

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

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

FOIC	alend	lar year 2017 or tax year beginning ,	and ending					
Nan	e of fou	ndation			A Emplo	yer identification number		
		I FAMILY FOUNDATION INC				-6249234		
		rstreet (or P O box number if mail is not delivered to street address)	R	oom/suite		none number (see instruction:	5)	
		AARON STREET . state or province, country, and ZIP or foreign postal code			94.	1-628-0799		
•		CHARLOTTE FL 33952			C If exen	nption application is pending,	check here	لا ا
G C	heck a	all that apply: Initial return Initial return	urn of a former public c	hanty	D 1. Fo	reign organizations, check he	ere	▶ □
		Final return Amended		•	2. Fo	reign organizations meeting t	h e	
		Address change Name ch	ange			% test, check here and attach		▶ 🔲
H C	neck t	ype of organization: X Section 501(c)(3) exempt private	te foundation	-1()	E If priva	ite foundation status was tern	ninated under	_
			ble private foundation	ĐΥ		n 507(b)(1)(A), check here		▶ 📙
I Fa	ir mar	ket value of all assets at J Accounting method:	[rual	F If the f	oundation is in a 60-month te	rmination	
en	d of ye	ear (from Part II, col. (c), Other (specify)		i	under	section 507(b)(1)(B), check h	ere	▶ [_]
line	e 16) J	▶ \$ 1,309,970 (Part I, column (d) mus	t be on cash basis)	,	<u> </u>		,	
Pa	rt I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net inv	estment	(c) Adjusted net	(d) Disburse for chanta	
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	inco	me	income	purpose (cash basis	
	1	Contributions, gifts, grants, etc , received (attach schedule)	51,420	 			(0.30.1) 0.22.0	
}	2	Check ▶ ☐ if the foundation is not required to attach Sch B	· · · · · · · · · · · · · · · · · · ·					
	3	Interest on savings and temporary cash investments	3,218		3,218			
[4	Dividends and interest from securities	21,140		21,140			
	5a	Gross rents						
<u>a</u>	b	Net rental income or (loss)		<u> </u>			<u> </u>	
Ę Ì	6a	Net gain or (loss) from sale of assets not on line 10	9,335				<u></u>	
Revenue	b	Gross sales price for all assets on line 6a 132,713	3	 				
~	7	Capital gain net income (from Part IV, line 2)			9,335	0	 	
1	8	Net short-term capital gain		ļ			<u> </u>	
	9	Income modifications		 			 	
1	10a b	Gross sales less returns and allowances Less: Cost of goods sold	 				 -	
	c	Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)	 			_ 		
	12	Total. Add lines 1 through 11	85,113		33,693	0		
S	13	Compensation of officers, directors, trustees, etc.	C				MANUAL PROPERTY.	
penses	14	Other employee salaries and wages				日本の間	VED	
ē	15	Pension plans, employee benefits					2	!
	16a	Legal fees (attach schedule)		<u> </u>		B AUG 20	2018	
ė.	b	Accounting fees (attach schedule) STMT 1	2,100		1,680	8 AUG-21		
ţ	C	Other professional fees (attach schedule) STMT 2	3,028	 	3,028	OGDE	N. UI	
štra	17	Interest Company	1.05	 	1 050			
ini	18	Taxes (attach schedule) (see instructions) STMT 3	1,256	' 	1,256	<u> </u>	 	
E	19 20	Depreciation (attach schedule) and depletion Occupancy		 			 	
¥	21	Travel, conferences, and meetings		 			 	
בַּ	22	Printing and publications		†			<u> </u>	
Operating and Administrative Ex	23	Other expenses (att sch) STMT 4	539					469
ţ	24	Total operating and administrative expenses.						
era		Add lines 13 through 23	6,923		5,964	0		469
ď	25	Contributions, gifts, grants paid	29,584		_			9,584
	26	Total expenses and disbursements. Add lines 24 and 25	36,507	<u>'</u>	5,964	0	3	0,053
	27	Subtract line 26 from line 12:		.[!			
	a	Excess of revenue over expenses and disbursements	48,606	 	27 722		 	
	b	Net investment income (if negative, enter -0-)		 	27,729			
	C	Adjusted net income (if negative, enter -0-) work Reduction Act Notice, see Instructions.		10		<u></u>	Form 990-	PF (2017)

