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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

► Go to www irs.gov/Form990PF for instructions and the latest information

i	For ca	lendar year 2017 or tax year beginning		, 2017	, and ending		, 20
-	Name of foundation					A Employer identifi	cation number
	Nex	tEra Energy Foundation, Inc.				65-00314	52
•		er and street (or PO box number if mail is not delivered	to street address)		Room/suite	B Telephone number	er (see instructions)
1							
	700	Universe Blvd. CTX-JB				(561) 69	1-7601
ENVELOPE	City or	town, state or province, country, and ZIP or foreign pos	tal code				
						C If exemption applica pending, check here	
黑	Juno	o Beach, FL 33408					
	G Che	eck all that apply Initial return	Initial return	of a former p	oublic charity	D 1 Foreign organizat	ons, check here ▶
<u>-</u>		Final return	X Amended re	turn		2 Foreign organiza	
m .		Address change	Name chang			85% test, check h computation .	
آ- ی	1-Che	eck-type of organization – X Section 501(c)(3) exempt private f	oundation		E If private foundation	status was terminated
9.	s	Section 4947(a)(1) nonexempt charitable trust	Other taxable pr			under section 507(b)	►
ا ر	Fair				rual	F If the foundation is	in a 60-month termination
7			ther (specify) Modif		<u>al</u>	under section 507(b)	(1)(B), check here . >
	16)	▶ \$ 11,288,513.00 (Part I,	column (d) must be on ca	ish basis)	·		
	Part	Analysis of Revenue and Expenses (The	(a) Revenue and	(b) Net inve	estment	(c) Adjusted net	(d) Disbursements for charitable
ヹ		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expenses per books	incon		income	purposes
•	,	column (a) (see instructions))					(cash basis only)
ر د	1	Contributions, gifts, grants, etc., received (attach schedule).	6,085,108.00				
APR	2	Check Line attach Sch B	00 720 00	20.7	22 00		
	3	Interest on savings and temporary cash investments.	28,732.00	28,7	32.00	-	1981
\supset	4	Dividends and interest from securities					
V	5a	Gross rents					
<u>.</u>	.	_Net rental income or (loss)				-Received li	. Corres
20814 Bush	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all				IRS - 08	
, i	b b b	assets on line 6a	-a markey harm				
0	/	Capital gain net income (from Part IV, line 2) .				APR-12	} 2021
	8	Net short-term capital gain					
3	10 a		-			Ogden.	Litah
ري	١.	and allowances				Oguen	Olair
	- 1	Less Cost of goods sold . L Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	6,113,840.00	28,7	32.00		
•	13	Compensation of officers, directors, trustees, etc					
8	14	Other employee salaries and wages					
- 5	15	Pension plans, employee benefits					
į		Legal fees (attach schedule)					
Ú	ј ь	Accounting fees (attach schedule)					
	c E	Other professional fees (attach schedule)					
2	17	Interest					
7	2 18	Taxes (attach schedule) (see instructions)	575.00				
0	19	Depreciation (attach schedule) and depletion.					
N	20	Occupancy					
2	21	-Travel, conferences, and meetings	<u> </u>				
V	22	Printing and publications	76,080.00			***	76,080.00
	23	Other expenses (attach schedule)	70,000.00				70,000.00
Ш	g 24	Total operating and administrative expenses.	76,655.00				76,080.00
Z	2	Add lines 13 through 23	3,407,214.00				3,407,214.00
8	25	Contributions, gifts, grants paid	3,483,869.00				3,483,294.00
Ö	16 a b c 17 18 19 20 21 22 23 24 25 26 27	Total expenses and disbursements Add lines 24 and 25	3,403,003.00				2,103,231.00
Ø		Subtract line 26 from line 12	2,629,971.00				
	1	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	2,023,3,1.00	28.7	32.00	·	
	1	Adjusted net income (if negative, enter -0-).					

JSA For Paperwork Reduction Act Notice, see instructions 7E1410 1 000

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No statute issue

	art II	Balanca Chasta	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End	of year
تا	artii	Dalance Sheets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beari	ing			
	2	Savings and temporary	cash investments	6,205,613.00	2,827,131.00	2,827,131.00
	3	Accounts receivable	cash investments		-	
		-	btful accounts ▶		6,000,000.00	6,000,000.00
	4	Pledges receivable ▶				-
		Less allowance for doub				
			officers, directors, trustees, and other			
		disqualified persons (att	tach schedule) (see instructions)			
		•	eceivable (attach schedule)			-
			btful accounts			
ţ			e			
Assets			eferred charges	1,799,896.00	2,461,382.00	2,461,382.00
A			e government obligations (attach schedule),			
			stock (attach schedule)			
		•	bonds (attach schedule)			
	11	Investments - land, buildings and equipment basis				1
		Less accumulated deprecia	ation >			
		(attach schedule)	loans			
	13	Investments - other (atta	ach schedule)			
	14	Land, buildings, and equipment basis	ach schedule)			
		Less accumulated deprecia				
		(attach schedule) Other assets (describe ▶				
		•	completed by all filers - see the			
			age 1, item I)	8,005,509.00	11,288,513.00	11,288,513.00
コ	17	Accounts pavable and a	ccrued expenses			,
		, ,		1,748,375.00	2,401,409.00	
ဖွ						#17
Liabilities			rs, trustees, and other disqualified persons.			
١		·	tes payable (attach schedule)		-	
اٿ			· • • • • • • • • • • • • • • • • • • •]
1		,				
			s 17 through 22)	1,748,375.00	2,401,409.00	
		Foundations that follow	v SFAS 117, check here			1
es			through 26, and lines 30 and 31.			
듸	24	Unrestricted				
اق	25	Temporarily restricted .]
뛰	26	Permanently restricted .				,
틸		Foundations that do no	ot follow SFAS 117, check here ▶ 🔲			!
Net Assets or Fund Balances		and complete lines 27 t	through 31.			
힐	27	Capital stock, trust princ	cipal, or current funds			
뜅	28	Paid-in or capital surplus, or	land, bldg, and equipment fund			
SS	29	Retained earnings, accumu	ilated income, endowment, or other funds	6,257,134.00	8,887,104.00	
۲	30	Total net assets or fund	balances (see instructions)	6,257,134.00	8,887,104.00	
割	31	Total liabilities and	net assets/fund balances (see			
				8,005,509.00	11,288,513.00	1
			nges in Net Assets or Fund Bala			
.1			alances at beginning-of-year - Part l			
			d on prior year's return)			6,257,134.00
			line 27a			2,629,971.00
3	Othe	er increases not includ	ded in line 2 (itemize) ►		· 1	0.005.115
				. .	<u>4</u>	8,887,105.00
		reases not included in			5_	0.007.105.00
6	Tota	I net assets or fund b	alances at end of year (line 4 minus	line 5) - Part II, column (I	o), line 30 6	8,887,105.00
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Pai	rt IV Capital Gains	and Losses for Tax on Inve	estment Income			
	(a) List and de	(b) How acquired	(c) Date acquired	(d) Date sold		
	2-story b	P - Purchase D - Donation	(mo , day, yr)	(mo , day, yr)		
1 a					_	
b						
С						
d		· 				
e	-		<u> </u>			
_	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) min	
а						
b						
С						
d						
е						
	Complete only for assets s	howing gain in column (h) and owned	by the foundation on 12/31/69	(1)	Gains (Col (h) ga	ain minus
((i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		(k), but not less to Losses (from co	han -0-) or
a						
b						
с						
<u>d</u>						
е						
2	Capital gain net income	or (not capital loce)	un, also enter in Part I, line 7 sss), enter -0- in Part I, line 7	2		
3	Net short-term capital g	ain or (loss) as defined in sections	1222(5) and (6)			
	If gain, also enter in P	Part I, line 8, column (c) See ins	tructions If (loss), enter -0- in			
	Part I, line 8	<u></u> .	<u> </u>	3		
Was		the section 4942 tax on the distrib		ase period	d?	Yes X No
_	<u> </u>	n't qualify under section 4940(e) D				
		mount in each column for each yea	ar, see the instructions before maki	ng any en		
Cate	(a) Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution ra (col (b) divided by	col (c))
	2016	1,976,049.00	7,203,403.00		·-·-	0.2743
	2015	1,745,613.00	7,154,225.00			0.2440
	2014	1,608,766.00	8,187,384.00			0.1965
	2013	1,541,190.00	3,899,996.00			0.3952
	2012	2,172,519.00	5,742,145.00	ļ <u>.</u>		0.3783
						1 4000
2		d)		2	-	1.4883
3	Average distribution rati	o for the 5-year base period - divide	e the total on line 2 by 5 0, or by			0 0000
	the number of years the	foundation has been in existence i	f less than 5 years	3		0.2977
					5 20	
-4 —	Enter the net value-of-ne	oncharitable-use assets-for-2017-fr	om Part X, line 5	. 4	5,36	51 <u>,</u> 393.41_
			1 50			
5	Multiply line 4 by line 3.			5	1,59	6,086.82
						007.00
6	Enter 1% of net investm	ent income (1% of Part I, line 27b).		6		287.32
					1 50	C 274 14
7	Add lines 5 and 6			7	1,59	6,374.14
8	Enter qualifying distribut	tions from Part XII, line 4		8		3,294.00
	If line 8 is equal to or g Part VI instructions	greater than line 7, check the box	in Part VI, line 1b, and complete	that part	using a 1% ta	x rate See the

