Form 990-PF

Department of the Treasury

Internal Revenue Service

DLN: 93491135043088

2017

OMB No 1545-0052

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

Open to Public Inspection

For	caler	ndar year 2017, or tax year beginning 01-01-20)17 , a	nd ending 12	2-31	-2017	
		indation IY FAMILY FOUNDATION INC		A Emplo	yer ic	lentification numbe	r
		AVERY		20-8091	168		
Num	ber and	AVERT d street (or P O box number if mail is not delivered to street address) DNSOLES DE AVILA) Room/suite	B Teleph	one n	umber (see instructior	ns)
	or town PA, FL	n, state or province, country, and ZIP or foreign postal code 33613		C If exe	mption	application is pending	g, check here
G Ch	neck al	I that apply	former public charity	2 For tes	eign o t, che	rganizations, check he rganizations meeting ck here and attach coi	the 85% putation
H C	neck ty	$ \nabla$ pe of organization $ \nabla$ Section 501(c)(3) exempt private	foundation			undation status was t on 507(b)(1)(A), chec	
<u></u>	Section	n 4947(a)(1) nonexempt charitable trust	e private foundation				
of '	year <i>(f</i>	xet value of all assets at end from Part II, col (c),	Cash Accru			ation is in a 60-month on 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	(a) Revenue and expenses per books	(b) Net investr		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach					
	2	schedule) Check ▶ ☐ if the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	18,169	9	18,169	18,169	
	5a	Gross rents	ŕ				
	ь	Net rental income or (loss)					
ne	6a	Net gain or (loss) from sale of assets not on line 10	15,727	7			
Revenue	ь 7	Gross sales price for all assets on line 6a 65,350 Capital gain net income (from Part IV, line 2)	3		15,727	7	
œ	8	Net short-term capital gain				25	
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	ь	Less Cost of goods sold	<u> </u>				
	c	Gross profit or (loss) (attach schedule)	<u></u>				
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	33,896	5	33,896	18,194	
	13	Compensation of officers, directors, trustees, etc					
	14	Other employee salaries and wages					
Š	15	Pension plans, employee benefits					
156	16a	Legal fees (attach schedule)					
Expenses	ь	Accounting fees (attach schedule)	1,050		1,050	1,050	C
	c	Other professional fees (attach schedule)	4,336	5	4,336	4,336	
ΙΛe	17	Interest	_				
Operating and Administrative	18	Taxes (attach schedule) (see instructions)	9 658	3	332	2 332	
] 	19	Depreciation (attach schedule) and depletion					
重	20	Occupancy					
Ä	21	Travel, conferences, and meetings				1	
Ē	22	Printing and publications					
βį	23	Other expenses (attach schedule)	% 6:	ı			
at.	24	Total operating and administrative expenses.					
<u> </u>		Add lines 13 through 23	6,105	5	5,718	5,718	C
ŏ	25	Contributions, gifts, grants paid	203,555	5			203,555
	26	Total expenses and disbursements. Add lines 24 and 25	209,660		5,718	5,718	203,555
	27	Subtract line 26 from line 12			•		
	a	Excess of revenue over expenses and disbursements	-175,764				
	ь	Net investment income (if negative, enter -0-)			28,178		
	С	Adjusted net income(if negative, enter -0-)				12,476	
	Dance	work Deduction Act Natice are instructions		C 1 N 1			000 BE (001 -

	_				1
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less allowance for doubtful accounts ▶			
y.	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)	273,346	178,954	195,54
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
	l				1

126.446

318,189

318,189

318,189

318,189

493,638 -175,764

318,189

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315

1

3

4

5

6

493,638

493,638

493,638

124,536

332,874

Less accumulated depreciation (attach schedule) 12 Investments—other (attach schedule) 13 192,480 Land, buildings, and equipment basis 14 Less accumulated depreciation (attach schedule) ▶ 15 Other assets (describe > _ 16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I) 493,638 17 Accounts payable and accrued expenses . 18 Deferred revenue 19 20 Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

Liabilities

Fund Balances

ō

Net Assets

21

22

23

24

25

26

27

28

29

30

31

Part III

2

3

Other liabilities (describe -_

Unrestricted . . .

