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2017

OMB No 1545-0052

## **Return of Private Foundation**

Form 990-PF

Department of the Treasury

Internal Revenue Service

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 <a href="www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Open to Public Inspection

of amounts in churrans (b), (c), and (c) may not necessarily each the amounts in columns (b), (c), and (c) may not necessarily each the amounts in columns (a) (see assertiones)  1	For	caler	ndar year 2017, or tax year beginning 01-01-20	017 , aı	nd er	nding 12-31-	2017		
Discretions number (see matrix cons.)						A Employer id	entification numbe	r	
The MARKADA PLACE SUITE on Country and IDP of favour potal code Countries, the service country, and IDP of favour potal code Countries, the service country, and IDP of favour potal code Countries, the service country and IDP of favour potal code Countries, the service countries countries, the service countries coun						31-1523574			
Cury or term, justice are provinces, cautery, and 2/th or foreign prozest acide  Cury oversystems application or provinces cautery, and 2/th or foreign protected by the country and the provinces of the provinces of the country and the provinces of the country and the co				) Room/suite		<b>B</b> Telephone nu	mber (see ınstructıo	ns)	
Scheck all that apply   Insta return   Instal						(614) 253-4455			
The composition of the part   Address change   Name change   Pame chan					<b>C</b> If exemption	application is pendin	g, check here		
Check type of organization   Section 591(c)(3) exempt private foundation	<b>G</b> Ch	neck al	l that apply $igsqcup$ Initial return $igsqcup$ Initial return of a	former public charity		<b>D 1.</b> Foreign or	ganizations, check h	ere 🕨 🦳	
Circle ktype of organization									
## Check type of organization   Mileschion Stylic (1) exemple private founcation   Section 547(1) nonexempter (1) nonexempter								· _	
Farr market value of all assets at end of lower for the property of the 16 set 11, col (c). Inte 16 set 12, col (c). Inte 16 set 13, 14, 986, 970   Cabridge (speech)   Cabridge (speech									
Adjusted in the common of t					ıal	E If the founds	ation is in a 60-mont	h tormination —	
or amounts in columns (b), (c), and (d) may not necessarily equate the amounts in columns (b), (c), and (d) may not necessarily equate the amounts in columns (d) few instructions)  1	of y	year <i>(f</i>	from Part II, col (c),  \$ 14.986.970		ai				
of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (a) (see instructions)    1	Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and				(d) Disbursements	
Check				expenses per	(ь)			for charitable purposes (cash basis only)	
2 Check ▶		1		463,799					
3   Interest on savings and temporary cash investments		2	Check ▶ ☐ if the foundation is <b>not</b> required to attach						
1000000000000000000000000000000000000		2		99 558		99 558			
b Net rental income or (loss) 6						•			
100   100		5a	Gross rents						
Description		ь	Net rental income or (loss)	-					
Net short-term capital gain	ne	6a	Net gain or (loss) from sale of assets not on line 10	474,872					
Net short-term capital gain	ven	b							
9 Income modifications	Re	7		2		474,872			
10a   Gross sales less returns and allowances		8	Net short-term capital gain						
b Less Cost of goods sold		9	Income modifications						
C   Gross profit or (loss) (attach schedule)				<u> </u>					
11   Other income (attach schedule)   12   Total. Add lines 1 through 11   1,311,991   848,192   1   1   1   1   1   1   1   1   1				<u> </u>					
12 Total. Add lines 1 through 11									
13   Compensation of officers, directors, trustees, etc   0   0   0     14   Other employee salaries and wages       15   Pension plans, employee benefits       16a   Legal fees (attach schedule)       b   Accounting fees (attach schedule)       c   Other professional fees (attach schedule)       17   Interest       18   Taxes (attach schedule) (see instructions)       19   Depreciation (attach schedule) and depletion			,	1.311.991		848.192			
14 Other employee salaries and wages   15   Pension plans, employee benefits   16a   Legal fees (attach schedule)   16a   Legal fees (attach schedule)   16a   Legal fees (attach schedule)   17   Interest   18   Taxes (attach schedule)   19   10,871   2,831   2,831   2,831   2,831   2,831   2,			<u> </u>						
16a   Legal fees (attach schedule)			Other employee salaries and wages						
26 Total expenses and disbursements. Add lines 24 and 25  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)	95	15	Pension plans, employee benefits						
26 Total expenses and disbursements. Add lines 24 and 25  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)	Suá	16a	-						
26 Total expenses and disbursements. Add lines 24 and 25  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)	<del>x</del>	b	Accounting fees (attach schedule)	4,350		0		(	
26 Total expenses and disbursements. Add lines 24 and 25  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)	ė.	С	Other professional fees (attach schedule)	68,220		68,220		(	
26 Total expenses and disbursements. Add lines 24 and 25  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)	atıv		Interest	<b>20.1</b>					
26 Total expenses and disbursements. Add lines 24 and 25  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)	ıstı		, , , , , , , , , , , , , , , , , , , ,	10,8/1		2,831		(	
26 Total expenses and disbursements. Add lines 24 and 25  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)	Ē								
26 Total expenses and disbursements. Add lines 24 and 25  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)	Ad		• •						
26 Total expenses and disbursements. Add lines 24 and 25  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)	puc								
26 Total expenses and disbursements. Add lines 24 and 25  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)	jg.	23		1,482		552		(	
26 Total expenses and disbursements. Add lines 24 and 25  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)	atı	24	Total operating and administrative expenses.						
26 Total expenses and disbursements. Add lines 24 and 25  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)  c Adjusted net income(if negative, enter -0-)	<u>pe</u>		•			71,603		(	
25	ں			965,723				965,723	
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income(if negative, enter -0-)		26	25	1,050,646		71,603		965,723	
disbursements b Net investment income (if negative, enter -0-) c Adjusted net income(if negative, enter -0-)									
c Adjusted net income(if negative, enter -0-)		а		261,345					
		b	· -			776,589			
For Paperwork Reduction Act Notice, see instructions. Cat No 11289X Form 990-PF (2								m <b>990-PF</b> (2017	