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9

Χ

X

Pa	t VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement See instructions	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A	4 50	00:	
14	The books are in care of ► W. Scott Seeley Telephone no ► (561) 69	1-70	38	
	Located at ▶ 700 Universe Blvd. Juno Beach, Florida ZIP+4 ▶ 33408			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		162	X
	over a bank, securities, or other financial account in a foreign country?	16		
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			. —
Pa	the foreign country->	- management	-	
Γa	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1-	During the year, did the foundation (either directly or indirectly)	—		1
10	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			· -
	disqualified person? Yes X No	===		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)? Yes X No	*****		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after	l		
	termination of government service, if terminating within 90 days).			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	41		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	-	* · •
	Organizations relying on a current notice regarding disaster assistance, check here	-		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?	1c	_	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			1
-	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2017?			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?		_	
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the _10-; =15-;—or—20-year first - phase—holding—period? (Use Schedule - C;—Form - 4720; to determine—if—the-foundation had excess business holdings in 2017)	3 b		-
As	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	,	<u> </u>	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X
		m 99	n-DE	(2017)

Form 990-PF (2017) Page 6 Statements Regarding Activities for Which Form 4720 May Be Required (continued) Part VII-B During the year, did the foundation pay or incur any amount to Yes No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955), or to carry on, No Yes (3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? кнм b. If any answer-is "Yes" to 5a(1)-(5), -did any-of the transactions fail to qualify under the exceptions described in 2/17/2021 X Regulations section 53 4945 or in a current notice regarding disaster assistance? See instructions 5b If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax -If-"Yes," attach the statement required by-Regulations section 53 4945-5(d)— 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums Yes Χ Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b If "Yes" to 6b, file Form 8870 At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?. . Yes X No If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 7h Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors List all officers, directors, trustees, foundation managers and their compensation. See instructions. (b) Title, and average (e) Expense account, other allowances (a) Name and address - - - -hours per week --devoted to position enter -0-) and deferred compensation See Statement 3 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE." (d) Contributions to (b) Title, and average hours per week -devoted to position employee benefit plans and deferred (e) Expense account, other allowances (a) Name and address of each employee paid more than \$50,000 (c) Compensation compensation None

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<u> </u>	nt contractors for professional services.	See instructions. If none, enter "NONE	
(a) Name and address	of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None			
		-	
			
			-
			_
			_
otal number of others-receiving-ove	er \$50,000-for-professional-services		
art IX-A Summary of Direct	t Charitable Activities		
art IX-A Summary of Direct	t Charitable Activities		
	rritable activities dunng the tax year. Include relevant s conferences convened, research papers produced, etc	statistical information such as the number of	Expenses
1 None			
			_
2			
3			
4			
	am-Related Investments (see instruction	ons)	
art IX-B Summary of Progr		n lines 1 and 2	Amount
art IX-B Summary of Progr. Describe the two largest program-related in	ivestments made by the foundation during the tax year or		
Describe the two largest program-related in	nvestments made by the foundation during the tax year or		
Describe the two largest program-related in	nvestments made by the foundation during the tax year or		
Describe the two largest program-related in	nvestments made by the foundation during the tax year or		
Describe the two largest program-related in 1 N/A	nvestments made by the foundation during the tax year or	-	
Describe the two largest program-related in 1 N/A	nvestments made by the foundation during the tax year or	-	
Describe the two largest program-related in 1 N/A	nvestments made by the foundation during the tax year or		
Describe the two largest program-related in 1 N/A		-	
Describe the two largest program-related in 1 N/A 2 All other program-related investments. See in		-	

Pa	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign fo	oundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	5,443,039.00
b	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see instructions)	1c	
đ		1d	5,443,039.00
е			
-	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	5,443,039.00
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	81,645.59
-5-	-Net-value of-noncharitable-use-assets. Subtract line 4-from-line-3-Enter here and on-Part-V,-line-4-	-5 -	5,361,393.41_
6	Minimum investment return. Enter 5% of line 5	6	268,069.67
Pa	Tt XI Distributable Amount (see Instructions) (Section 4942(J)(3) and (J)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part)	ndatioi	ns
1	Minimum investment return from Part X, line 6	1	268,069.67
2 а	287.00		
2 a b	Tax on investment income for 2017 from Fart VI, into 3	===	
	Add lines 2a and 2b	2c	287.00
3	Distributable amount before adjustments Subtract line 2c from line 1	3	267,782.67
4	Recoveries of amounts treated as qualifying distributions	4	·-····································
5	Add lines 3 and 4	5	267,782.67
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	٣	
•	line 1	7	267,782.67
_			<u>-</u>
Pai	rt XII Qualifying Distributions (see Instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	-	
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	3,483,294.00
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	3,483,294.00
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		<u> </u>
•	Enter 1% of Part I, line 27b See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	-	3,483,294.00
٠	Note: The amount on line 6 will be used in Part V,-column (b), in subsequent years when ca		
	gualifies for the section 4940(e) reduction of tax in those years		

Pa	rt XIII Undistributed Income (see ınstr	ructions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017
	line 7		• •	*	267,782.67
2	Undistributed income, if any, as of the end of 2017		_		
а	Enter amount for 2016 only				
	Total for pnor years 20,20,20				
3	Excess distributions carryover, if any, to 2017				
а	From 2012				
h	From 2013 1,346,194.00				
c	From 2014				
d	From 2015 1,387,916.00				
е	From 2016 1,616,015.00	-		•	
f	Total-of-lines-3a through e	_7,434,952.00 <u>_</u>	AND THE COMMENDED AND THE PLANT OF	THE THE RESERVE AND THE PROPERTY AND THE P	Not the Control of th
4	Qualifying distributions for 2017 from Part XII,	- •		- •	** - *
	line 4 ▶ \$3,483,294.00	-		· •	
а	Applied to 2016, but not more than line 2a				
ь	Applied to undistributed income of prior years				
_	(Election required - see instructions)				
c	Treated as distributions out of corpus (Election				
_	required - see instructions)				
d	Applied to 2017 distributable amount				267,782.67
е	Remaining amount distributed out of corpus	3,215,512.00			<u> </u>
5	Excess distributions carryover applied to 2017				
	(If an amount appears in column (d), the same	,			
6	amount must be shown in column (a)) Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	10,650,464.00			
b	Prior years' undistributed income Subtract				,
	line 4b from line 2b			-	
С	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 - see instructions			• • • • • • • • • • • • • • • • • • • •	
٠	4a from line 2a Taxable amount - see				
	instructions				
f	Undistributed income for 2017 Subtract lines		s number of r	the purpose of	
-	4d and .5_from line 1 This amount mustbe			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
	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)	1,885,422.00			
	Excess distributions carryover to 2018.				
	Subtract-lines-7-and-8-from line 6a	8,765,042.00			<u> </u>
10	Analysis of line 9	, , ,			
	Excess from 2013 1,346,194.00			_	
	Excess from 2014 1,199,405.00			· -	
	Excess from 2015 1,387,916.00		•		• • •
	Excess from 2016 1,616,015.00				
	Excess from 2017 3, 215, 512.00				
	· · · · · · · · · · · · · · · · · · ·				Form 990-PF (2017)

