b> •	
Total number of other employees paid over \$50,000	<del></del>		<u></u>	000 DE (0016)

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

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,	Oolpas	Teals phot to 2013	2013	2010
line 7		, ,		0.
2 Undistributed income, if any, as of the end of 2016	/ //	· //- //- //- //- //- //- //- //-	··· · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , ,
a Enter amount for 2015 only			0.	
b Total for prior years			, , ,	/ /
	/ / /	0.		//
3 Excess distributions carryover, if any, to 2016.	e e n, e n, m he u	the same to be the same	, 4 ,	11 1 1 1 1 1
a From 2011		Burgaphi par 1999 hij	a difference in a supplier and the supplier of the	(4) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b From 2012		fill gopeyel mount in son		
c From 2013 494,697.		" how we don't	Comment of the State of the Sta	Break July
d From 2014		,''		
e From 2015		!		
f Total of lines 3a through e	494,697.			
4 Qualifying distributions for 2016 from				
Part XII, line 4 $\triangleright$ \$ 1,513,038.		:		
a Applied to 2015, but not more than line 2a			0.	
<b>b</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				0.
e Remaining amount distributed out of corpus	1,513,038.			<u> </u>
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a) }	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,007,735.			
b Prior years' undistributed income Subtract	,	······································		
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2015 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2016 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				0.
7 Amounts treated as distributions out of		<del>  </del>	<del>                                     </del>	
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2017.		,	,	, , , , , , , , , , , , , , , , , , ,
Subtract lines 7 and 8 from line 6a	2,007,735.	Himmel 144 444 44 44 44 44 44 44 44 44 44 44 4		
IO Analysis of line 9				
a Excess from 2012				
b Excess from 2013 494, 697.				
c Excess from 2014				
d Excess from 2015				
e Excess from 2016 1,513,038.				Form 000 DE (2016)

	SUTTON FOUND			26-025	59155 Page 10
Part XIV Private Operating	Foundations (see in	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling	or determination letter tha	t it is a private operating			
foundation, and the ruling is effective t		•	<b>▶</b>		
b Check box to indicate whether the four	ndation is a private operati	ng foundation described		4942(j)(3) or 494	12(5)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for			İ		
each year listed			<u> </u>		
b 85% of line 2a			<u> </u>		
c Qualifying distributions from Part XII,					
line 4 for each year listed		<u> </u>	ļ		
d Amounts included in line 2c not		1			
used directly for active conduct of				1	
exempt activities					<del></del>
e Qualifying distributions made directly	1				
for active conduct of exempt activities	1			1	
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter	}			1	
(1) Value of all assets	<u> </u>		<u></u>		
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter	<del></del>	<del> /</del>	<del> </del>	<del></del>	
2/3 of minimum investment return				1	
shown in Part X, line 6 for each year			1		
listed	<del></del>	<del>                                     </del>	<del></del>	<del></del>	
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest,				1	
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)			<del> </del>		
(2) Support from general public and 5 or more exempt					
organizations as provided in				1	
section 4942(j)(3)(B)(iii)	<b>—</b>	<del></del>	<u> </u>		
(3) Largest amount of support from		]		1	
an exempt organization			<del></del>		
(4) Gross investment income	4: (0 1		if the fact of the	1 405 000	
Part XV Supplementary Info			if the foundation	n nad \$5,000 or mo	re in assets
	<del></del>	detions.			
1 Information Regarding Foundation		Aban 00/ af Aba AsA-l asa-	A	a faccadation bafasa tha alam	a af amu tau
a List any managers of the foundation w year (but only if they have contributed			tributions received by th	e foundation before the clos-	e or any tax
JAMES S. REGAN		(0)(-)			
b List any managers of the foundation w	ho own 10% or more of th	no atook of a corporation	/or on couply large and	han of the ownership of a na	rtnorchin or
other entity) of which the foundation h			(or an educiny range bon	non of the ownership of a pa	rthership or
NONE	•				
2 Information Regarding Contribu	tion Grant Gift Loan	Scholarship etc. D	**************************************		
Check here X if the foundation				not accept uncollected requir	acte for funde. If
the foundation makes gifts, grants, etc					
a The name, address, and telephone nur		<del></del>			
a The name, address, and telephone nur	iliber of e-ilian address of	the person to whom app	ilications should be addi-	5350	
b The form in which applications should	be submitted and informa	tion and materials they s	hould include		
c Any submission deadlines					
			. <u></u>		
d Any restrictions or limitations on award	ds, such as by geographic	al areas, charitable fields	, kinds of institutions, or	r other factors	

Fata and a state of the state o	linrelate	ed business income	Tevalua	led by section 512, 513, or 514	<del></del>
Enter gross amounts unless otherwise indicated	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue a	code		code		
ab			+ +		
C					<del></del>
d	1		1 1		
е					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	60.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal			1 1		
property					<u>.                                    </u>
7 Other investment income			$\bot$		
8 Gain or (loss) from sales of assets other					
than inventory			18	70,028.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			$\rightarrow$		<del></del> _
11 Other revenue					
å	_				
b			+		<u> </u>
<u> </u>			<del>  </del>		
d	-		+-+		
e		0	<del></del>	70,088.	0.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		•		70,088.
(See worksheet in line 13 instructions to verify calculations	١			13	707000.
Part XVI-B Relationship of Activities		omplishment of E	xempt	Purposes	***************************************
Line No. Explain below how each activity for which in					plishment of
the foundation's exempt purposes (other th					
		<del></del>			
		<del></del>	_	<del></del>	
			<del></del>	<del></del>	
		· · · · · · · · · · · · · · · · · · ·			
1					
		<del>-</del>			

