

EXTENDED TO JULY 16, 2018

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1708

OMB No 1545-0687

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

For calendar year 2016 or other tax year beginning SEP 1, 2016, and ending AUG 31, 2017

2016

► Information about Form 990-T and its instructions is available at www.irs.gov/form990t.
► Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)Open to Public Inspection for
501(c)(3) Organizations OnlyDepartment of the Treasury
Internal Revenue ServiceA Check box if
address changed

B Exempt under section

 501(c)(3)
 408(e) 220(e)
 408A 530(a)
 529(a)Name of organization (Check box if name changed and see instructions)MAKE-A-WISH FOUNDATION OF SOUTHERN
FLORIDA, INC.

Number, street, and room or suite no. If a P.O. box, see instructions.

4491 S STATE ROAD 7, NO. 201

City or town, state or province, country, and ZIP or foreign postal code

FORT LAUDERDALE, FL 33314

D Employer identification number
(Employees' trust, see
instructions)

59-2620322

E Unrelated business activity codes
(See instructions)

900099

C Book value of all assets
at end of year

22,752,931.

Print
or
Type

F Group exemption number (See instructions.) ►

G Check organization type ► 501(c) corporation 501(c) trust 401(a) trust Other trust

H Describe the organization's primary unrelated business activity. ► SEE STATEMENT 1

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?

If "Yes," enter the name and identifying number of the parent corporation. ►

► Yes No

J The books are in care of ► BETH JACKSON

Telephone number ► (954) 967-9474

Part I Unrelated Trade or Business Income

(A) Income

(B) Expenses

(C) Net

1a	Gross receipts or sales	c Balance	►	1c		
b	Less returns and allowances			2		
2	Cost of goods sold (Schedule A, line 7)			3		
3	Gross profit. Subtract line 2 from line 1c			4a		
4a	Capital gain net income (attach Schedule D)			4b		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			4c		
c	Capital loss deduction for trusts			5	4,572.	4,572.
5	Income (loss) from partnerships and S corporations (attach statement)			6		
6	Rent income (Schedule C)			7		
7	Unrelated debt-financed income (Schedule E)			8		
8	Interest, annuities, royalties, and rents from controlled organizations (Sch F)			9		
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)			10		
10	Exploited exempt activity income (Schedule I)			11		
11	Advertising income (Schedule J)			12		
12	Other income (See instructions; attach schedule)			13	4,572.	4,572.
13	Total. Combine lines 3 through 12					

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions)

(Except for contributions, deductions must be directly connected with the unrelated business income)

14 Compensation of officers, directors, and trustees (Schedule K)
15 Salaries and wages
16 Repairs and maintenance
17 Bad debts
18 Interest (attach schedule)
19 Taxes and licenses
20 Charitable contributions (See instructions for limitation rules)
21 Depreciation (attach Form 4562)
22 Less depreciation claimed on Schedule A and elsewhere on return
23 Depletion
24 Contributions to deferred compensation plans
25 Employee benefit programs
26 Excess exempt expenses (Schedule I)
27 Excess readership costs (Schedule J)
28 Other deductions (attach schedule)
29 **Total deductions.** Add lines 14 through 28
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13
31 Net operating loss deduction (limited to the amount on line 30)
32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30
33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)
34 **Unrelated business taxable income** Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32

14		15	
15		16	
16		17	
17		18	
18		19	
19		20	357.
20			

SEE STATEMENT 2

21		22b	
22a		23	
		24	
		25	
		26	
		27	
		28	
		29	357.
		30	4,215.
		31	
		32	4,215.
		33	1,000.
		34	3,215.

MAKE-A-WISH FOUNDATION OF SOUTHERN
FLORIDA, INC.

Form 990-T (2016)

59-2620322

Page 2

Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation

Controlled group members (sections 1561 and 1563) check here ► See instructions and

a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):

(1) (2) (3)

b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750)

(2) Additional 3% tax (not more than \$100,000)

c Income tax on the amount on line 34

36 Trusts Taxable at Trust Rates See instructions for tax computation. Income tax on the amount on line 34 from:

Tax rate schedule or Schedule D (Form 1041)

37 Proxy tax See instructions

38 Alternative minimum tax

39 Tax on Non-Compliant Facility Income. See instructions

40 Total Add lines 37, 38 and 39 to line 35c or 36, whichever applies

► 35c 482.

► 36

► 37

► 38

► 39

► 40 482.

Part IV Tax and Payments

41a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)

b Other credits (see instructions)

c General business credit. Attach Form 3800

d Credit for prior year minimum tax (attach Form 8801 or 8827)

e **Total credits** Add lines 41a through 41d

41a

41b

41c

41d

41e

42

482.

43

44

482.

42 Subtract line 41e from line 40

43 Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)

44 **Total tax** Add lines 42 and 43

45a Payments: A 2015 overpayment credited to 2016

45a

989.

b 2016 estimated tax payments

45b

c Tax deposited with Form 8868

45c

d Foreign organizations: Tax paid or withheld at source (see instructions)

45d

e Backup withholding (see instructions)

45e

f Credit for small employer health insurance premiums (Attach Form 8941)

45f

g Other credits and payments: Form 2439

45g

Form 4136 Other _____ Total ►

46 **Total payments** Add lines 45a through 45g

46

989.

47 Estimated tax penalty (see instructions). Check if Form 2220 is attached ►

47

48 **Tax due.** If line 46 is less than the total of lines 44 and 47, enter amount owed

► 48

49 **Overpayment.** If line 46 is larger than the total of lines 44 and 47, enter amount overpaid

► 49 507.

50 Enter the amount of line 49 you want Credited to 2017 estimated tax ►

Refunded

► 50 507.