_	rt XIV Private Op	erating Foundations	(see instructions a	nd Part VII-A, question	nn 9)	rage 10
						
٦а	If the foundation has				ating	
	foundation, and the rulin	•	_			V2) ==
þ	Check box to indicate		is a private operating		section 4942(j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part	(a) 2017	(b) 2016	(c) 2015	(d) 2014	<u> </u>
	I or the minimum investment return from Part X for each					
	year listed		<u> </u>	-		
· b	85% of line 2a		•			
	Qualifying distributions from Part					
	_ XII, line 4 for each year listed					
	Amounts included in line 2c not					
	used directly for active conduct					
	of exempt activities					
е	Qualifying distributions made directly for active conduct of					
	exempt activities Subtract line	li i				
	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 invest-					
	ment return shown in Part X,					
_	"Support" alternative test - enter					
-	(1) Total support other than		•		<u>.</u>	
	gross investment income					
	(interest, dividends, rents,					
	payments on secunties 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 sup-					
	port from an exempt organization					
	(4) Gross investment income.					
Pa	rt XV Supplemei	ntary Information (Complete this part	only if the foundat	tion had \$5,000 or	r more in assets at
		uring the year - see			_	
1	Information Regardin	g Foundation Manage	rs:	-		
а	List any managers of			e than 2% of the tota	I contributions receiv	ed by the foundation
	before the close of any	tax year (but only if th	ey have contributed r	more than \$5,000) (Se	e section 507(d)(2))	•
N/A	7					
	List any managers of	the foundation who	own 10% or more o	f the stock of a corn	oration (or an equally	/ large portion of the
	ownership of a partner					y large pertion of the
	ownered by a partito	omp or onior onicy, or		. Had a horr or greater		
/ .	<u>.</u> .					
$\frac{N/R}{2}$			0'6' 1 0 1 1 1	·		
2	Information Regardin	g Contribution, Grant	, Giπ, Loan, Scholarsr	iip, etc., Programs:		
						and does not accept
	unsolicited requests for			ants, etc., to individual	ls or organizations ur	nder other conditions,
	complete items 2a, b,	c, and d. See instructio	ns			
a	_The_nam <u>e,-addres</u> s,_a	nd_telephone_number_	<u>or_email_address of_tl</u>	n <u>e_person_to_wh</u> om_app	lications should be add	Iressed
See	e Statement 6					
b	The form in which app	lications should be sub	mitted and information	on and materials they	should include	
See	e Statement 6					
	Any submission deadle	nes				
-	, cabiinosion doddii	- -				
Sec	e Statement 6					
	Any restrictions or li	mitations on awards	such as hy gener	anhical areas charita	hle fields kinds of	institutions or other
u	factors	initations on awaius	aucii as by geogr	apilicai aicas, ciidilla	DIC HEIUS, KIHUS UI	manunona, or other
_						
See	e Statement 6					

3 Grants and Contributions Paid Duri	ng the Year or Appr	oved for h	uture Payment	
Grants and Contributions Paid Duri Recipient Name and address (home or business)	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				2 407 014 0
See Statement 4				3,407,214.0
_			_	
· · · · · · · · · · · · · · · · · · ·				
			[
			!	
		•		·
	<u></u>	l		3,407,214.0
Total	<u> </u>		▶ 3a	3,407,214.0
b Approved for future payment ee Statement 5				2,313,750.0
ee Statement 5				2,313,730.0
	·			
	•		·	•
-			-	-
]	
<u>.</u>	_		<u>.</u> 1	
				· · · · · · · · · · · · · · · · · · ·
				•
	1			
	I	I	1	2,313,750.0

Part XVI-	A Analysis of Income-Prod	ucing Act	ivities			
Enter gross	amounts unless otherwise indicated	Unrela (a)	ated business income (b)	Excluded by	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program	service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
a				 		
b						
						
d						
_						
- f <u> </u>	<u> </u>		-			
g Fees a	and contracts from government agencies	_		 -		
2 Members	ship dues and assessments			<u> </u>		
3 Interest or	n savings and temporary cash investments.	_				
	s and interest from securities	_		ļ. ——		
⁻5⁻Net renta	al income or (loss) from real estate	majorites; accompletate	edus arobatelescones como no		NOTE THE RESIDENCE OF THE PARTY	Andrew Salar Charles Salar Sal
a Debt-	financed property	_				
b Not de	ebt-financed property	_		ļ		
6 Net rental	income or (loss) from personal property					
7 Other inv	estment income					
8 Gain or (lo	oss) from sales of assets other than inventory			ļ.		
9 Net incor	me or (loss) from special events					
	ofit or (loss) from sales of inventory					
11 Other rev	renue a					
b						
			-			
е						
12 Subtotal	Add_columns_(b), (d), and (e)		<u> </u>	00 (mm (mm) er (m (m (m (m)))		
13 Total. Ad	d line 12, columns (b), (d), and (e)				13	·
	eet in line 13 instructions to verify calcu					
Part XVI-I	B Relationship of Activities	s to the A	ccomplishment of E	xempt Pur	poses	· ····
Line No	Explain below how each activity accomplishment of the foundation					
▼ [accomplishment of the loundation	iii s exeiiib	t purposes (other than)	by providing	i iuilus ioi sucii puipose	3) (OCC INSTRUCTIONS)
-			-			
					-	
			•			
				·		
-						
					<u> </u>	
					· · · · ·	
						
		<u></u>	***************************************			
				,		
			-			
	<u> </u>	<u> </u>				····
					· · · · · · · · · · · · · · · · · · ·	
			-		-	
			<u>-</u>		_ ::	

Part)	(VII	Exempt Organ		ansiers to and	Transacu	ons and	Relation	snibs w	itti None	Chari	labie	!
1 Di	id the	organization direct		engage in any of	the following	with any	y other orga	anization	described		Yes	No
		on 501(c) (other	-									
		ations?			•			_	-			ĺ
	_	rs from the reportin	g foundation to	a noncharitable e	exempt organ	zation of:						
(1) Casl	h								1a(1)		Х
•	•	er assets								1a(2)		Х
ь Ò	her tr	ansactions.										1
(1) Sale	s of assets to a no	ncharitable exer	mpt organization.					.	16(1)		Х
		chases of assets fro								1b(2)		Х
	•	tal of facilities, equi								1b(3)		Х
-	-	nbursement arrange	•									Х
	•	ns or loan guarantee								1b(5)		Х
(6) Perf	ormance of service	s or membersh	ip or fundraising s	solicitations.					1 b (6)		Х
c St	aring	of facilities, equipm	nent, mailing lis	ts, other assets, o	r paid employ	ees				1c		Х
d If	the a	nswer to any of th	e above is "Ye	s," complete the	following so	hedule. C	olumn (b)	should al	ways shov	v the f	fair m	arke
		the goods, other										
va	lue ın	any transaction or	sharing arrang	gement, show in o	column (d) th	e value c	of the good	s, other a	ssets, or s	ervices	s rece	ived
(a) Line	no	(b) Amount Involved	(c) Name of n	oncharitable exempt o	rgantzation	(d) Desc	ription of trans	fers, transac	ions, and sha	rtng arra	ngemer	nts
	-	-										
											_	
			13.									
								_				
								•				
•												
de	scribe	oundation directly or ed in section 501(c) complete the follow	(other than sec							Ye	s X] No
		(a) Name of organization	1	(b) Type of	f organization			(c) Descripti	on of relations	ship		
									<u></u>			
,												
			•		•							
	Under p			ned this return, including				to the best o	my knowledg	e and bo	elief, it	is true
Sign	Correct	aris conspiese Declaration of	preparer (outer than to	expayer) is based on all Info	ormation of which p	Tehster Hers St	y knowledge	1	Many Aba 1706		Abla	
				"		SECRI	ETARY		May the IRS with the pre	S discuss aparer si		
Here	Signa	ture of officer or trustee		Date		Title			See instruction	8	Yes [Na
	W	SCOTT_SEELE	Y			<u></u>	:					
		Print/Type preparer's nar		Preparer's signatu	ire		Date	Che	ck if F	PTIN		
Paid									employed			
repai	er 🕆	Firm's name						Firm's EIN	>			
Jse O		Firm's address						<u> </u>				
	-	•						Phone no				
					· · · · · · · · · · · · · · · · · · ·				Far	m 990	-PF (2017)

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.
➤ Go to www.irs.gov/Form990 for the latest Information.