Cash - non-interest-beaming 3,4,466 34,46		art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of y	vear
2 Savings and temporary cash Investments 3 Accounts receivable ▶ Lass: allowance for doubful accounts ▶ Less: allowance for doubful accounts ▶ 6 Grants receivable ▶ Less: allowance for obubful accounts ▶ 7 Obtanies aclaumination (attach schedule) (see instructions) 7 Obtanies aclaumination (attach schedule) (see instructions) 7 Obtanies aclaumination (attach schedule) (see instructions) 8 Investments – Use and sets government obligations (attach schedule) 9 Prepare developes and obligations (attach schedule) 1 Investments – Outported sock (attach schedule) 1 Investments – comporate bonds (attach schedule) 1 Investments – outporate bonds (attach schedule) 1 Investments – comporate bonds (attach schedule) 1 Total includines (attach schedule) 2 Investments – comporate bonds (attach schedule) 3 Investments – comporate bonds (attach schedule) 3 Investments – comporate bonds (attach schedule) 3 Investments – comporate bonds (attach sched		- art i		(a) Book Value	(b) Book Value	(c) Fair Market Value
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Less allowance for doubtul accounts	-	2	Savings and temporary cash investments	102,469	59,715	59,715
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tess excuratified deprecision (latan to x) ► Less excuratified deprecision (latan to x) ► Investments — other (attach schedule) SEE STATEMENT 7 260,452 263,671 263,671 14 Land, buildings, and equipment basis ► Less excuratified deprecision (latan to x) ► 15 Other assets (clescribe ► 16 Total assets (to be completed by all filers – see the instructions Aiso, see page 1, item t) 17 Accounts payable and accrued expenses 18 Grants payable 20 Loans from officers, directors, trustees, and other disqualified persons Windigages and other notes payable (lattan schedule) 21 Mortgages and other notes payable (lattan schedule) 22 Loans from officers, directors, trustees, and other disqualified persons Windigages and other notes payable (lattan schedule) 21 Mortgages and other notes payable (lattan schedule) 22 Loans from officers, directors, trustees, and other disqualified persons Windigages and other notes payable (lattan schedule) 23 Total liabilities (describe ► 24 Lorrestincted 5 Temporanity restricted 5 Temporanity restricted 5 Temporanity restricted 6 Foundations that follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Pad-in or capital surplus, or land, bidg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total liabilities and net assets/fund balances (see instructions) 1 1,186,167 1,234,773 1,186,167 1,234,773 1,186,167 1,234,773 1,186,167 1,234,773 1 1,186,167 2 48,606 3 4 1,234,773 5 Decreases not included in line 2 (Itemize) ► 5 S	1	b	Investments – corporate stock (attach schedule) SEE STMT 6	816,200	870,898	945,894
Less accumulated deprecation (attach sch)	- 1	С	Investments – corporate bonds (attach schedule)			
Investments - mortgage loans Investments - other (attach schedule) SEE STATEMENT 7 260,452 263,671 263,	Ì	11	Investments – land, buildings, and equipment basis			
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18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe ►))	\perp		instructions Also, see page 1, item I)	1,186,167	1,234,773	1,309,970
19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe ▶) 23 Total liabilities (add lines 17 through 22) 30 Total liabilities (add lines 17 through 22) 40 O O 40 Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporanly restricted 26 Permanently restricted 27 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 28 Paid-in or capital stock, trust principal, or current funds 29 Retained earnings, accumulated income, endowment, or other funds 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions) 4 Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on pnor year's return) 4 Total liabilities and net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on pnor year's return) 5 Total liabilities and 3 6 Other increases not included in line 2 (itemize) ▶ 7 Total liabilities and 1 Ine 27 (itemize) ▶ 8 Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on pnor year's return) 5 Decreases not included in line 2 (itemize) ▶ 8 Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on pnor year's return) 9 Total line 1 Ine 27 (itemize) ▶ 9 Total line 2 (itemize) ▶ 9 Total line 3 (itemize) ↑ 9 Total line 3 (itemize) ↑ 9 Total line 3 (ite		17	Accounts payable and accrued expenses			
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Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Unrestricted Temporanily restricted Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see instructions) Total liabilities and net assets/fund balances (see instructions) Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27 Add lines 1, 2, and 3 Decreases not included in line 2 (itemize)	<u>ie</u>	19	Deferred revenue			•
Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Unrestricted Temporanily restricted Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see instructions) Total liabilities and net assets/fund balances (see instructions) Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27 Add lines 1, 2, and 3 Decreases not included in line 2 (itemize)	Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			
Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Unrestricted Temporanily restricted Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see instructions) Total liabilities and net assets/fund balances (see instructions) Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27 Add lines 1, 2, and 3 Decreases not included in line 2 (itemize)	멸	21	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. 24 Unrestricted 25 Temporanly restricted 26 Permanently restricted 27 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total ret assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 3 Add lines 1, 2, and 3 4 Decreases not included in line 2 (itemize) 5	ᅦ	22	Other liabilities (describe ▶)			
and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 28 Paid-in or capital surplus, or land, bldg , and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions) 31 Total net assets or fund balances (see instructions) 31 Total net assets or fund balances at beginning of year − Part III. column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 29 Enter amount from Part I, line 27a 30 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5		23	Total liabilities (add lines 17 through 22)	0	0	
24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total ret assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 29 Enter amount from Part I, line 27a 30 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5	\exists		Foundations that follow SFAS 117, check here			
Instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) ▶ Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) ▶ 5	es.		and complete lines 24 through 26 and lines 30 and 31.			
Instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) ▶ Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) ▶ 5	2	24	Unrestricted			
Instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) ▶ Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) ▶ 5	믕	25	Temporarily restricted			
Instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) ▶ Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) ▶ 5	8	26 .	Permanently restricted			
Instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) ▶ Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) ▶ 5	Ĭ		Foundations that do not follow SFAS 117, check here			
Instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) ▶ Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) ▶ 5	딘		and complete lines 27 through 31.			
Instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) ▶ Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) ▶ 5	0	27	Capital stock, trust principal, or current funds			
Instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) ▶ Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) ▶ 5	ĕ	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
Instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) ▶ Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) ▶ 5	S	29	Retained earnings, accumulated income, endowment, or other funds	1,186,167	1,234,773	
Instructions) Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year − Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) ▶ Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) ▶ 5	듩	30	Total net assets or fund balances (see instructions)	1,186,167	1,234,773	
Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5	Ž	31	Total liabilities and net assets/fund balances (see			
Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5			instructions)	1,186,167	_ 1,234,773	
end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5	<u></u> F	art II	Analysis of Changes in Net Assets or Fund Balances			
2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5	1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 30 (m	ust agree with		
2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5		end-o	f-year figure reported on prior year's return)	-	1	1,186,167
3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5	2				2	
5 Decreases not included in line 2 (itemize) ▶	3	Other	ıncreases not included in line 2 (itemize) ▶		3	
5 Decreases not included in line 2 (itemize) ▶	4	Add li	nes 1, 2, and 3		4	1,234,773
6 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30 6 1, 234, 773	5	Decre	eases not included in line 2 (itemize)		5	
	6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, column	(b), line 30	6	1,234,773