	2	Savings and temporary cash investments	887,511	570,252	570,252
	3	Accounts receivable ▶			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ►			_
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less allowance for doubtful accounts ▶			
^	8	Inventories for sale or use			
ers	9	Prepaid expenses and deferred charges			
HS	10a	Investments—U S and state government obligations (attach schedule)	547,769	532,717	515,442
	ь	Investments—corporate stock (attach schedule)	7,795,796	8,327,117	12,205,408
	С	Investments—corporate bonds (attach schedule)	632,878	<b>%</b> 679,330	662,334
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	1,008,534	1,033,534	1,033,534
	14	Land, buildings, and equipment basis ▶		_	
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe )			
	16	Total assets (to be completed by all filers—see the			

<u>چ</u>

11,142,950

5,500

5,500

11,137,450

11.137.450 11,142,950

1

2

3

4

5

10,872,488

11,137,452

11,137,450 Form **990-PF** (2017)

261,345

3,619

0

10,872,488

10,872,488

10,872,488

column (a), line 30 (must agree with end-

14,986,970

## 10,872,488 instructions Also, see page 1, item I) 17 Accounts payable and accrued expenses .

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

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

Analysis of Changes in Net Assets or Fund Balances

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

Total net assets or fund balances (see instructions) . . .

Capital stock, trust principal, or current funds . . .

Total net assets or fund balances at beginning of year—Part II,

Total liabilities (add lines 17 through 22) .

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) ▶

18

19

20

21

22

23

24 25

26

27

28

29

30

31

Part III

2

3

4

Liabilities

Net Assets or Fund Balances

Grants payable. . .

Other liabilities (describe .

Temporarily restricted

Permanently restricted

Deferred revenue .

	<b>(a)</b> the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		How acquired P—Purchase D—Donation	Date acquired (mo , day, yr )	Date sold (mo , day, yr )
1aSee Additional Data Table	e				
b					
С					
d					
e					
(e) Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain d	h) or (loss) i) minus (g)
a See Additional Data Table	` '	рішо ехр		(0) pids (1	<i>y</i>
b					
c					
d					
e					
	showing gain in column (h) and ow	ned by the foundation	on 12/31/69		71)
·	(i)	i	(k)		( <b>I)</b> h) gain minus
(i) F M V as of 12/31/69	Adjusted basis as of 12/31/69	Excess	s of col(i) l(j), if any	col (k), but not	less than -0-) <b>or</b> om col (h))
a See Additional Data Table	e				
b					
c					
d					
e					
	gain or (loss) as defined in sections : rt I, line 8, column (c) (see instructi	. ,	Part I, line 7	3	474,872
Part V Qualification U	Jnder Section 4940(e) for Re	educed Tax on Net	Investment In	come	
	rivate foundations subject to the sec				
If section 4940(d)(2) applies, le	eave this part blank				
Was the foundation liable for th	e section 4942 tax on the distributa ot qualify under section 4940(e) Do		· ·	?	es 🗹 No
1 Enter the appropriate am	nount in each column for each year,	see instructions before	e making any entrie	S	
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab	ole-use assets	<b>(d)</b> Distribution rat (col (b) divided by o	
2016	354,350		12,187,743		0 029074
2015	952,604		12,763,410		0 074636
2014	699,081		8,748,059		0 079913
2013	526,550		9,994,840		0 052682
2012	691,627		9,753,700		0 070909
2 Total of line 1, column (d	•		2		0 307214
3	for the 5-year base period—divide	,			0 061443
	idation has been in existence if less ncharitable-use assets for 2017 fron		3 4		12,475,082
5 Multiply line 4 by line 3	ncharitable-use assets for 2017 from	•	5		766,506
	ent income (1% of Part I, line 27b)		6		7,766
	· · · · · · · · · · · · · · · ·		· · · ·   <del>6</del>		774,272
	ons from Part XII, line 4 ,				965,723
- Lincer qualitying distributi	ons nonrait All, inter ,		0	1	JUJ,/2J