Part V Statements Regarding Certain Activities and Other Information (see instructions)

51 At any time during the 2016 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here ►

Yes

No

52 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file

53 Enter the amount of tax-exempt interest received or accrued during the tax year ► \$

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Signature of officer

6-11-18

PRESIDENT/CEO

Title

Sign Here
Paid Preparer Use Only

Print/Type preparer's name
STEVEN M. DEMAR,
CPA

Preparer's signature
STEVEN M. DEMAR,
CPA

Date
06/05/18

Check if
self-employed

PTIN
P00080750

Firm's name ► KAUFMAN, ROSSIN & CO., P.A.
2699 S. BAYSHORE DRIVE
Firm's address ► MIAMI, FL 33133

Firm's EIN ► 59-1818353
Phone no. (305) 858-5600

Form 990-T (2016)

MAKE-A-WISH FOUNDATION OF SOUTHERN

Form 990-T (2016) FLORIDA, INC.

59-2620322

Page 3

Schedule A - Cost of Goods Sold. Enter method of inventory valuation ► **N/A**

1 Inventory at beginning of year	1	6 Inventory at end of year	6
2 Purchases	2	7 Cost of goods sold Subtract line 6 from line 5. Enter here and in Part I, line 2	
3 Cost of labor	3		
4a Additional section 263A costs (attach schedule)	4a		
b Other costs (attach schedule)	4b	8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes No
5 Total Add lines 1 through 4b	5		

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)
(see instructions)

1 Description of property

(1)	
(2)	
(3)	
(4)	

2 Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	0.	0.

(c) Total income Add totals of columns 2(a) and 2(b) Enter here and on page 1, Part I, line 6, column (A)

(b) Total deductions

Enter here and on page 1, Part I, line 6, column (B)

0.

Schedule E - Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property	2 Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property
(1)		
(2)		
(3)		
(4)		
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjusted basis of or allocable to debt-financed property (attach schedule)	6 Column 4 divided by column 5
(1)		%
(2)		%
(3)		%
(4)		%
Totals		Enter here and on page 1, Part I, line 7, column (A)
Total dividends-received deductions included in column 8		Enter here and on page 1, Part I, line 7, column (B)
		0.
		0.

Form 990-T (2016)

MAKE-A-WISH FOUNDATION OF SOUTHERN

Form 990-T (2016) FLORIDA, INC.

59-2620322

Page 4

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1 Name of controlled organization		2 Employer identification number	Exempt Controlled Organizations			
			3 Net unrelated income (loss) (see instructions)	4 Total of specified payments made	5 Part of column 4 that is included in the controlling organization's gross income	6 Deductions directly connected with income in column 5
(1)						
(2)						
(3)						
(4)						
Nonexempt Controlled Organizations						
7 Taxable Income		8 Net unrelated income (loss) (see instructions)	9 Total of specified payments made	10 Part of column 9 that is included in the controlling organization's gross income	11 Deductions directly connected with income in column 10	
(1)						
(2)						
(3)						
(4)						
				Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (A)	Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B)	
Totals				0.	0.	

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization

(see instructions)

1 Description of income		2 Amount of income	3. Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5 Total deductions and set-asides (col 3 plus col 4)
(1)					
(2)					
(3)					
(4)					
		Enter here and on page 1, Part I, line 9, column (A)			Enter here and on page 1, Part I, line 9, column (B)
Totals		0.			0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income

(see instructions)

1 Description of exploited activity	2 Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
		Enter here and on page 1, Part I, line 10, col (A)	Enter here and on page 1, Part I, line 10, col (B)			Enter here and on page 1, Part II, line 26
Totals		0.	0.			0.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1 Name of periodical	2. Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6. Readership costs	7 Excess readership costs (column 6 minus column 5 but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))		0.	0.			0.

Form 990-T (2016)

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MAKE-A-WISH FOUNDATION OF SOUTHERN

Form 990-T (2016) FLORIDA, INC.

59-2620322

Page 5

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1. Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I	► 0.	0.				0.
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)			Enter here and on page 1, Part II line 27	
Totals, Part II (lines 1-5)	► 0.	0.				0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	2 Title	3. Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14	►		0.

Form 990-T (2016)

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY STATEMENT 1

A 10% LLC MEMBER IN BRICKELL TRUST 8TH STREET PROPERTY LLC, EIN 30-0640689,
WHICH PASSES THROUGH UNRELATED BUSINESS TAXABLE INCOME

TO FORM 990-T, PAGE 1

FORM 990-T

CONTRIBUTIONS SUMMARY

STATEMENT 2

QUALIFIED CONTRIBUTIONS SUBJECT TO 100% LIMIT

CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS

FOR TAX YEAR 2011	
FOR TAX YEAR 2012	48,507
FOR TAX YEAR 2013	
FOR TAX YEAR 2014	99,446
FOR TAX YEAR 2015	147,958

TOTAL CARRYOVER	295,911
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TOTAL CURRENT YEAR 10% CONTRIBUTIONS	
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TOTAL CONTRIBUTIONS AVAILABLE	295,911
TAXABLE INCOME LIMITATION AS ADJUSTED	357

EXCESS 10% CONTRIBUTIONS	295,554
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EXCESS 100% CONTRIBUTIONS	0
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TOTAL EXCESS CONTRIBUTIONS	295,554
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ALLOWABLE CONTRIBUTIONS DEDUCTION	357
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TOTAL CONTRIBUTION DEDUCTION	357
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FORM 990-T	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT	3
PARTNERSHIP NAME	GROSS INCOME	DEDUCTIONS	NET INCOME OR (LOSS)
BRICKELL TRUST 8TH STREET PROPERTY LLC	4,572.	0.	4,572.
TOTAL TO FORM 990-T, PAGE 1, LINE 5	4,572.	0.	4,572.