OMB No. 1545-0047

2017

Name of the organization	Employer identification number							
NextEra Energy Foundation, Inc. 65-0031452								
NextEra Energy Foundation, Inc. 65-0031452 Organization type (check one):								
Organization Lypo (cricos cric).								
Filers of: Section	:	- -						
Form 990 or 990-EZ 50	1(c)() (enter number) organization							
49	47(a)(1) nonexempt charitable trust not treated as a private fou	ndation						
52	7 political organization							
Form 990-PF X 50	1(c)(3) exempt private foundation							
<u> </u>	47(a)(1) nonexempt charitable trust treated as a private foundat	ion						
50	1(c)(3) taxable private foundation							
Check If your organization is covered by the	e General Rule or a Special Rule.							
-) organization can check boxes for both the General Rule and a S	pecial Rule. See						
General Rule								
	990, 990-EZ, or 990-PF that received, during the year, contribut from any one contributor. Complete Parts I and II. See instructio							
Special Rules								
regulations under sections 509(a 13, 16a, or 16b, and that receive	a section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 ced from any one contributor, during the year, total contributions ton (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ; line 1. Co	or 990-EZ), Part II, line of the greater of (1)						
contributor, during the year, total	section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that real contributions of more than \$1,000 exclusively for religious, chan, or for the prevention of cruelty to children or animals. Complete	aritable, scientific,						
contributor, during the year, con	section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that re tributions exclusively for religious, charitable, etc., purposes, but \$1,000. If this box is checked, enter here the total contributions	no such that were received						
General Rule applies to this orga	religious, charitable, etc., purpose. Don't complete any of the particular in the pa	etc., contributions						
990-EZ, or 990-PF), but it must answer "N	by the General Rule and/or the Special Rules doesn't file Scheo o" on Part IV, line 2, of its Form 990; or check the box on line H it doesn't meet the filing requirements of Schedule B (Form 990,	of its Form 990-EZ or on its						

Name of organization
NextEra Energy Foundation, Inc.

Employer identification number 65-0031452

Part	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	Florida Power & Light 9250 West Flagler St. Miami, FL 33174	- - \$\$075,920.00	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(<u>a</u>)	(b)	(c)	(d)		
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution		
2	Florida Power & Light 9250 West Flagler St. Miami, FL 33174	9,187.00 -	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address,-and ZIP+4-	(c) - Total contributions	(d) Type of contribution		
-			Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a)	(b)	(c) Total contributions	(d) Type of contribution		
No.	Name, address, and ZIP + 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	Address and Ell 1.7	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		

Employer Identification number

NextEra Energy Foundation, Inc.

65-0031452

Part II	Noncash Property (see instructions).	Use duplicate copies of Pa	art II if additional space is needed.	
				•

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	Services		
2		<u> </u>	
		9,187.00	Various
		3	Validad
(a) No.		(c)	
from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I	Secondary and a mondary given	(See Instructions.)	
		 - [
		\$	•
(a) No.	a .	(c)	(4)
from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part i		(See instructions.)	
	<u></u>	-	
		\$	
(a) No. from Part I	Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
			- <u>-</u>
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		-	
		·	
	<u></u>	\$	- 111
			· · · · · · · · · · · · · · · · · · ·
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Datê received
		_	
		-	
[-	
		_	

	(Form 990, 990-EZ, or 990-PF) (2017)			Page 4				
Name of o	~			Employer identification number				
	a Energy Foundation, Inc.	4.11		65-0031452				
.Part III		r the year from any tions completing Pa ne year. (Enter this i	one contributor. rt III, enter the total nformation once. S	Complete columns (a) through (e) and of exclusively religious, charitable, etc.,				
(a) No. from Part I	(b) Purpose of gift	T	of gift	(d) Description of how gift is held				
		(e) Trans	fer of gift					
	Transferee's name, address, a	und ZIP + 4	Relatio	nship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held				
		-						
,	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4 ` ·	Relation	nship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
		(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee					
	-							
(a) No. from Part I	(b) Purpose of glft	(c) Use	of glft	(d) Description of how gift is held				
}		(e) Transfe	er of gift					
-	Transferee's name, address, an	d ZIP + 4	Relation	ship of transferor to transferee				

NEXTERA ENERGY FOUNDATION, INC. FORM 990-PF EIN 65-0031452 DECEMBER 31, 2017

NAME AND ADDRESS		
FLORIDA POWER & LIGHT CO.		C 075 020
9250 WEST FLAGLER ST.	CONTRIBUTION - CASH	6,075,920
MIAMI, FL 33174	CONTRIBUTIONS - SERVICES	9,187
•		
TOTAL-CONTRIBUTIONS		6,085,108

NEXTERA ENERGY FOUNDATION, INC. FORM 990-PF EIN 65-0031452 DECEMBER 31, 2017 Statement 2

FORM 990PF PART 1	- OTHER EXPENSES	(Line 23)
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DESCRIPTION	Line 23
SERVICES	9,187
SOFTWARE	66,893
, TOTAL	76,080

NEXTERA ENERGY FOUNDATION, INC. FORM 990-PF, Part VIII, Line 1 EIN 65-0031452 December 31, 2017

January - December 2017

Board of Directors

Name		Hrs/Wk -	Address
Ketchum, John W.	Director	<1 hr	700 Universe Blvd. Juno Beach FL 33408
Kujawa, Rebecca J.	Director	<1 hr	700 Universe Blvd. Juno Beach FL 33408
Robo, James L.	Director	<1 hr	700 Universe Blvd. Juno Beach FL 33408
Sieving, Charles E.	Director	<1 hr	700 Universe Blvd. Juno Beach FL 33408
Silagy, Edc E.	Director	<1-hr	700 Universe Blvd. Juno Beach FL-33408——

Officers

Officers			
Name	Title	Hrs/Wk	Address
Robo, James L.	Chairman of the Board	<1 hr	700 Universe Blvd. Juno Beach FL 33408
Silagy, Eric E	President and Treasurer	<1 hr	700 Universe Blvd. Juno Beach FL 33408
Caplan, Deborah H.	Vice President	<1 hr	700 Universe Blvd. Juno Beach FL 33408
Cutler, Paul I.	Vice President and Assistant Treasurer	<1 hr	700 Universe Blvd. Juno Beach FL 33408
Ketchum, John W.	Vice President	<1 hr	700 Universe Bivd. Juno Beach FL 33408
Kujawa, Rebecca J.	Vice President	<1 hr	700 Universe Blvd. Juno Beach FL 33408
Seeley, W. Scott	Secretary	<1 hr	700 Universe Blvd. Juno Beach FL 33408
Plotsky, Melissa A	Assistant Secretary	<1 hr	700 Universe Bivd. Juno Beach FL 33408

NEXTERA ENERGY FOUNDATION, INC. FORM 990-PF, Part XV, Line 3a EIN 65-0031452 December 31, 2017