Permanently restricted .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize) ▶

Temporarily restricted

instructions

	(a) e kınd(s) of property sold (e g , re ouse, or common stock, 200 shs	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1 a SUNTRUST 2026 SHORT TI	ERM					
b SUNTRUST 2026 LONG TER	RM					
c SUNTRUST 2026 LONG TER	RM					
d CAPITAL GAIN DIVIDENDS			Р			
e						
(e) Gross sales prıce	(f) Depreciation allowed (or allowable)	(g Cost or oth plus expens	her basis	(h) Gain or (loss) (e) plus (f) minus (g)		
a 33,	,521		33,961		25	
b 138,	,938		122,556		16,472	
c 65,	,350		66,595		-1,245	
d					475	
e						
Complete only for assets s	showing gain in column (h) and ow	ned by the foundation on	12/31/69	(I)	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k Excess of over col () f col (ι)	Gains (Col (col (k), but not	h) gain minus less than -0-) or om col (h))	
a					-440	
b					16,382	
c					-1,245	
d						
e						
If gain, also enter in Part in Part I, line 8	In or (loss) as defined in sections : I, line 8, column (c) (see instructions :	ons) If (loss), enter -0-	· · · · }	3 come	15,727 25	
If section 4940(d)(2) applies, lea Was the foundation liable for the If "Yes," the foundation does not	section 4942 tax on the distributal qualify under section 4940(e) Do	ble amount of any year in not complete this part	the base period?	У 🔲 ү	es 🗸 No	
	unt in each column for each year, T	see instructions before m	naking any entries			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-	use assets	(d) Distribution rati (col (b) divided by c		
2016	202,425		570,407		0 354878	
2015	206,120		566,343		0 363949	
2014	109,665		533,522		0 205549	
2013	89,080		525,752		0 169433	
2012	57,225		93,180	Т	0 614134	
2 Total of line 1, column (d)			2		1 707943	
number of years the found	or the 5-year base period—divide l ation has been in existence if less charitable-use assets for 2017 fron	than 5 years	r by the		0 341589 407,320	
		· ·	5		139,136	
• • • • • •	t income (1% of Part I, line 27b)		6		282	
			7		139,418	
	ns from Dart VII June 4		8		203,555	
	ns from Part XII, line 4 , . . ter than line 7, check the box in Pa			l g a 1% tax rate Se		

,	,
Doub WITT	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees,
Part VIII	and Contractors

1 List all officers, directors, truste	es, f	oundation managers ar	nd their compensation	(see instructions).	
(a) Name and address		Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
PAUL E AVERY	DIRECTOR		0	'	C
16205 SONSOLES DE AVILA	15 0				
TAMPA, FL 33606	DIDI	CTOR	0		
SUZANNE M AVERY 16205 SONSOLES DE AVILA	15 0	ECTOR	0	0	1
TAMPA, FL 33606					
PAUL JACOBS		ECTOR	0	0	C
3083 DALE CREEK DRIVE NORTH	10 0				
CLEARWATER, FL 33761 2 Compensation of five highest-pa	ida	mulayaaa (athan than t	haaa inaludad an lina 1	see instructions) If no	no onton "NONE "
	ia ei	T -	nose included on line 1	Contributions to	ne, enter NONE.
(a) Name and address of each employee pa more than \$50,000	aıd	Title, and average hours per week (b) devoted to position	(c) Compensation	employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
		_			
Total number of other employees paid ov					
3 Five highest-paid independent co	ontra	actors for professional	services (see instructi	ons). If none, enter "NON	E".
(a) Name and address of each perso	n pai	d more than \$50,000	(b) Typ	e of service	(c) Compensation
Total number of others receiving over \$50					
Part IX-A Summary of Direct (
List the foundation's four largest direct charitable organizations and other beneficiaries served, con	e activ	vities during the tax year. Incl	ude relevant statistical inform	nation such as the number of	Expenses
1	neren	ces convened, research paper	s produced, etc		
*					
-					
2					
3					
3					
4					
-					
Part IX-B Summary of Program	m-R	elated Investments	(see instructions)		
Describe the two largest program-related inve			·	and 2	Amount
1	CSCITIC	the foundation a	dring the tax year on mes 1	unu Z	Amount
2					
All other program-related investments	See	instructions			
3					
Total. Add lines 1 through 3 .			. <u></u>		
					F 000 BE (2217)

3

4

5

6

1a

1b

2

3a 3b

4

5

20.084

20.084

20.084

203,555

203.555

203,273

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282

Distributable amount before adjustments Subtract line 2c from line 1.

Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

3

4 5

6

1

2

3

4

5

Part XII

20,084

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2017

0-PF (20	017)	
XIII	Undistributed Income	(see instructions)

Distributable amount for 2017 from Part XI, line 7

2015 , 2014 , 2013

52,566 70,502

83 046

189,445 174,204

> 70,502 83,046

189,445

174,204

183.471

2 Undistributed income, if any, as of the end of 2017 a Enter amount for 2016 only.

Excess distributions carryover, if any, to 2017

f Total of lines 3a through e.

d Applied to 2017 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b 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. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2012 not

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . .

c Excess from 2015. . . .

d Excess from 2016. . . **e** Excess from 2017. . .

b Excess from 2014. .

6 Enter the net total of each column as

indicated below:

4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ 203,555
 a Applied to 2016, but not more than line 2a
 b Applied to undistributed income of prior years (Election required—see instructions).
 c Treated as distributions out of corpus (Election required—see instructions).

(a)

Corpus

569.763

183.471

753,234

52.566

700,668

(b)

Years prior to 2016

(c)

2016

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Part XIII	Und

b Total for prior years

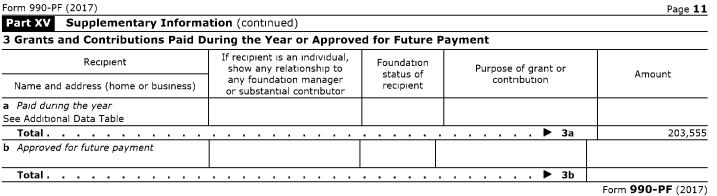
d From 2015. . . .

From 2012.

b From 2013. **c** From 2014.

e From 2016.

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P	art XIV Private Operating Found	ations (see ınstr	ructions and Part V	II-A, question 9)					
	If the foundation has received a ruling or defoundation, and the ruling is effective for 20	17, enter the date	of the ruling	▶∟_	1 -	1			
b	Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)								
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total			
	investment return from Part X for each	(a) 2017	(b) 2016	(c) 2015	(d) 2014	,			
h	year listed								
	Qualifying distributions from Part XII,								
d	line 4 for each year listed 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								
а	"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								
С	"Support" alternative test—enter								
	(1) 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								
Pa	Supplementary Information			organization ha	d \$5,000 or more	e in			
	assets at any time during th Information Regarding Foundation Mana		tructions.)						
а	List any managers of the foundation who have before the close of any tax year (but only if					n			
	PAUL AVERY	they have contribut	ted more than \$5,000) (See Section 307	(d)(2))				
b	List any managers of the foundation who owi				arge portion of the				
	ownership of a partnership or other entity) o	of which the founda	tion has a 10% or gr	eater interest					
2	Information Regarding Contribution, Gr	ant, Gift, Loan, Sc	holarship, etc., Pro	grams:					
	Check here ▶ ☑ If the foundation only mak unsolicited requests for funds If the founda					der			
	other conditions, complete items 2a, b, c, a								
а	The name, address, and telephone number of	or email address of	the person to whom	applications should	be addressed				
b	The form in which applications should be sul	omitted and informa	ation and materials th	ney should include					
С	Any submission deadlines								
d	Any restrictions or limitations on awards, su factors	ch as by geographic	cal areas, charitable f	ields, kınds of ınstıt	utions, or other				