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI

instructions

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?.

7b

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

1 List all officers, directors, trustee	es, foundation 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
SUSAN DIAMOND	PRESIDENT	0	0	C
9701 COLLINS AVE 1803 S	1 00		_	
BAL HARBOR, FL 33154				
JON DIAMOND	VICE-PRESIDENT	0	0	C
9701 COLLINS AVE 1803 S	0 00			
BAL HARBOR, FL 33154				
ANN DESHE	SECRETARY	0	0	0
16047 COLLINS AVE 1104	0 00			
SUNNY ISLES BEACH, FL 33160				
2 Compensation of five highest-pa	id employees (other than t	hose included on line 1	l—see instructions). If nor	ne, enter "NONE."
(a) Name and address of each employee pa more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE			'	
NONE				
		<u>                                     </u>		
	$\neg$			
			+	
	$\longrightarrow$			
		<u> </u>		
Total number of other employees paid over	er \$50,000			0
3 Five highest-paid independent co	*			
(a) Name and address of each persor	n paid more than \$50,000	( <b>b)</b> Typ	e of service	(c) Compensation
NONE				
				-
		-		
		┨		
Total number of others receiving over \$50	000 for professional services			(
List the foundation's four largest direct charitable organizations and other beneficiaries served, con	activities during the tax year Incl	ude relevant statistical inform	nation such as the number of	Expenses
	rerences convened, research paper	s produced, etc		
1				
3				
-				
4				
_				
	_			
Part IX-B Summary of Program	n-Related Investments	(see instructions)		
Describe the two largest program-related inve	estments made by the foundation d	luring the tax year on lines 1	and 2	Amount
1	,			
<u> </u>				
2				
All other program-related investments	See instructions			
3				
Tabal Addings 4 through 2				
Total. Add lines 1 through 3 .				
				Form <b>990-PF</b> (2017)

1a

1b

2

3a 3h

4

5

965,723

965.723

7,766

957.957

Form **990-PF** (2017)

Part XII

1

2

3

4

5

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

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

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. . . . . . . . . .

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

615,988

615.988

Form 990-PF (2017)

0

2017

Part XIII	ī

**b** Total for prior years

a From 2012. . . . .

d From 2015. . . . .

e From 2016. . . . .

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

\ <b>-</b>	,		
Ι	Undistributed Income (see instruc	tions)	
			7

14,420

269 276

369.285

Distributable amount for 2017 from Part XI, line 7

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

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

(If an amount appears in column (d), the

6 Enter the net total of each column as

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) . . .

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. .

Subtract lines 7 and 8 from line 6a . . . . . .

indicated below:

4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ 965,723
 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).

 cions)	
(a)	
Corpus	

652.981

349.735

1,002,716

1,002,716

14,420 269,276

369.285

349.735

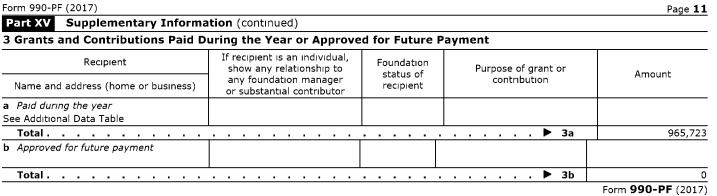
0

(b)

Years prior to 2016

(c)