Part IV Capital Gains a	<u>nd Losses for Tax on Investme</u>	nt Income	, 		
2-story brick wa	the kind(s) of property sold (for example, real estate, arehouse, or common stock, 200 shs MLC Co)		(b) How acquired P – Purchase D – Donation	(c) Date acqu (mo , day, y	
1a SEE WORKSHEET					
b					
<u> </u>			 +		
<u>d</u>			+		
	(0.0)	(-1.0			
(e) Gross sales pnce	(f) Depreciation allowed (or allowable)		r other basis ense of sale		(h) Gain or (loss)
a					
<u>b</u>					
<u> </u>			-		
<u>d</u>					
Complete only for assets showin	g gain in column (h) and owned by the fo	aundation on 12/31/6	69		
Complete only for assets shown			ss of col (I)		ins (Col. (h) gain minus , but not less than -0-) or
(I) FMV as of 12/31/69	(J) Adjusted basis as of 12/31/69	• • •	(j), if any		osses (from col (h))
a					
b					
C					
d					
е					
2 Capital gain net income or (net c	apital loss) If gain, also enter in If (loss), enter -0- in			2	9,335
3. Not short term capital gain or /lo	_ ` ^	_	f		
	ss) as defined in sections 1222(5) and (6	· —	ļ		
Part I, line 8	, column (c). See instructions. If (loss), e	nter-0- iii		3	-680
	nder Section 4940(e) for Reduc	ed Tax on Net	Investment Inco	me	
	foundations subject to the section 4940				
	-	(4) (4)	,		
If section 4940(d)(2) applies, leave the	iis part biank.				
	tion 4942 tax on the distributable amoun	• •	base penod?		Yes X No
	lify under section 4940(e). Do not comple				
	each column for each year; see the instr	uctions before maki	ing any entries		
(a) Base penod years	(b)	ĺ	(c)		(d) Distribution ratio
Calendar year (or tax year beginning in			e of noncharitable-use asset	'	(col (b) divided by col (c))
2016	42	,172	1,125,8		0.037459
2015		,570	1,105,2		0.072895 0.046286
2014		, 930 161	1,121,9	140	0.056834
2013		,161 ,430	988,		0.026740
2012		, 430	900,.	792	0.020740
2. Total of line 1. column (d)				2	0.240214
2 Total of line 1, column (d) 3 Average distribution ratio for the	5-year base period – divide the total on I	ing 2 by 5.0 or by th	he	-	0.24021
_	nas been in existence if less than 5 years		116	3	0.048043
number of years the roundation i	nas been in existence in less than 5 years	•		-	
4 Enter the net value of noncharita	ible-use assets for 2017 from Part X, line	. 5		4	1,230,61
2 Enter the flet value of fletionalities	ione add addition 2017 from Fair A, into	. 0			
5 Multiply line 4 by line 3				5	59,122
,					
6 Enter 1% of net investment inco	me (1% of Part I. line 27b)			6	27
	(
7 Add lines 5 and 6				7	59,399
					