Grantee Name -	Payment Date	. Program Area	Purpose	Amount
SCHOLARSHIP AMERICA INC		Education	623-Contribution	80.00
UNIVERSITY OF FLORIDA FOUNDATION IN		Education	Matching Gifts	10,000.00
FLORIDA CHAMBER COMMERCE FOUNDATION		Civic & Community	623-Contribution	50,000.00
LAKESHORE FIRST ROBOTICS PROGRAM		Education	Matching Gifts	5,000.00
FLORIDA OCEANOGRAPHIC SOCIETY INC	• •	Environmental	623-Contribution	10,000.00
YOURCAUSE LLC	• •	Civic & Community	623-Contribution	47,875.00
SAMARITAN'S PURSE		Civic & Community	623-Contribution	25,000.00
UNITED WAY OF INDIAN RIVER	• •	Health & Human Services	623-Contribution	8,000.00
CENTER FOR ENERGY WORKFORCE DEVELOP		Education	623-Contribution	10,000.00
BROWARD COUNTY AUDUBON SOCIETY	· ·	Environmental	623-Contribution	2,000.00
HOBE SOUND NATURE CENTER INC	4/10/2017	Environmental	623-Contribution	1,500.00
American Indian Science and Engineering Society	4/10/2017	Education	623-Contribution	41,250.00
YOURCAUSE LLC		Civic & Community	623-Contribution	45,250.00
JACKSON MEMORIAL FOUNDATION INC	4/10/2017	Health & Human Services	623-Contribution	50,000.00
FLORIDA ATLANTIC UNIVERSITY FOUNDAT	4/10/2017	Education	Matching Gifts	50,000.00
UNITED WAY OF VOLUSIAFLAGLER		Health & Human Services	623-Contribution	20,000.00
UNITED WAY OF ST LUCIE COUNTY	4/25/2017	Health & Human Services	623-Contribution	16,000.00
UNITED WAY OF BREVARD COUNTY	4/25/2017	Health & Human Services	623-Contribution	21,000.00
NATIONAL AUDUBON SOCIETY	4/25/2017	Environmental	623-Contribution	25,000.00
YOURCAUSE LLC	4/25/2017	Civic & Community -	Matching Glfts -	88,579.24
OPTIMISTS CLUB OF WEST	4/27/2017	Education	623-Contribution	500.00
HABITAT FOR HUMANITY PALM BEACH COU	5/1/2017	Civic & Community	623-Contribution	25,000.00
UNITED WAY MARTIN COUNTY	5/16/2017	Health & Human Services	623-Contribution	21,000.00
FLORIDA AUDUBON SOCIETY	5/25/2017	Environmental	623-Contribution —	40,000.00
UNIVERSITY OF SCRANTON	6/19/2017	Education	Matching Gifts	4,000.00
THE EDUCATION FUND	6/19/2017	Education	623-Contribution	15,000.00
NATIONAL MERIT SCHOLARSHIP CORP	6/20/2017	Education	623-Contribution	23,060.00
CALIFORNIA POLYTECHNIC STATE	6/22/2017	Education	Matching Gifts	10,000.00
UNITED STATES NAVAL ACADEMY FOUNDAT	6/22/2017	Education	Matching Gifts	10,000.00
SCHOLARSHIP AMERICA INC	7/24/2017	Education	623-Contribution	10,090.00
YOURCAUSE LLC	7/24/2017	Civic & Community	Matching Gifts	19,397.90
YOURCAUSE LLC		Civic & Community	623-Contribution	56,875.00
UNITED WAY OF PALM BEACH COUNTY IN	7/26/2017	Health & Human Services	623-Contribution	100,000.00
SOUTH FLORIDA AFTER SCHOOL ALL STAR	8/14/2017	Education	623-Contribution	15,000.00
UNITED WAY SUNCOAST INC	8/23/2017	Health & Human Services	623-Contribution	2,500.00
UNITED WAY OF SOUTH SARASOTA COUNTY		Health & Human Services	623-Contribution	3,300.00
STEM HQ INC		Education	623-Contribution	
UNITED WAY SUNCOAST INC		Health & Human Services	623-Contribution	14,900.00
UNITED WAY OF MANATEE COUNTY	-,,	Health & Human Services	623-Contribution	18,000.00
WV VOLUNTARY ORGANIZATIONS		Health & Human Services	623-Contribution	20,000.00
HOLY GROUND SHELTER FOR HOMELESS IN	8/28/2017	Health & Human Services	623-Contribution	2,500 00
AMERICAN NATIONAL RED CROSS		Health & Human Services	623-Contribution	100,000 00
VOLUNTEER FLORIDA FOUNDATION INC	• •	Health & Human Services	623-Contribution	1,000,000.00
SANTA FE AUDUBON SOCIETY		Environmental	623-Contribution	1,500.00
DEFENDERS OF WILDLIFE		Environmental	623-Contribution	2,000 00
PELICAN ISLAND AUDUBON SOCIETY INC		Environmental	623-Contribution	2,000.00
FLORIDA WILDLIFE FEDERATION		Environmental	623-Contribution	6,000.00 6,000.00
WILDLIFE HABITAT COUNCIL INC	* -	Environmental	623-Contribution	1,000.00
SOUTHEAST FLORIDA HONOR FLIGHT INC	• •	Civic & Community	623-Contribution	2,000.00
HEART OF FLORIDA UNITED WAY		Civic & Community	623-Contribution 623-Contribution	500.00
ALACHUA AUDUBON SOCIETY		Environmental		5,000.00
CENTER FOR ENERGY WORKFORCE DEVELOP	10/16/2017		623-Contribution 623-Contribution	1,000.00
UNITED WAY NORTHEAST FLORIDA		Health & Human Services	623-Contribution	3,000.00
UNITED WAY OF ST JOHNS COUNTY INC		Health & Human Services	623-Contribution	4,100.00
UNITED WAY PUTNAM COUNTY		Health & Human Services	623-Contribution	85,000.00
UNITED WAY OF BROWARD COUNTY INC	10/19/2017	Health & Human Services	OZJ-CONGIDUQUII	00,000.00