2016



ter gross	amounts unless otherwise indicated	Unrelated bu	ısıness ıncome	Excluded by section	512, 513, or 514	(e) Related or exempt
_	service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions )
е						
_	and contracts from government agencies					
Intere	st on savings and temporary cash			14	99,558	
	ds and interest from securities			14	273,762	
	tal income or (loss) from real estate					
	financed property ebt-financed property					
	ntal income or (loss) from personal property					
	nvestment income					
Gain o	r (loss) from sales of assets other than					
	ory			18	474,872	
	ome or (loss) from special events profit or (loss) from sales of inventory					
	evenue a					
b						
e			0		848.192	
e Subtota Total.	al Add columns (b), (d), and (e)		0		848,192 <b>3</b>	
e Subtota Total. (See wo		lations )		13	848,192	848,192
e Subtota Total. (See wo	Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul	lations ) e Accomplish income is report		pt Purposes F Part XVI-A contribut	Bted importantly to	
e Subtota Total. / (See wo art XVI ine No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is report		pt Purposes F Part XVI-A contribut	Bted importantly to	
e Subtotal (See wo art XVI ine No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is report		pt Purposes F Part XVI-A contribut	Bted importantly to	
e Subtota Total. / (See wo art XVI ine No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is report		pt Purposes F Part XVI-A contribut	Bted importantly to	
e Subtota Total. / (See wo art XVI ine No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is report		pt Purposes F Part XVI-A contribut	Bted importantly to	
e Subtotal (See wo art XVI ine No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is report		pt Purposes F Part XVI-A contribut	Bted importantly to	
e Subtota Total. / (See wo art XVI ine No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is report		pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. , (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is report		pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. , (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is report		pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. , (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is report		pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. , (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is report		pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. , (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is report		pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. , (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is report		pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is report		pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. , (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is report		pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is report		pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. , (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is report		pt Purposes F Part XVI-A contribut	Bted importantly to	
eSubtota Total. (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is report		pt Purposes F Part XVI-A contribut	Bted importantly to	
e Subtota Total. (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is report		pt Purposes F Part XVI-A contribut	Bted importantly to	
e Subtota Total. / (See wo art XVI ine No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations ) e Accomplish income is report		pt Purposes F Part XVI-A contribut	Bted importantly to	

orm 99	0-PF (2017)						age <b>1</b> 3
Part :	Information Re Exempt Organi		fers To and Transac	tions and Relationships	With Noncharitable	_	
	the organization directly or in of the Code (other than section					Yes	No
<b>a</b> Tran	sfers from the reporting foun	idation to a noncha	arıtable exempt organızat	ion of			
(1)	Cash				1a(1	)	No
(2)	Other assets				1a(2	)	No
<b>b</b> Othe	er transactions						
(1)	Sales of assets to a nonchar	ıtable exempt orga	anization		<u>1b(1</u>	)	No
(2)	Purchases of assets from a r	oncharitable exem	npt organization		<u>1b(2</u>	-	No
	Rental of facilities, equipmen	·			<u>1b(3</u>	+	No
	Reimbursement arrangemen				<u>1b(4</u>	_	No
	Loans or loan guarantees.				1b(5	_	No
٠.	Performance of services or m				<u>1b(6</u>	)	No
	ring of facilities, equipment, r e answer to any of the above	-					No
a) Line	No <b>(b)</b> Amount involved	(c) Name of nonch	arıtable exempt organızatıon	(d) Description of transfers	s, transactions, and sharing arr	angeme	nts
desc	ne foundation directly or indirectly or indirectly or indirectly of the es," complete the following s	Code (other than		section 527?	_	. 🗸	No
		, it is true, correct		including accompanying sche on of preparer (other than ta			
Sign Here	*****		2018-11-15	*****	May the IRS return with the prep		
	Signature of officer or t	rustee	Date	Title	below	<b>7</b>	п.,

Paid

Print/Type preparer's name Preparer's Signature Date PTIN Check if self-P00100849 employed ▶ □ RICHARD E ARY 2018-11-14 **Preparer** Firm's name ► ARY ROEPCKE MULCHAEY PC Firm's EIN ▶52-2370901 **Use Only** Firm's address ► TWO MIRANOVA PLACE SUITE 600

COLUMBUS, OH 43215

Form **990-PF** (2017)

Phone no (614) 486-3600

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation Р WELLS FARGO FIRST QUARTER - SHORT TERM 2017-01-01 2017-12-31 WELLS FARGO SECOND QUARTER - SHORT TERM Р 2017-01-01 2017-12-31 Р 2017-01-01 2017-12-31 WELLS FARGO THIRD QUARTER - SHORT TERM Р 2017-12-31 WELLS FARGO FOURTH QUARTER - SHORT TERM 2017-01-01 Ρ 2017-12-31 WELLS FARGO FIRST QUARTER - LONG TERM 2017-01-01 WELLS FARGO SECOND QUARTER - LONG TERM Ρ 2017-01-01 2017-12-31 WELLS FARGO THIRD QUARTER - LONG TERM Ρ 2017-01-01 2017-12-31 Р 2017-12-31 WELLS FARGO FOURTH QUARTER - LONG TERM 2017-01-01 CAPITAL GAINS DIVIDENDS Ρ Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (or allowable) (h) (e) plus (f) minus (g) (f) (g) plus expense of sale 4,617 2,327 2,290 2,838 2,629 209 4,439 4,257 182 1,062 1,231 -169 49,673 49,927 -254 153,511 142,391 11,120 731,925 433,666 298,259 224,915 98,629 126,286 36.949 36,949 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 2,290 209 182 -169 -254 11,120 298,259 126,286 36,949