Enter gross amounts unless otherwise indicated		Unrelated bu	isiness income	Excluded by section	(e) Related or exemp	
=	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
g Fees a	and contracts from government agencies					
	rship dues and assessments					
	st on savings and temporary cash					
	ments			14	18,169	
	tal income or (loss) from real estate			17	10,103	
	financed property					
b Not do	ebt-financed property					
Net re	ntal income or (loss) from personal property					
	nvestment income					
	r (loss) from sales of assets other than					
	ory			18	15,727	
	ome or (loss) from special events profit or (loss) from sales of inventory					
	evenue a					
с						
d						
	al Add columns (b), (d), and (e)				33,896	
Total.	Add line 12, columns (b), (d), and (e)			13	3	33,896
(Caa						
	rksheet in line 13 instructions to verify calcul	ations)	ment of Exem			
art XVI	rksheet in line 13 instructions to verify calcules Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ations) e Accomplish income is reporte	ed in column (e) o	pt Purposes of Part XVI-A contribut	ted importantly to	
art XVI ine No.	rksheet in line 13 instructions to verify calcular Relationship of Activities to th Explain below how each activity for which	ations) e Accomplish income is reporte	ed in column (e) o	pt Purposes of Part XVI-A contribut	ted importantly to	
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orm 9	90-PF (2017)											Pa	ge 13
Part	XVII	Information Re Exempt Organi		ransf	ers To a	ind Trans	actio	ns and I	Relatio	nships With No	oncharit	able		
		ganization directly or in Code (other than sectio									tion 501		Yes	No
a Tra	nsfers	rom the reporting foun	dation to a r	noncha	rıtable exe	empt organiz	zation	of						
(1) Cash									1a(1)		No			
(2)	Other	assets										1a(2)		No
b Oth	er tran	sactions												
(1)	Sales	of assets to a nonchar	ıtable exemp	t orga	nızatıon.							1b(1)		No
(2)	Purch	ases of assets from a r	noncharıtable	exem	pt organız	ation						1b(2)		No
(3)	Renta	il of facilities, equipmer	nt, or other a	ssets.								1b(3)		No
(4)	Reim	oursement arrangemen	its									1b(4)		No
		or loan guarantees.										1b(5)		No
(6)	Perfor	mance of services or m	embership o	r fundr	aising sol	icitations.						1b(6)		No
	_	facilities, equipment, neer to any of the above			-							1 c		No
of t	he goo ny trar	ds, other assets, or ser saction or sharing arra (b) Amount involved	vices given b ingement, sh	y the i	reporting f column (d	foundation :	If the f of the	oundatior goods, ot	n receive her asse	d less than fair ma	arket valu eived	e	ngemen	nts
	_													
des	cribed	ndation directly or indirectly or indirectly of the complete the following some (a) Name of organization	Code (other		section 50		ın sect	ion 527? .	_			Yes	✓	No
		(2) Hame of organization			()	., .,pc or org				(S) Description	or relacte			
Sign Here	of m whic	er penalties of perjury, y knowledge and belief h preparer has any kno *****	, it is true, c				ation o	of prepare			based on May th return	all infor ne IRS di	mation	n of
	9	Signature of officer or t	rustee	1		Date		, , , , , , , , , , , , , , , , , , ,	itle	T		nstr)? 🖣	✓ _{Yes}	□ _{No}
Paid		Print/Type preparer's Raymond M Leich	s name	Prepa	arer's Sign	nature		Date 2018-	05-15	Check if self- employed ▶ □	PTIN	P01036	465	
Dron	arer			1				L		I	-			

Preparer Use Only

Firm's name ► LEICH & TEELING CPA PA Fırm's EIN ▶ Firm's address ► 704 W BAY STREET Phone no (813) 251-6662 TAMPA, FL 33606

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FRIEDREICH'S ATAXIA RESEARCH MEDICAL RESEARCH 148,800 ALLIANCE 102 PICERING WAY SUITE 200 EXTON, PA 19341 BERKELEY PREPARATORY SCHOOL SCHOLARSHIP ENDOWMENT & 240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

4811 KELLY ROAD TAMPA, FL 33615	FINANCIAL AID	240
PAUL SMITHS COLLEGEROUTE 86 30 PO BOX 265 PAUL SMITHS, NY 12970	GENERAL SUPPORT	5,000
ADK ACTIONPO BOX 655 SARANAC LAKE, NY 12944	CONTRIBUTION	125
CANINE COMPANIONS FOR INDEPENDENCE PO BOX 446 SANTA ROSA, CA 95402	CONTRIBUTION	750

Total . 3a 203,555

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NATIONAL PEDIATRIC CANCER CONTRIBUTION 5.000 **FOUNDATION** 5550 WEST EXECUTIVE DRIVE SUITE 300 TAMPA, FL 33609 FLORIDA SHERIFFS ASSOCIATION CONTRIBUTION 25 2617 MAHAN DRIVE TALLAHASSEE, FL 32317 40 350

WOMANADE OF TAMPAPO BOX 340736 TAMPA, FL 336940736		CONTRIBUTION	4
MANATEE COMMUNITY FOUNDATION 2820 MANATEE AVE W BRADENTON, FL 34205		CONTRIBUTION	35

CONTRIBUTION METROPOLITAN MINISTRIES

2002 N FLORIDA AVE TAMPA, FL 33602

500

203,555

За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year LIFT INC1620 I STREET NW CONTRIBUTION 750 **SUITE 820** WASHINGTON, DC 20006 STARTING RIGHT NOW CONTRIBUTION 750 16057 TAMPA PALMS BLVD SUITE 231 TAMBA EL 22647

TAMPA, FL 33047			
ARTHRITIS FOUNDATION 3816 W LINEBAUGH AVE 303 TAMPA, FL 33618		CONTRIBUTION	250
CHAMPIONS FOR CHILDREN		CONTRIBUTION	200