Grantee Name	Payment Date	Program Area	Purpose	Amount
UNITED WAY OF SUWANNEE VALLEY	10/23/2017	Health & Human Services	623-Contribution	4,000.00
FRIENDS OF WINNACUNNET FOUNDATION	10/23/2017	Education	623-Contribution	5,000.00
COUNCIL FOR SUSTAINABLE FLORIDA INC	10/26/2017	Environmental	623-Contribution	10,000.00
THE NATURE CONSERVANCY	10/30/2017	Environmental	623-Contribution	10,000.00
UNITED WAY OF CHARLOTTE COUNTY		Health & Human Services	623-Contribution	9,000.00
ST LUCIE AUDUBON SOCIETY	11/9/2017	Environmental	623-Contribution	1,500.00
K9S FOR WARRIORS INC	11/9/2017	Civic & Community	623-Contribution	25,000.00
MUSEUM OF DISCOVERY & SCIENCE INC	11/9/2017	Education	623-Contribution	100,000.00
UNITED WAY OF LEE COUNTY INC	11/14/2017	Health & Human Services	623-Contribution	14,000.00
CAMILLUS HOUSE INC	11/14/2017	Health & Human Services	623-Contribution	50,000.00
SEACOAST SCIENCE CENTER	11/15/2017	Environmental	623-Contribution	2,500.00
CONSERVANCY OF SOUTHWEST FLORIDA	11/15/2017	Environmental	623-Contribution	3,000.00
IOWA ESGR INC	11/15/2017	Civic & Community	623-Contribution	3,000.00
UNITED WAY OF LEE COUNTY INC	11/15/2017	-Health & Human Services	623-Contribution _	4,000.00
FRIENDS OF THE URBANA	11/15/2017	Education	623-Contribution	5,000.00
MARION INDEPENDENT SCHOOL FOUNDATIO	11/15/2017	Education	623-Contribution	5,000.00
NEW YORK LEAGUE OF CONSERVATION	11/15/2017	Environmental	623-Contribution	7,000.00
UNITED WAY OF COLLIER COUNTY	• •	Health & Human Services	623-Contribution	7,200.00
AMERICAN NATIONAL RED CROSS		Health & Human Services	623-Contribution	100,000.00
NORTH AMERICA BUTTERFLY ASSOCIATION	11/16/2017	Environmental	623-Contribution	2,000.00
SEACOAST YOUTH SERVICES INC	11/16/2017	Environmental	623-Contribution	2,500.00
GRASSY WATERS CONSERVANCY INC	• •	Environmental	623-Contribution	5,000.00
DAKOTA MEDICAL FOUNDATION	• •	Health & Human Services	623-Contribution	25,000.00
MIAMI MUSEUM OF SCIENCE	11/16/2017		623-Contribution	100,000.00
PELICAN ISLAND PRESERVATION SOC INC		Environmental	623-Contribution	(1,000.00)
SOUTH FLORIDA WILDLIFE CENTER		Environmental	623-Contribution	(00.008)
FLORIDA NATIVE PLANT SOCIETY	• •	Environmental	623-Contribution	3,000.00
XERCES SOCIETY INC		Environmental	623-Contribution	3,000.00
NATIONAL AUDUBON SOCIETY	• •	Environmental	623-Contribution	5,000.00
THE NATIONAL ARBOR DAY FOUNDATION		Environmental	623-Contribution	5,000 00
NATIONAL AUDUBON SOCIETY	• •	Environmental	623-Contribution	16,000.00
YOURCAUSE ILC	• •	Civic & Community	623-Contribution	45,500.00 48,300.00
YOURCAUSE LLC	• •	Civic & Community	Matching Gifts 623-Contribution	6,484.22
MANATEE COUNTY HABITAT FOR HUMANITY		Environmental	623-Contribution	6,858.80
NATIONAL AUDUBON SOCIETY	12/7/2017 12/7/2017	Environmental Education	Matching Gifts	7,500.00
NOVA SOUTHEASTERN UNIVERSITY	,	Civic & Community	623-Contribution	10,394 77
BOYS & GIRLS CLUB OF MANATEE COUNTY	~	Environmental	623-Contribution	24,025.19
THE NATURE CONSERVANCY	• •	Environmental	623-Contribution	29,072.41
SAVE THE MANATEE CLUB INC	• •	Health & Human Services	623-Contribution	6,484.22
ARCADIA DESOTO COUNTY HABITAT		Civic & Community	623-Contribution	6,484 22
CHARLOTTE COUNTY HABITAT FOR HUMANI	• •	Civic & Community	623-Contribution	6,484.22
HABITAT FOR HUMANITY OF SOUTH PALM		Civic & Community	623-Contribution	6,484.22
HABITAT FOR HUMANITY OF SOUTH PALM HABITAT FOR HUMANITY PALM BEACH COU		Civic & Community	623-Contribution	6,484.22
BOYS & GIRLS CLUB OF COLLIER COUNTY		Civic & Community	623-Contribution	10,394.77
BOYS & GIRLS CLUBS OF BROWARD COUNT		Civic & Community	623-Contribution	10,394.77
BOYS & GIRLS CLUBS OF MIAMI INC		Clvlc & Community	623-Contribution	10,394.77
BOYS & GIRLS CLUBS OF PALM BCH CNTY		Clvic & Community	623-Contribution	10,394.77
THE EVERGLADES FOUNDATION INC		Environmental	623-Contribution	19,317.03
WEST POINT FUNDASSOC OF GRADUATES	12/12/2017		Matching Gifts	500.00
DIOCESE OF HARRISBURG	12/12/2017	•	Matching Gifts	500.00
PINE CREST PREPARATORY SCHOOL INC	12/12/2017		Matching Gifts	500.00
THE TRUSTEES OF COLUMBIA UNIVERSITY	12/12/2017		Matching Gifts	2,000.00
SCHOLARSHIP AMERICA INC	12/12/2017		623-Contribution	2,960.00
YOURCAUSE LLC		Civic & Community	Matching Gifts	3,856.92
UNITED WAY OF LEE COUNTY INC		Health & Human Services	623-Contribution	4,000.00
UNITED WAY OF COLLIER COUNTY	12/12/2017	Health & Human Services	623-Contribution	7,200.00
UNITED WAY OF LEE COUNTY INC		Health & Human Services	623-Contribution	14,000.00
HABITAT FOR HUMANITY COLLIER CO		Civic & Community	623-Contribution	6,484.22
HABITAT FOR HUMANITY OF BREVARD COU		Civic & Community	623-Contribution	6,484.22
HABITAT FOR HUMANITY OF GREATER MIA	12/14/2017	Civic & Community	623-Contribution	6,484.22
			-	

STATEMENT 4

Grantee Name BOYS & GIRLS CLUB OF CHARLOTTE INC LOGGERHEAD MARINELIFE CTR INC AMERICAN NATIONAL RED CROSS VOLUNTEER FLORIDA FOUNDATION INC AMERICAN NATIONAL RED CROSS	12/14/2017 12/15/2017 12/15/2017	Program Area Civic & Community Environmental Health & Human Services Health & Human Services Health & Human Services	Purpose 623-Contribution 623-Contribution Matching Gifts Matching Gifts 623-Contribution	Amount 10,394.77 200,000.00 94,492.00 98,873.00 20,750.00
UNITED WAY OF LEE COUNTY INC	12/31/2017	Health & Human Services	. 623-Contribution	(28,700.00)
				3,413,889
			Adjustment _	(6,675)
			~ Total	3,407,214

$_{\mathsf{Form}}\,\mathbf{4720}$

Return of Certain Excise Taxes Under Chapters 41 and 42 of the Internal Revenue Code

	Internal	Revenue Service	►G	So to www.irs.gov/Form4720 for ins	tructions and the latest information	on				
	For cal	endar year 2017 or otl	her tax year beginni	ing	, 2017, and ending		, 20			
	Name o	f organization or entity				Emp	ployer identif	ication nu	umber	
	NextE	ra Energy Founda	tion, Inc			65~	0031452			
	Number	, street, and room or s	suite no (or PO bo	ox if mail is not delivered to street address)		Che	ck box for ty	pe of annu	ual return	
	700	Universe Blv	d. CTX-J	В -	•		Form 990		Form 990-8	ΕZ
	City or t	own, state or province	, country, and ZIP of	or foreign postal code		$\exists \exists x$	Form 990-F			
	•	,	•	<u> </u>		11	Form 5227			
	Julio- I	Beach, FL 33408	·				FOIII 3221		Yes N	_
		la tha araanizatio	n a faraign ar	ivate foundation within the mean	ing of soction 4948/b)?				X	
	A			ken on any taxable event that r					- ^	_
	В									
		form? (Enter "N/A	A" if not applic	able)				1/A	f	_
				ription and documentation-of-the						
				as a result of the correction ▶ \$_		If "	No," (that	ıs, any u	incorrect	ea
	-			explanation (see instructions)						_
	Part			(Sections 170(f)(10), 664(c)(2),		943(a),	4944(a)(1),		
				959, 4965(a)(1), and 4966(a)(1)						_
	1			Schedule B, line 4						_
	2	Tax on excess be	usiness holding	gs - Schedule C, line 7						_
	3			dize charitable purpose - Schedu		-				
	4	Tax on taxable e	xpenditures - S	Schedule E, Part I, column (g)		. 4			201	18
	5	Tax on political e	xpenditures -	Schedule F, Part I, column (e)		. 5				
	6	Tax on excess lo	bbying expend	ditures - Schedule G, line 4		. 6				
	7			xpenditures - Schedule H, Part I,						
	8			onal benefit contracts			1			
	9			ted tax shelter transactions - Sch						
	10			chedule K, Part I, column (f)						
	11			trust's unrelated business taxabl			+			_
	12			rements of section 501(r)(3)-So						_
KHM			•						201	1.8
2/17/2021	Part	II-A Taxes on	Managers S	elf-Dealers, Disqualified Pers	ons Donors Donor Adviso	ors an		d Perso		<u> </u>
	· art		-	4944(a)(2), 4945(a)(2), 4955(a)(2), 4						
	-			ect to tax City or town, state or province, co			b) Taxpayer ı	dentificati	on number	_
			, , , , , , , , , , , , , , , , , , ,			+-	7			_
-	a N/A	-		-	-					_
	<u>b</u>					+-				_
	<u>c</u>	-		(d) Tax on investments that jeopardize		-				_
		(c) Tax on self-dealing - col (d), and Par		charitable purpose - Schedule D, Part II, col. (d)	(e) Tax on taxable expenditures - Schedule E, Part II, col (d)	'	(f) Tax on po Schedule I	olitical expe F, Part II, o		
	<u></u>			1 211 11, 331 (4)	-					_
	<u>-</u>					1				_
	<u>c</u>					1				_
	Total		-			_				_
	Iotai	1-1-		(h) Tax on excess benefit	(i) Tax on being a party to prohibited	_	(j) Tax on tax	vable distr	abutions	_
		(g) Tax on disqual expenditures - Schedul		transactions - Schedule I, Part II, col (d), and Part III, col (d)	tax shelter transactions - Schedule J Part II, col (d)	.	Schedule i			
				(a), and rait iii, cor (a)	T art ii, coi (u)					
	<u>a</u>	 				+				_
	b	 								_
L-LIT-	. <u>c</u>	- 			The second secon		·			
	Total				<u> </u>					—
		(k) Tax on prohibited Part II, col. (d), and		1		(i) Total - Add	cols (c) t	hrough (k)	
		Fatti, Coi (d), and	rairii, cor (u)							_
	<u>a</u>	<u></u>								
	b	<u> </u>								
	<u>c</u>									
		1								