I	Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the tota
(	contributions received by the foundation before the close of any tax year (but only if they have contributed more
1	than \$5,000).

SUSAN DIAMOND

JON DIAMOND

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

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

a Paid during the year

3a

a raid darning the year				
AMERICAN FRIENDS OF GALILEE MEDICAL CENTER PO BOX 789856 PHILADELPHIA, PA 191789856	NONE	501(C)3	GENERAL OPERATING	1,800

1112 (522) 112 (71) ( 232) 6366				
AMERICAN FRIENDS OF MA'AGALIM 4101 PINE TREE DRIVE UNIT 509 MIAMI BEACH, FL 33140	NONE	501(C)3	GENERAL OPERATING	60,000
AMERICAN ISRAEL EDUCATION FOUNDATION	NONE	501(C)3	GENERAL OPERATING	125,000

MIAMI BEACH, FL 33140				
AMERICAN ISRAEL EDUCATION FOUNDATION 251 H STREET NW WASHINGTON, DC 20001	NONE	501(C)3	GENERAL OPERATING	125,000

Total				965,723
AMERICAN ISRAEL EDUCATION FOUNDATION 251 H STREET NW WASHINGTON, DC 20001	NONE	501(C)3	GENERAL OPERATING	125,0
AMEDICAN ICDAEL EDUCATION	NONE	E01/C\2	CENERAL ODERATING	125.0

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation 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 JEWISH COMMITTEE NONE 501(C)3 GENERAL OPERATING 625 165 EAST 56TH STREET NEW YORK, NY 100222709

	1			
ATH JACK ROTH 5K ROCK N' RUNWALK 250 S CASSINGHAM ROAD BEXLEY, OH 43209	NONE	501(C)3	GENERAL OPERATING	135
BREAST CANCER RESEARCH FOUNDATION 28 WEST 44TH STREET SUITE 609 NEW YORK, NY 10036	NONE	501(C)3	GENERAL OPERATING	18,000

За

965,723

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

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

a Paid during the year				
CANCER SUPPORT COMMUNITY 8609 SOUTH DIXIE HIGHWAY MIAMI, FL 33143	NONE	501(C)3	GENERAL OPERATING	1,000

MIAMI, FL 33143				
CHABAD COLUMBUS 6220 EAST DUBLIN GRANVILLE ROAD NEW ALBANY, OH 430549381	NONE	501(C)3	GENERAL OPERATING	25,000
1		1		

6220 EAST DUBLIN GRANVILLE ROAD NEW ALBANY, OH 430549381	NONE	501(C)3	GENERAL OPERATING	25,000
CHILD ENRICHMENT CENTER 1480 JOHN FITCH HIGHWAY FITCHBURG, MA 01420	NONE	501(C)3	GENERAL OPERATING	1,835

	NEW ALBANY, OH 430549381				
	CHILD ENRICHMENT CENTER 1480 JOHN FITCH HIGHWAY FITCHBURG, MA 01420	NONE	501(C)3	GENERAL OPERATING	1,835
1				-	

CHILD ENRICHMENT CENTER 1480 JOHN FITCH HIGHWAY FITCHBURG, MA 01420	NONE	501(C)3	GENERAL OPERATING	1,835
Total				965,723

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 CLEVELAND CLINIC PHILANTHROPY NONE 501(C)3 GENERAL OPERATING 500 9500 EUCLID AVENUE

CLEVELAND, OH 44195				
EB RESEARCH PARTNERSHIP 132 EAST 43RD STREET SUITE 432 NEW YORK, NY 10017	NONE	501(C)3	GENERAL OPERATING	5,000
FRIENDS OF CHABAD OF JAPAN	NONE	501(C)3	GENERAL OPERATING	500

132 EAST 43RD STREET SUITE 432 NEW YORK, NY 10017	NONE	301(0)3	GENERAL OPERATING	3,000
FRIENDS OF CHABAD OF JAPAN 1-25-18 SANNO OTAKU, TOKYO JA	NONE	501(C)3	GENERAL OPERATING	500