8 Enter qualifying distributions from	n Part XII, line 4			8	30,053
If line 8 is equal to or greater tha	in line 7, check the box in Part VI, line 1b	, and complete that	t part using a 1% tax r	ate See the	
Part VI instructions					

Form	990-PF (2017) IMAMI FAMILY FOUNDATION INC 65-6249234			<u>Pa</u>	ge 4
<u>Pa</u>	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)				
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1				
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			_	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check				<u>555</u>
	here ▶ ☐ and enter 1% of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of				
	Part I, line 12, col. (b)				_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)				0
3	Add lines 1 and 2				<u>555</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)				0
5	Tax based on Investment income. Subtract line 4 from line 3 If zero or less, enter -0-				555
6	Credits/Payments				
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 1,300				
b	Exempt foreign organizations – tax withheld at source				
C	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld 6d 6d	-			
7	Total credits and payments Add lines 6a through 6d			1,3	<u> </u>
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached				3
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				142
<u> 11 </u>	Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ 742 Refunded ▶ 11				
<u>Pa</u>	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	L		Yes	No
	participate or intervene in any political campaign?	_	1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the				
	Instructions for the definition	-	1b		<u> </u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities	1		-	
С	Did the foundation file Form 1120-POL for this year?	ļ.	1c		<u>X</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.				
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers \$	ļ		l	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		<u> </u>
	If "Yes," attach a detailed description of the activities.		Ī	İ	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	ł	1	}	
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	L	3		<u> </u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	,	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	I/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	L	5		X
	If "Yes," attach the statement required by General Instruction T	1	1	\	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	1	ľ		
	By language in the governing instrument, or		ļ	ļ	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?	L	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶				
	FL		ļ	l	
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		-		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	1	İ	1	
	4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017? See instructions for Part XIV. If "Yes,"			- 1	\neg
	complete Part XIV		9		<u>x</u>]
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		Ī		
	names and addresses		10		<u>X</u>
		r-	9 9	N-DE	(2017)