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions

Form **4720** (2017)

Form 472						Page 2
	B Summary of Taxes (See ter the taxes listed in Part II-A,				ı	T
	rsons, donors, donor advisors,					
tot	al amount from Part II-A, column	ı (l)			1_	
	tal tax. Add Part I, line 13, and				2	2018
	tal payments including amount				3	
	x due. If line 2 is larger than line				4	2018
_ 5 Ov	verpayment. If line 2 is smaller t				5	<u> </u>
Part I				elf-Dealing (Section 494		
		a il ux oompaa				
(a) Act number	(b) Date of act		((c) Description of act		
1						
2						
4						
5					·	Tax on foundation managers (if
	Question number from Form 990-PF, art VII-B, or Form 5227, Part VI-B,	(e) Amount	involved in act	(f) Initial tax on self-dealer (10% of col. (e))	appli	cable) (lesser of \$20,000 or 5% of
	applicable to the act		-	(1010 0100 (0))		col (e))
					 	
	· · · · · · · · · · · · · · · · · · ·					
Part II	Summary of Tax Liabilit	ÿ of Self-Deale	ers and Proratio	n of Payments		
	(a) Names of self-dealers liable for	tax	(b) Act no from Part I, col (a)	(c) Tax from Part I, col (f), or prorated amount		(d) Self-dealer's total tax liability (add amounts in col (c)) (see instructions)
- •		•				•
				<u> </u>		
					·	
			<u> </u>	· · · · · · · · · · · · · · · · · · ·		
Part III	Summary of Tax Liabili	ty of Foundation	on Managers an	d Proration of Payments		(d) Managaria tatal tay kabildir
	(a) Names of foundation managers liat	ole for tax	(b) Act no from Part I, col (a)	(c) Tax from Part I, col (g), or prorated amount		(d) Manager's total tax liability (add amounts in col (c)) (see instructions)
					<u>.</u>	,- ·
			-			
				· · · · · · · · · · · · · · · · · · ·		
	-			•		
	SCHEDUL	EB - Initial Ta	ax on Undistri	buted Income (Section 4	1942)
	idistributed income for years be	•			1	
2 Un	idistributed income for 2016 (fro	m Form 990-PF	for 2017, Part X	III, line 6e)	2_	
	tal undistributed income at end			-	_	
	der section 4942 (add lines 1 ai	,			3	

Form 4720 (2017)

Rusinoss Holdi	SCHEDU ings and Compu	LE C - Initial Tax on	Exce	ss Bus	iness Hold	ings (Se	ction 494	13)
			iness e	enterprise	e. attach a ser	parate sche	dule for ea	ach enterprise Refer to th
instructions for ea	ach line item befor	e making any entries		лиогрио	s, attaon a so,	Jarate Jone	0010 101 00	
Name and address	of business enterpris	e						_
-								
								
Employer-identific	cation number	en a arabara a a <u>l</u> a a ala				·· • <u>• • • •</u>	.	
orm of enterpris	se (corporation, pa	irtnership, trust, joint ve	nture,	sole prop	orietorship, etc			
				l vo	(a) ting stock	(b Vati		(c) Nonvoting stock
					ts interest or (icial interest)			(capital interest)
				bener	iciai interest)			 .
					0/		04	
Foundation h	ioldings in busines	s enterprise	1_1_		%		%	
Permitted ho	oldıngs in business	enterprise	2		%		%	
	5							
	•	siness enterprise	3					
	_	sposed of within 90 excess holdings not						
		(attach statement)						
		business enterprise						
- line 3 minus	s line 4		5					
	00/ of loo E		- ۾ ا-					
		line 6, columns (a),					I	
(b), and (c),	enter total here a	nd on Part I, line 2	7			THE PROPERTY.	- a publication	agginatings part and properties of the propertie
		on Investments Th	at Je	opardiz	e Charitabl	e Purpos	e (Section	on 4944)
Part I Inve	stments and Ta	ix Computation			1			
(a) Investment number	(b) Date of investment	(c) Description of in	vestmen	t	(d) Amount investment	of found	nitial tax on ation (10% of col (d))	(f) Initial tax on foundation managers (f applicable) - (lesser of \$10,000 or 10% of col (d))
1								
3					<u> </u>			
4								
5								
) Enter here and		<u></u>	<u></u>				The state of the s
		orated amount) here a				of Paymon	te	<u> </u>
	es of foundation manag		(b) inv	estment -	(c) Tax from P			(d) Manager's total tax liability
				n Part I, (a)		amount		(add amounts in col. (c)) (see instructions)
•								
					· · · · · · · · · · · · · · · · · · ·	•		

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		}	_	-				
								Form 4720 (201

	•	SCHEDULE E	- Initial Taxes	s on Taxable	Expend	litures (S	ection 4945)	
Part I	Expenditure	s and Computat				····	·	
(a) Item number	(b) Amount	(c) Date paid or incurred	(d) N	lame and address of	of recipient	_	(e) Description	on of expenditure and purposes for which made
1	10090	07/24/2017	Scholarship	America, Inc			2017 Scholars	ship Program; Education
2								
3					•			
4							- 1	
5						_	/EX 1=.4.=1	Annual de Santadahan
	on number from Form 9 27, Part VI-B, applicab		(g) In	itial tax imposed on (20% of col (b))	manager	tax imposed on foundation s (if applicable) - (lesser of 000 or 5% of col (b))
Form 990)-PF, Part VII-B	, Line 5b				2018		505
_								
				<u> </u>				<u> </u>
Total - Co	lumn (g) Enter he	ere and on						*
Part I, line	4					2018	#	
Total - Co	lumn (h) Enter to	tal (or prorated ar	mount) here an	d ın Part II, colu	mn (c),			.
pelow		<u> </u>	<u> </u>					505
Part II	Summary of	Tax Liability of	Foundation N	Managers and	Prorat	ion of Pa	yments	
	(a) Names of found:	ation managers liable fo	r tax	(b) Item no from Part I, col (a)	(c)	Tax from Pa prorated	rt I, col (h), or amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)
N/A								<u> </u>
	•		-					4
								_
							<u>-</u>	
								-
		SCHEDULE F	- Initial Taxes	on Political	Expend	litures (S	ection 4955)	
Part I	Expenditure	s and Computat	ion of Tax					
(a) Item number	(b) Amount	(c) Date paid or incurred	(d) Descriptio	on of political expen	diture	organiza	I tax imposed on tion or foundation % of col (b))	(f) Initial tax imposed on managers (if applicable) (lesser of \$5,000 or 2 1/2% of col. (b))
1								
2								
3								
4								
5								
Гotal - Co	lumn (e) Enter h	ere and on Part I, I	ne 5	<u> </u>				
		tal (or prorated an						
Part II	Summary of	Tax Liability of	Organization	Managers of	r Found	lation Ma	nagers and Pi	roration of Payments
		ganization managers or anagers liable for tax		(b) Item no from Part I, col (a)	(c)	Tax from Pa prorated	rt I, col (f), or amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)
	· • · · ·			<u> </u>			<u>-</u>	
					-	-		
						_		_
								4
		-						
								4
				<u> </u>			· · · · · · · · · · · · · · · · · · ·	4
				1				1