					065 733
	FRIENDS OF CHABAD OF JAPAN 1-25-18 SANNO OTAKU, TOKYO JA	NONE	501(C)3	GENERAL OPERATING	500
	NEW YORK, NY 10017				

FRIENDS OF CHABAD OF JAPAN 1-25-18 SANNO OTAKU, TOKYO JA	NONE	501(C)3	GENERAL OPERATING	5
Total				965.723

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

Name and address (home or business)

3a

Traine and dual cost (nonce or Business)	or substantial contributor			
a Paid during the year				
FRIENDS OF ISRAEL DEFENSE FORCES 2040 NE 163RD STREET	NONE	501(C)3	GENERAL OPERATING	10,000

recipient

GREATER MIAMI JEWISH FEDERATION 4200 BISCAYNE BLVD MIAMI, FL 33137  NONE  501(C)3  GENERAL OPERATING  200,000	MIAMI, FL 33162				
	4200 BISCAYNE BLVD	NONE	501(C)3	GENERAL OPERATING	200,000

4200 BISCAYNE BLVD MIAMI, FL 33137		, ,		·
HASIDAHPO BOX 9531 BERKELEY, CA 94709	NONE	501(C)3	GENERAL OPERATING	25,000

MIAMI, FL 33137				
HASIDAHPO BOX 9531 BERKELEY, CA 94709	NONE	501(C)3	GENERAL OPERATING	25,000
Total				965,723

HASIDAHPO BOX 9531 NONE 501(C)3 GENERAL OPERATING BERKELEY, CA 94709	MIAMI, FL 33137				
		NONE	501(C)3	GENERAL OPERATING	25

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

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

<b>3</b> /				
HILLEL INTERNATIONAL 800 EIGHTH STREET NW WASHINGTON, DC 200013724	NONE	501(C)3	GENERAL OPERATING	100,000
JEWISH FEDERATION OF COLUMBUS	NONE	501(C)3	GENERAL OPERATING	362,928

WASHINGTON, DC 200013724				
JEWISH FEDERATION OF COLUMBUS 1175 COLLEGE AVE COLUMBUS, OH 43209	NONE	501(C)3	GENERAL OPERATING	362,928
JEWISH NATIONAL FUND	NONE	501(C)3	GENERAL OPERATING	10,000

COLUMBUS, OH 43209				
JEWISH NATIONAL FUND 42 E 69TH STREET NEW YORK, NY 10021	NONE	501(C)3	GENERAL OPERATING	10,000

JEWISH NATIONAL FUND 42 E 69TH STREET NEW YORK, NY 10021	NONE	501(C)3	GENERAL OPERATING	10,000
Total			•	965 723

Total		<b>•</b>	965 723
42 E 69TH STREET NEW YORK, NY 10021			

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				
MAIN STREET SYNAGOGUE 2375 EAST MAIN STREET COLUMBUS, OH 43209	NONE	501(C)3	GENERAL OPERATING	1,200
MIAMI CHILDREN'S HEALTH	NONE	501(C)3	GENERAL OPERATING	50

COLO 11003, O11 43203				
MIAMI CHILDREN'S HEALTH	NONE	501(C)3	GENERAL OPERATING	
3100 SW 62 AVE				
MIAMI, FL 33155				

За

MIAMI CHILDREN'S HEALTH 3100 SW 62 AVE MIAMI, FL 33155	NONE	501(C)3	GENERAL OPERATING	

MIAMI, FL 33155				
PELOTONIA 351 WEST NATIONWIDE BLVD	NONE	501(C)3	GENERAL OPERATING	100

· · · · · · · · · · · · · · · · · · ·				
PELOTONIA 351 WEST NATIONWIDE BLVD COLUMBUS, OH 43215	NONE	501(C)3	GENERAL OPERATING	100

351 WEST NATIONWIDE BLVD COLUMBUS, OH 43215				
PELOTONIA	NONE	501(C)3	GENERAL OPERATING	10

COLUMBUS, OH 43215		
Total	 	 965,723

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)

a Paid during the year				
STREET ART MA8940 SW 60TH AVENUE	NONE	501(C)3	GENERAL OPERATING	

or substantial contributor

3a

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

MIAMI, FL 33136				
THE WASHINGTON INSTITUTE OF NEA 1111 19TH STREET NW STE 500	NONE	501(C)3	GENERAL OPERATING	

VOLING TORAGE OF BALLHARBOUR	NONE	E01/C\2	CENERAL OPERATING	
THE WASHINGTON INSTITUTE OF NEA 1111 19TH STREET NW STE 500 WASHINGTON, DC 20036	NONE	501(C)3	GENERAL OPERATING	