303 TAMPA, FL 33618			
CHAMPIONS FOR CHILDREN 3108 W AZEELE ST TAMPA, FL 33609		CONTRIBUTION	

TAMPA, FL 33010			
CHAMPIONS FOR CHILDREN 3108 W AZEELE ST TAMPA, FL 33609		CONTRIBUTION	

CHAMPIONS FOR CHILDREN 3108 W AZEELE ST TAMPA, FL 33609		CONTRIBUTION	200
FAITH LIFE CHURCH2702 E BEARSS AVE		CONTRIBUTION	250

TAMPA, FL 33609			
FAITH LIFE CHURCH2702 E BEARSS AVE TAMPA, FL 33613		CONTRIBUTION	:

Total		•	203 555
FAITH LIFE CHURCH2702 E BEARSS AVE TAMPA, FL 33613		CONTRIBUTION	2

3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Name and address (home or business)	or substantial contributor	T despressive		
a Paid during the year				
FDNY 3433035 MORSE BLVD			CONTRIBUTION	

FDNY 3433035 MORSE BLVD VILLAGES, FL 33606		CONTRIBUTION	100
FHS SOCIETY450 BEDFORD STREET LEXINGTON, MA 02420		CONTRIBUTION	200

LEXINGTON, MA U242U			
HOPE WELL CANCER SUPPORT 10628 FALLS RD LUTHERVILLE, MD 21093		CONTRIBUTION	250
IDRE TAMPA BAY9600 KOGER BLVD N		CONTRIBUTION	100

LUTHERVILLE, MD 21093			
JDRF TAMPA BAY9600 KOGER BLVD N 103 ST PETERSBURG, FL 33702		CONTRIBUTION	100
MORNING STAR SCHOOL TENNIS		CONTRIBUTION	500

103 ST PETERSBURG, FL 33702			
MORNING STAR SCHOOL TENNIS CLASSIC 210 E LINEBAUGH AVE		CONTRIBUTION	500

MORNING STAR SCHOOL TENNIS CLASSIC 210 E LINEBAUGH AVE TAMPA, FL 33612		CONTRIBUTION	500

CLASSIC 210 E LINEBAUGH AVE TAMPA, FL 33612		
Total	 	 203,555

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NATIONAL FOOTBALL FOUNDATION CONTRIBUTION 25,000 433 E LAS COLINAS BLVD **SUITE 1130** IRVING, TX 75039 25 NORTH COUNTRY LIFE FLIGHT CONTRIBUTION HELMS MUELLER RD SARANAC LAKE, NY 12983

PACE CENTER FOR GIRLS 1933 E HILLSBOROUGH AVE SUITE 300 TAMPA, FL 33610		CONTRIBUTION	200
SPECIAL OPERATION WARRIOR 1137 MARBELLA PLAZA DR TAMPA, FL 33619		CONTRIBUTION	250
	I .	l .	

SPECIAL OPERATION WARRIOR 1137 MARBELLA PLAZA DR TAMPA, FL 33619		CONTRIBUTION	250
TAMPA BAY 100 DUCKS UNLIMITED 1 WATERFOWL WAY MEMPHIS, TN 33606		CONTRIBUTION	450

1137 MARBELLA PLAZA DR TAMPA, FL 33619			
TAMPA BAY 100 DUCKS UNLIMITED 1 WATERFOWL WAY MEMPHIS. TN 33606		CONTRIBUTION	

Total . . 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AMERICAN HEART ASSOCIATION CONTRIBUTION 250 700 S FLORIDA AVE TAMPA, FL 33602 TOMMY'S THE BABY CHARITY CONTRIBUTION 1.000

3 LAURENCE POUNTNEY HILL LONDON EC4R 0BB UK			2,000
UNC LINEBERGER450 WEST DR CHAPEL HILL, NC 27599		CONTRIBUTION	1,000

UNC LINEBERGER450 WEST DR CHAPEL HILL, NC 27599		CONTRIBUTION	1,000
USF FOUNDATION4202 E FOWLER AVE ALC100 TAMPA, FL 33620		CONTRIBUTION	10,000
WHEELCHAIRS 4 KIDS		CONTRIBUTION	1,000