Form 4720 (2017)

				it Transactions (Section 49	108) Continuea
Part II	Summary of Tax	Liability of Disqualified	Persons a	nd Proration of Payments	(d) Disguishfield assessed Astellia
	(a) Names of disqualified	persons liable for tax	(b) Trans no fr Part I, col (a)	om (c) Tax from Part I, col (e), or prorated amount	(d) Disqualified person's total tax liability (add amounts in col. (c)) (see instructions)
					
				•	
				<u> </u>	
			·-·-		
Dort III	Summany of Tay	liability of 504(a)(2) (a)(A) 8 (a)(29)	Organization Managers ar	nd Proration of Payments
Part III			(b) Table 10 for		(d) Manager's total tax liability
(a) Names of 5	601(c)(3), (c)(4) & (c)(29) o	rganization managers liable for tax	(b) Trans no fro Part I, col (a)	or prorated amount	(add amounts in col. (c)) (see instructions)
					
		_			
					
			-		
· · · · · · · · · · · · · · · · · · ·			-		
	00UEDIUE I	Tarre de Daine a Dant	. As Dushil	ited Tou Chalten Transaction	(Section 4065)
Part I				pited Tax Shelter Transaction ix Imposed on the Tax-Exer	
Parti	(see instructions)	menter Transactions (i i	O 1 / alia 18	ix imposed on the rax-exer	inpt Linity
(a) Transactio number	(h) Transaction	(c) Type of transaction 1 - Listed 2 - Subsequently listed 3 - Confidential 4 - Contractual protection		(d) Description of	transaction ⁻
1					
2			_		
3				•	
-					
4			<u></u>	<u> </u>	
5					
have reason was a PTST v	ix-exempt entity know or to know this transaction when it became a party to ion? Answer Yes or No	(f) Net income attributable to the PTST	0 - (3) 75% of proceeds attributable to the PTST	(h) Tax imposed on the tax-exempt entity (see instructions)
	-				
			-		
Total - Colu	ımn (h) Enter here a	and on Part I, line 9			
					Form 4720 (201

Part II	Tax Imr	oosed on Entity Managers (Sec	ction 496	65) Ca	ontin	ued		
	-	Name of entity manager	(b) Tra	nsaction er from col (a)		(c) Tax - enter \$20,0 transaction listed in co manager in co	of (b) for each	(d) Manager's total tax liability (add amounts in col. (c))
					-		-	
	_		+		+-			
		·		-			-	-
							•	<u> </u>
		-						
					-			
	SCH	HEDULE K - Taxes on Taxable Advised Fur	Distribut	tions o	of S	oonsoring Orgar) See the instruc	nizations Mai	ntaining Donor
Part I	Taxable	Distributions and Tax Compu				,		
(a) Item number		(b) Name of sponsoring organization donor advised fund	on and				(c) Description (of distribution
1								
2								
				-				
3								
4								
	L	<u> </u>		Τ	(f) T	ax imposed on	(g)	Tax on fund managers
(d) Date of d	stribution	(e) Amount of distribution		organization (20% of col (e))		(le	sser of 5% of col (e) or \$10,000)	
						<u> </u>		
		Enter here and on Part I, line 10		<u> </u>	1		*	<u> </u>
Part II	mn (g) Summa	Enter total (or prorated amount) he ry of Tax Liability of Fund Man	agers a	nd Pro	orati	on of Payments		
		of fund managers liable for tax	(b) Item no	o from		c) Tax from Part I, col (amount	g) or prorated	(d) Manager's total tax liability (add amounts in col (c)) (see instructions)
	·····, ······							. 2 0 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2
						_	-	
								-

SCHEDULE L - Taxes on Prohibited Benefits Distributed From Donor Advised Funds (Section 4967) See the instructions

Part I	Prohibited Benefits a	nd Tax Computa	ition	
(a) Item number	(b) Date of prohibited benefit		(c) [Description of benefit
1				•
2				
3				
4				
5				
(d) Amo	ount of prohibited benefit		onor advisors, or related persons (d)) (see instructions)	(f) Tax on fund managers (if applicable) (lesser of 10% of col (d) or \$10,000) (see instructions)

Part II	Summary of Tax Liab	lity of Donors, D	Oonor Advisors, Related	d Persons, and Proration of Payments
(a) Names o	of donors, donor advisors, or d persons liable for tax	(b) Item no from Part I, col (a)	(c) Tax from Part I, col (e) or prorated amount	(d) Donor's, donor advisor's, or related person's total tax liability (add amounts in col. (c)) (see instructions)
·				
Part III	Summary of Tax Liab	l ility of Fund Mar	nagers and Proration o	f Payments
(a) Names of	f fund managers liable for tax	(b) Item no from Part I, col (a)	(c) Tax from Part I, col (f) or prorated amount	(d) Fund manager's total tax liability (add amounts in col. (c)) (see instructions)
			_	
- May be and and and				
	· · · · · · · · · · · · · · · · · · ·			
				4720

Schedule M - Tax on Hospital Organization for Failure to Meet the Community Health Needs Assessment Requirements (Sections 4959 and 501(r)(3)) (See instructions)

Part I	Failures to Meet Section	501(r)(3)		· ·
(a) Item number	(b) Name of hospital facility	(c) Description of the failure	(d) Tax year hospital facility last conducted a CHNA	(e) Tax year hospital facility last adopted an implementation strategy
1				_
. 2				
3				
4				
5	· · · · · · · · · · · · · · ·			
Part II	Computation of Tax			
1 Nui	mber-of-hospital-facilities-opera	ated by-the-hospital organization that-failed-to-meet	the Community	
He	alth Needs Assessment require	ements of section 501(r)(3)	1	
		line 1 here and on Part I, line 12		
	<u> </u>			F 4720 (2047)

-	7)		`_ ,	Page 1
	Under penalties of perjury, I decla knowledge and belief it is true, cor any knowledge	are that I have examined this return rect, and complete Declaration of p	n, including accompanying schedules ireparer (other than taxpayer) is based	and statements, and to the best of n on all information of which preparer ha
			SECRETARY	<u> </u>
	Signature of officer or trustee W	. SCOTT SEELEY	Title	Date
	Signature (and organization or advisor, or related person	entity name if applicable) of manager,	self-dealer, disqualified person, donor, do	onor Date
Sign Here				
	Signature (and organization or of advisor, or related person	entity name if applicable) of manager,	self-dealer, disqualified person, donor, do	onor Date
		entity name if applicable) of manager,	self-dealer, disqualified person, donor, do	onor Date
	advisor, or related person		self-dealer, disqualified person, donor, do	
	advisor, or related person Signature (and organization or or			
	advisor, or related person Signature (and organization or dadvisor, or related person	entity name if applicable) of manager,		onor Date
	Signature (and organization or eadvisor, or related person Signature (and organization or eadvisor, or related person	entity name if applicable) of manager,	self-dealer, disqualified person, donor, do	onor Date
Paid	Signature (and organization or eadvisor, or related person Signature (and organization or eadvisor, or related person	entity name if applicable) of manager,	self-dealer, disqualified person, donor, do	onor Date
	Signature (and organization or advisor, or related person Signature (and organization or advisor, or related person May the IRS discuss this return with the	entity name if applicable) of manager, entity name if applicable) of manager, entity name if applicable) of manager, the preparer shown below? (see instr	self-dealer, disqualified person, donor, do	onor Date Onor Date Onor Date Onor Date Onor Date