_Pa	irt VII-A Statements Regarding Activities (continued)					
11	At any time during the year did the foundation departs as induced, our controlled on the pathin the				Yes	No
••	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			11	ı j	х
12	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			 		_ -
12	person had advisory privileges? If "Yes," attach statement. See instructions			12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applie	ration?		13	X	
	Website address ► N/A			رسين	للتتا	
14	The books are in care of ▶ RIAZUL H IMAMI Tele	phone no. I	941-6	28-	079	9
	2118 AARON STREET					
	Located at ▶ PORT CHARLOTTE FL	ZIP+4	→ 33952	2		
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	▶ [15			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority	,			Yes	No
	over a bank, securities, or other financial account in a foreign country?			16	L	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			}		Ì
	the foreign country			L		L
_Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u>1</u>		,		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	During the year, did the foundation (either directly or indirectly):	_	E-21	ł	ł	}
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No	Ì	Ì	1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	_		{	{	1
	disqualified person?	Yes	X No]]	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No	}	ŀ	}
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No	}	1	1
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	_	GF)	1	1	į
	the benefit or use of a disqualified person)?	Yes	X No	ĺ	1	}
	(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	Г .,	₩	Ì	}	
_	termination of government service, if terminating within 90 days)	Yes	X No	1	1	ļ
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regul	ations	N/A	١.,]	1
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions		N/A	1b	├	
	Organizations relying on a current notice regarding disaster assistance, check here			l	}	}
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			۱	1	x
•	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			}	ļ	1
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			}	ŀ	1
a	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and	Yes	X No		1	
	6e, Part XIII) for tax year(s) beginning before 2017? If "Yes," list the years ▶ 20 , 20 , 20 , 20		110	{	ļ	1
ь	If "Yes," list the years ► 20 , 20 , 20 , 20 , 20 Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)				}	1
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	0		}	1	}
	all years listed, answer "No" and attach statement – see instructions)		N/A	2b	}	1
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		,	<u> </u>	†	1
•	► 20 , 20 , 20 , 20			}	1	1
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			1	}	}
	at any time during the year?	Yes	X No	}	}	}
ь	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or	30	۰۰۰ نیت	1		ł
-	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			1	1	1
	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	-		1		}
	foundation had excess business holdings in 2017)		N/A	3b	1	1
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpose	ses?	,	4a	1	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize				1	T
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in			4b	1	X
_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				00 0	F (2017)