ALC100 TAMPA, FL 33620			,
WHEELCHAIRS 4 KIDS 1976 S PINELLAS AVE		CONTRIBUTION	1,0
TADDON CODINGS EL 34680			

TAMPA, FL 33620			
WHEELCHAIRS 4 KIDS 1976 S PINELLAS AVE TARPON SPRINGS, FL 34689		CONTRIBUTION	1,00

		_	
TARPON SPRINGS, FL 34689			
1976 S PINELLAS AVE		CONTRIBUTION	1,
WHEELCHAIRS 4 KIDS		CONTRIBUTION	1

1976 S PINELLAS AVE TARPON SPRINGS, FL 34689			
Total	 	• • • • • • • •	203,555

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation If recipient is an individual, Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

	or substantial contributor		
a Paid during the year			
WISH FARMS100 STEARNS ST		CONTRIBUTION	

or substantial contributor

PLANT CITY, FL 33563		l
Total	 	 203,555

200

,		
Total	 	203

efile GRAPHIC print - DO NOT PI	ROCESS As	Filed Data -		DI	LN: 93491135043088		
TY 2017 Accounting Fees Schedule							
	Name: THE	E AVERY FA	AMILY FOUNDA	ATION INC			
	EIN: 20-	-8091168					
Accounting Fees Schedule	Accounting Fees Schedule						
Category	Amount	_	Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

1,050

1,050

TAX RETURN PREPARATION

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491135043088 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. TY 2017 Depreciation Schedule

Name: THE AVERY FAMILY FOUNDATION INC EIN: 20-8091168

TY 2017 In	vestments Corporate	e Stock Sche	dule	

Name: THE AVERY FAMILY FOUNDATION INC

Name of Stoc	k	End of Year Book
EIN:	20-8091168	
Hamer	THE AVERT TAPILET TOOK	DATE THE

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

SUNTRUST MUTUAL FUNDS

178,954

Value

End of Year Fair **Market Value**

195,549

DLN: 93491135043088

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491135043088
TY 2017 Investments - Other	Schedule		
Name:	THE AVERY FAMII	Y FOUNDATION INC	
EIN:	20-8091168		
Investments Other Schedule 2			

Investments Other Schedule 2						
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value			
BONDS		126,446	124,536			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491135043088				
TY 2017 Other Decreases Schedule							
Name:	THE AVERY FA	MILY FOUNDATION INC					
EIN:	20-8091168						
De	escription		Amount				

VALUATION ALLOWANCE REVERSAL

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	I: 93491135043088			
TY 2017 Other Expenses Schedule							
No	THE AMERICAN	471 V FOUND 4770	NI TNIC				
Name:	THE AVERY FAM	1ILY FOUNDATIO	N INC				
EIN:	20-8091168						
Other Expenses Schedule							
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
ANNUAL REPORT FILING	61						

DLN: 93491135043088

Name: THE AVERY FAMILY FOUNDATION INC

EIN: 20-8091168

LIN. 2

Other Income Schedule						
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income			
CAPITAL GAIN DISTRIBUTIONS						
NON DIVIDEND DISTRIBUTIONS						
CANCELLED CHECK FROM PREVIOUS YEAR						

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491135043088
TY 2017 Other Increases Sche	edule	
Name:	THE AVERY FAMILY FOUND	ATION INC
EIN:	20-8091168	
De	escription	Amount
BOOK DIFFERENCES		315

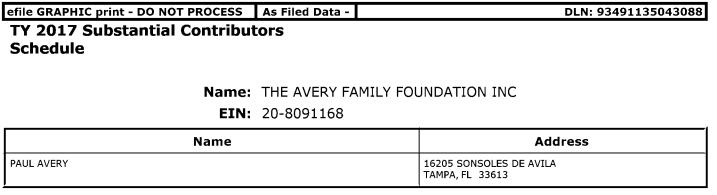
Category	Amount	Net Investment	Adjusted Net	Dishursements			
EIN: 20-8091168							
Name: THE AVERY FAMILY FOUNDATION INC							
TY 2017 Other Professional Fees Schedule							
efile GRAPHIC print - DO NOT PROCES	S As Filed Data	-	DLN	N: 93491135043088			

<u> </u>		,		
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

4,336

4,336

INVESTMENT FEES



efile GRAPHIC print - DO NOT PROCE	ESS As Filed Data	-	DLN	N: 93491135043088
TY 2017 Taxes Schedule				
Name: THE AVERY FAMILY FOUNDATION INC				
EIN: 20-8091168				
Category	Amount	Net Investment	Adjusted Net	Disbursements
	7	Income	Income	for Charitable
				Purposes
FORIEGN TAXES	332	332	332	

326

FEDERAL TAXES