WASHINGTON, DC 20036				
YOUNG ISRAEL OF BAL HARBOUR 9580 ABBOTT AVENUE	NONE	501(C)3	GENERAL OPERATING	,

YOUNG ISRAEL OF BAL HARBOUR 9580 ABBOTT AVENUE SURFSIDE, FL 33154	NONE	501(C)3	GENERAL OPERATING	6,550

YOUNG ISRAEL OF BAL HARBOUR 9580 ABBOTT AVENUE SURFSIDE, FL 33154	NONE	501(C)3	GENERAL OPERATING	
				i

9580 ABBOTT AVENUE SURFSIDE, FL 33154	INOINE	301(0)3	GENERAL OF ERATING	
	•	•	_	

	•		065 733
DE, FL 33154			

500

10,000

JRFSIDE, FL 33154		
Total	 	965,723

efile GRAPHIC print - DO NOT	PROCESS	As Filed Da	ta -		DLN: 93491319056158	
TY 2017 Accounting Fees Schedule						
Accounting Fees Schedule		JON AND 9		FAMILY FOUNDAT	TION	
Category	Amo	unt	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
ACCOUNTING FEES		4,350	0		0	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491319056158 TY 2017 Explanation of Non-Filing with Attorney General Statement Name: JON AND SUSAN DIAMOND FAMILY FOUNDATION

**EIN:** 31-1523574

HAS BEEN PROPERLY FILED.

Statement: THE ATTORNEY GENERAL OF THE STATE OF OHIO DOES NOT REQUIRE THE FILING OF THE FEDERAL

FORM 990-PF FOR 501(C)(3) NON-PROFIT ORGANIZATIONS. OHIO REQUIRES THE FILING OF A STATEMENT ENTITLED "VERIFICATION OF FILING WITH THE INTERNAL REVENUE SERVICE." THIS FORM

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319056158			
TV 2017 Tours above and Commonwell	ta Banda Caba	.dd			
TY 2017 Investments Corporate Bonds Schedule					
Name:	JON AND SUSAN I	DIAMOND FAMILY FOUNDATION			
EIN:	31-1523574				

EIN:	31-1523574
<b>Investments Corporate Bonds Schedule</b>	

Investments Corpora	te Bonds Schedule		
	Name of Bond	End of Year Book Value	End of Year Fair Market Value
WELLS FARGO		679,330	662,334

TY 2017 Investments Corporate S	tock Schedule

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

WELLS FARGO

Name: JON AND SUSAN DIAMOND FAMILY FOUNDATION EIN: 31-1523574

DLN: 93491319056158

12,205,408

8,327,117

Name of Stock End of Year Book Value Market Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319056158					
TY 2017 Investments Governr	TY 2017 Investments Government Obligations Schedule						
Name:	JON AND SUS	SAN DIAMOND FAMILY FOUNDATION					
EIN:	31-1523574						
US Government Securities - End of Year Book Value:		0					
US Government Securities - End of Year Fair Market Value:		0					
State & Local Government Securities - End of Year Book Value:		532,717					
State & Local Government Securities - End of Year Fair Market Value:		515,442					

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319056158					
TY 2017 Investments - Other S	TV 2017 Investments - Other Schedule						
11 2017 investments Other S	criedale						

Name: JON AND SUSAN DIAMOND FAMILY FOUNDATION

**EIN:** 31-1523574

Investments Other Schedule 2					
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value		
SECURITIES	AT COST	1,008,534	1,008,534		
COMPUTERSHARE - STATE OF ISRAEL MINISTRY OF FINANCE	AT COST	25,000	25,000		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491319056	158	
TY 2017 Other Decreases Schedule					
Name:	JON AND SUS	AN DIAMOND FAMILY FOUND	ATION		
EIN:	31-1523574				
De	escription		Amount		
ROUNDING ADJUSTMENT				2	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491319056158	
TY 2017 Other Expenses Schedule					
Name: JON AND SUSAN DIAMOND FAMILY FOUNDATION					
EIN	31-1523574				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
OTHER	552	552		0	
STATE FILING FEES	200	0		0	