Forn	990-PF (2017) IMAMI FAMILY			249234			['] Page 6
<u>Pa</u>	art VII-B Statements Regarding	Activities for Which Fo	orm 4720 May Be R	equired (conti	nued)		
5a	During the year did the foundation pay or in	•		□]
	(1) Carry on propaganda, or otherwise atte	- · · · · · · · · · · · · · · · · · · ·	, .,	Y	es 🗶 No	}	}
	(2) Influence the outcome of any specific p	· ·	s), or to carry on,	т,	es X No	}	ļ
	directly or indirectly, any voter registrati		0	—) (E)	}	ł
	(3) Provide a grant to an individual for trave	• •		·	es X No	}	ł
	(4) Provide a grant to an organization other section 4945(d)(4)(A)? See instructions	• • •	ation described in	П	es 🗓 No	1	
	(5) Provide for any purpose other than relig		any or advectional	U'	es 🔟 NO	1	Ì
	purposes, or for the prevention of cruel		ary, or educational	\sqcap	es X No		
ь	If any answer is "Yes" to 5a(1)–(5), did any		wunder the exceptions d		es <u>11</u> 140	(
-	Regulations section 53 4945 or in a current		,	CSDIIDCG III	N/A	5b	İ
	Organizations relying on a current notice re				▶ 1		
C	If the answer is "Yes" to question 5a(4), does	•			·		- }
•	because it maintained expenditure respons	·		N/A 🗍 Y	es No	}	1
	If "Yes," attach the statement required by R		1)			}	
6a	Did the foundation, during the year, receive	•	•			}	
	on a personal benefit contract?	,,,, o,	, p, p		es 🗓 No	- 1	1
b	Did the foundation, during the year, pay pre	miums, directly or indirectly, on	a personal benefit contr	act?		6ь	x
	If "Yes" to 6b, file Form 8870	•	,		Ī		
7a	At any time during the tax year, was the fou	indation a party to a prohibited t	tax shelter transaction?		es X No)	1
b	If "Yes," did the foundation receive any production	ceeds or have any net income a	ttributable to the transac	tion?	N/A	7b	
Pa	art VIII Information About Office	ers, Directors, Trustees	s, Foundation Mana	agers, Highly	Paid Employe	es,	
	and Contractors		 		<u> </u>		
1 1	ist all officers, directors, trustees, and fo	undation managers and their	compensation. See ins	tructions.			
	(a) Name and addr	ess	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		ense account, allowances
RI	AZUL H. IMAMI	PORT CHARLOTTE	DIRECTOR				
21	.18 AARON ST	FL 33952	1.00	0	0		0
A2	RA R. IMAMI	PORT CHARLOTTE	DIRECTOR				
21	18 AARON ST	FL 33952	1.00	0	0	<u></u>	0
IF	FAN R. IMAMI	PORT CHARLOTTE	DIRECTOR				
21	18 AARON ST	FL 33952	1.00	0	0		0
				į			
2	Compensation of five highest-paid emple "NONE."	oyees (other than those inclu	ded on line 1 – see inst	tructions). If non	e, enter	L	
	(a) Name and address of each employee paid	more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation		ense account, allowances
NC	NE.						
							
							
Tota	I number of other employees paid over \$50,0						

Form 990-PF (2017)

Form 990-PF (2017) IMAMI FAMILY FOUNDATION INC	65-6249234	Page 7
Part VIII Information About Officers, Directors, Trustees, Found	ation Managers, Highly Paid Er	nployees,
and Contractors (continued) 3 Five highest-paid independent contractors for professional services. See instru	ctions. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
·	1	
•	1	ŀ
	• • •	}
Total number of others receiving over \$50,000 for professional services		>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information statistical activities during the tax year. Include relevant statistical information statistical activities during the tax year.	uch as the number of	Expenses
1 N/A		
		
2	ł	
		<u></u>
3		
4		
Part IX-B Summary of Program-Related Investments (see instru-		
Part IX-B Summary of Program-Related Investments (see Instruir Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	ciions)	Amount
1 N/A		
2		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3		

Form 990-PF (2017)

Pa	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign	gn fou	indations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes.		4 450 046
а	Average monthly fair market value of securities	1a	1,159,346
þ	Average of monthly cash balances	1b	90,009
C	Fair market value of all other assets (see instructions)	1c	1 040 055
d	Total (add lines 1a, b, and c)	1d	1,249,355
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	1,249,355
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see	1 1	40 = 40
	instructions)	4	18,740
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,230,615
6_	Minimum investment return. Enter 5% of line 5	6	61,531
Pa	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	foun	dations
	and certain foreign organizations check here ▶ ☐ and do not complete this part.)		61 501
1	Minimum investment return from Part X, line 6	1	61,531
2a	Tax on investment income for 2017 from Part VI, line 5	, (
b	Income tax for 2017 (This does not include the tax from Part VI.)		555
С	Add lines 2a and 2b	2c	555 60,976
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	60,976
4	Recoveries of amounts treated as qualifying distributions	4	60 056
5	Add lines 3 and 4	5	60,976
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,	} {	60.00
	line 1	_7_	60,976
Pa	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish chantable, etc., purposes:		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	30,053
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 chantable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	30,053
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	\Box	
	Enter 1% of Part I, line 27b. See instructions	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	30,053
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found		
	qualifies for the section 4940(e) reduction of tax in those years		