623621 11-23-16

Form 990-P		SUTTON F		ION, INC.	and Polational	26-025			ge <b>13</b>
1 21 4 3 4 4	Exempt Organ		151615 10 6	inu Transactions a	and Relations	nips with Noticila	mable	•	
1 Did the	organization directly or indi		of the followin	g with any other organization	on described in secti	on 501(c) of		Yes	No
	de (other than section 501(c					• •			·
a Transf	ers from the reporting found	ation to a noncharita	ble exempt or	ganization of			1 1		-
(1) Ca	ish						1a(1)		X
(2) Ot	her assets						1a(2)		X
b Other t	ransactions								1
	les of assets to a noncharita	_					16(1)		X
	irchases of assets from a no		organization				1b(2)		X
	ental of facilities, equipment,						1b(3)		X
	imbursement arrangements		,, ,				1b(4)		X
	ans or loan guarantees						1b(5)		X
	rformance of services or me		-			•••	1b(6)		X
	g of facilities, equipment, ma nswer to any of the above is	_		-	wave chow the fair m	arket value of the goods		ntc	
	ices given by the reporting f							513,	
	(d) the value of the goods,			o lood than lan market vale	ao in any transaotion	or sharing arrangement, c	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
(a) Line no	(b) Amount involved	<del>,</del>		exempt organization	(d) Description	of transfers, transactions, and	shanng am	angeme	ents
			N/A						
	<del> </del>								
				·					
		<u> </u>							
		<u> </u>							
		-		<del></del>			<del></del>		
		<del> </del>							
		ļ			<del></del>				
		<del> </del>			<del></del>				
		<del> </del> -			<del></del>				
		<del></del>			<del></del>				
	<del></del>	<del> </del>	·		<del></del>	<del></del>		_	
	<del></del>	<del> </del>		- <del></del>	<del>                                     </del>				
2a Is the f	oundation directly or indirec	tly affiliated with, or i	related to, one	or more tax-exempt organi	izations described				
ın secti	on 501(c) of the Code (othe	r than section 501(c)	)(3)) or in sect	ion 527?			Yes	X	] No
<u>b</u> If "Yes,	complete the following sch	edule							
	(a) Name of org	ganization		(b) Type of organization		c) Description of relations	hip		
	<u> N/A</u>				<u> </u>				
				<del> </del>					
					<del> </del>				
			<del></del>						
Un	der penalties of penury, I declare	that I have examined the	s return, includin	g accompanying schedules and	statements, and to the	best of my knowledge			
	d belief, it is true, correct, and cor					has any knowledge ret	y the IRS d um with the	prepar	rer
Here	) /hv	1 // /lagn	ń	1 3/14/19	PRESID		X Yes	(see ins	No No
5	ignature of officer of trustee	1 Por LUTT	<del> </del>	Date / 1 1/1 0	Title				
	Print/Type preparer's na		Preparer's si	gnature	Date	Check if PTIN			
					MAR 0 9 2018	self- employed			
Paid	RONALD J.						0450		
Prepare		C CPA8 &	ADVISO	RS, P.C.	<del></del>	Firm's EIN ► 22-2	9512	02	
Use On						<u> </u>			
	Firm's address ► 34					0000	70 7	^ ^ ^	
	CR	RANFORD, N	<u>10 0/01</u>	0-2496		Phone no 908-2			
						F	orm <b>990</b>	・・・	(4016)

FORM 990-PF GAIN OR (	LOSS) F	ROM SALE	OF A	SSETS		STA	TEMENT	1
(A) DESCRIPTION OF PROPERTY				ANNER QUIRED	DA ACQU	TE IRED	DATE S	SOLD
INVESTMENT IN ORCHARD SQUARE			PUR	CHASED	10/3	1/11	10/28	3/16
(B) (C) GROSS COST SALES PRICE OTHER B	OR	(D) EXPENSE SALE	OF	(E) DEPRE		GAIN	(F)	SS
2,829,526. 2,77	3,527.		0.		0.		55,9	999.
(A) DESCRIPTION OF PROPERTY			AC	ANNER QUIRED	DA ACQU	TE IRED	DATE S	SOLD
TECHSCAPE POST LIQUADATION DIST	RIBUTIO	N	PUR	CHASED				
(B) (C) GROSS COST SALES PRICE OTHER B	OR	(D) EXPENSE SALE	OF	(E) DEPRE		GAIN	(F) I OR LOS	ss
14,029.	0.		0.		0.		14,0	029.
CAPITAL GAINS DIVIDENDS FROM PA	RT IV				_	· <u></u> -		0.
TOTAL TO FORM 990-PF, PART I, I	INE 6A						70,0	028.
FORM 990-PF INTEREST ON SAVING	S AND T	EMPORARY	CASH	INVEST	MENTS	STA	ATEMENT	2
SOURCE		(A) VENUE BOOKS	NET	(B) INVEST INCOME			(C) ADJUSTEI ET INCOI	
JPM PRIME MONEY MARKET DIVIDENDS		60.			60.			
TOTAL TO PART I, LINE 3		60.			60.			

FORM 990-PF	TAX	ES		STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM				
FEDERAL EXCISE TAX	31,400.		0.	0.		
TO FORM 990-PF, PG 1, LN 18	31,400.		0.	0.		
FORM 990-PF	OTHER E	XPENSES		STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM				
FILING FEES BANK FEES	25. 45.		0.	0.		
TO FORM 990-PF, PG 1, LN 23	70.		0.	0.		
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT 5		
DESCRIPTION		LUATION ETHOD	BOOK VALUE	FAIR MARKET VALUE		
INVESTMENT IN ORCHARD SQUARE PARTNERS CREDIT FUND	_	FMV	0.	0.		
TOTAL TO FORM 990-PF, PART I	I, LINE 13		0.	0 .		