730

CREDIT CARD FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491319056158	
TY 2017 Other Increases Schedule				
Name: JON AND SUSAN DIAMOND FAMILY FOUNDATION				
<b>EIN:</b> 31-1523574				
De	escription		Amount	
COST BASIS ADJUSTMENT			3,619	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DI	LN: 93491319056158	
TY 2017 Other Liabilities Schedule					
Name:	JON AND SUS	AN DIAMOND	FAMILY FOUNDATI	ON	
<b>EIN:</b> 31-1523574					
		İ		- 1 616	
Description	n		Beginning of Year - Book Value	End of Year - Book Value	
CREDIT CARD LIABILITY	_		0	5,500	

efile GRAPHIC print - DO NOT PROCESS   As Filed Data - DLN: 93491319056158					
TY 2017 Other Professional Fees Schedule					
Name: JON AND SUSAN DIAMOND FAMILY FOUNDATION EIN: 31-1523574					
EIN: 31-13235/4					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable	

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
WELLS FARGO	68,220	68,220		0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491319056158		
TY 2017 Taxes Schedule						
Name	: JON AND SU	ISAN DIAMOND FA	MILY FOUNDATIO	)N		
EIN:	31-1523574					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FOREIGN TAX - WELLS FARGO	2,831	2,831		0		
FEDERAL TAX	8,040	0		0		

efile GRAPHIC print -	DO NOT PROCESS	As Filed Data -				DLN: 93491319056158	
Schedule B		Schedu	ule of Contributo	rs		OMB No 1545-0047	
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Information a	about Schedule B (F	tach to Form 990, 990-EZ, or 990-PF ule B (Form 990, 990-EZ, or 990-PF) and its instructions is at  www irs gov/form990				
Name of the organizat		:ON			Employer id	entification number	
					31-1523574		
Organization type (ch	eck one)						
Filers of:	Section:						
Form 990 or 990-EZ	☐ 501(c)(	) (enter number) c	organization				
	☐ 4947(a)( <sup>2</sup>	1) nonexempt chai	ritable trust <b>not</b> treated as	s a private founda	tion		
	☐ 527 politi	cal organization					
Form 990-PF	<b>5</b> 01(c)(3)	exempt private fo	undation				
	4947(a)(1	1) nonexempt chai	ritable trust treated as a p	rivate foundation			
	☐ 501(c)(3)	taxable private fo	undation				
			PF that received, during the complete Parts I and II Se				
Special Rules							
under sections received from a	509(a)(1) and 170(b)	(1)(A)(vi), that che uring the year, tota	g Form 990 or 990-EZ that cked Schedule A (Form 9 al contributions of the gre plete Parts I and II	990 or 990-EZ), P	art II, line 13,	16a, or 16b, and that	
during the year	, total contributions of	f more than \$1,000	, or (10) filing Form 990 o Dexclusively for religious, animals Complete Parts	charitable, scient			
during the year If this box is che purpose Don't	, contributions <i>exclus</i> ecked, enter here the complete any of the p	eively for religious, total contributions parts unless the <b>G</b>	or (10) filing Form 990 o charitable, etc., purposes that were received durin eneral Rule applies to the or more during the year.	, but no such con g the year for an s organization be	tributions tota exclusively re cause it recei	led more than \$1,000 ligious, charitable, etc , ved <i>nonexclusively</i>	
990-EZ, or 990-PF), bu	ıt it <b>must</b> answer "No	o" on Part IV, line 2	ile and/or the Special Rul t, of its Form 990, or chec it it doesn't meet the filing	k the box on line	H of its		
For Paperwork Reduction for Form 990, 990-EZ, or 9		ructions	Cat No 30613X	Schedu	ıle B (Form 990	990-EZ, or 990-PF) (2017)	

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Page 2 Name of organization Employer identification number 31-1523574 JON AND SUSAN DIAMOND FAMILY FOUNDATION Part I Contributors (See instructions) Use duplicate copies of Part I if additional space is needed (a) (d) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person SUSAN DIAMOND **Payroll** 9553 HARDING AVE 307 \$ 444,800 Noncash SURFSIDE, FL33154 (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person JON DIAMOND Payroll 9553 HARDING AVE 307 \$ 18,999 Noncash SURFSIDE, FL33154 (Complete Part II for noncash contributions) (b) (a) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (a) (c) (d) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person **Payroll** \$ Noncash (Complete Part II for noncash contributions)

Schedule B (Forr	n 990, 990-EZ, or 990-PF) (2017)		Page <b>3</b>
Name of organiz JON AND SUSAN [	ation DIAMOND FAMILY FOUNDATION		ification number
Part II	Noncash Property (See Instructions) Use duplicate copies of Part II if additional space is needed		523574
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	40,000 SHARES AMERICAN EAGLE OUTFITTERS	\$ 754,000	2017-12-27
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	500 SHARES FACEBOOK, 250 SHARES MICROSOFT	\$ 109,978	2017-12-27
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		Schedule B (Form	990, 990-EZ, or 990-PF) (2017)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)