Pa	rt XIII Undistributed Income (see instructions)				
		(a)	(b)	(c)	(d)
1	Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017
	line 7				60,976
2	Undistributed income, if any, as of the end of 2017				
а	Enter amount for 2016 only				
b	Total for pпог years. 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2017:	Į			
а	From 2012	}			
b	From 2013				
С	From 2014				
d	From 2015 3,818	}			
е	From 2016				
f	Total of lines 3a through e	3,818			
4	Qualifying distributions for 2017 from Part XII,				
	line 4: ▶ \$30,053				
а	Applied to 2016, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election		_ :-		
	required – see instructions)				
d	Applied to 2017 distributable amount				30,053
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2017	3,818			3,818
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as	Ì			
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract		1		
	line 4b from line 2b				
C	Enter the amount of pnor 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				
е	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				27,105
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)				<u></u>
9	Excess distributions carryover to 2018.				
	Subtract lines 7 and 8 from line 6a				<u></u>
10	Analysis of line 9		l		
а	Excess from 2013		,		
b	Excess from 2014				
С	Excess from 2015				
d	Excess from 2016				
_ <u>e</u> _	Excess from 2017				<u> </u>

Part XV Supplementary Information (co 3 Grants and Contributions Paid During the	ntinued)	Enture Deversed		
	If recipient is an individual,			
Recipient	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	reapient		
a Paid during the year SEE STATEMENT 8				
SEE STATEMENT 6			1 1	
•			1	29,584
]	
}			}	
			i i	
			{	
			}	
			{	
			Ì	
			}	
			}	
			1	
			- {	
			}	
			1	
			1	
		}	1	
4		}		
		ļ		
ł		}	}	
				
Total b Approved for future payment			▶ 3a	29,584
N/A		}		
• •		1		
		}		
+				
		{		
Total			▶ 3b	

$\overline{}$	art XVI-A		ivities				
En	ter gross am	ounts unless otherwise indicated	Unrelate	ed business income	Excluded i	by section 512, 513, or 514	(e)
			(a)	(b)	(c)	(d)	Related or exempt
	_		Business code	Amount	Exclusion code	Amount	function income (See instructions)
1		rvice revenue		<u> </u>			
	a			 			
				 			
				 	 		
			 	 	-}		
	f		 	 	++		
		nd contracts from government agencies	——	 	+-+		
2		o dues and assessments		 	+		
		savings and temporary cash investments		 	14	3,218	
4		nd interest from securities	-	 	14	21,140	
-		ncome or (loss) from real estate		 	+=-+		
-		anced property		†			
		ot-financed property			1		
6		ncome or (loss) from personal property		1			
		tment income					
8	Gain or (los	s) from sales of assets other than inventory			14	434	8,901
9	Net income	or (loss) from special events					
10	Gross profit	or (loss) from sales of inventory					
11	Other reven	ue: a					
	b						
	d		\				
	e						
		dd columns (b), (d), and (e)		<u> </u>	0	24,792	
		ine 12, columns (b), (d), and (e)				13	33,693
		in line 13 instructions to verify calculations)			<u></u>		
	art XVI-B	T					
	Line No. ▼	Explain below how each activity for which income accomplishment of the foundation's exempt purpo					200)
	N/A	accomplishment of the loandation's exempt purpo	oses (other that	it by providing fands	ioi sucii pui	poses). (See mandem	J. (3.)
_							
_	· · · · · ·						
				 			
							
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						<u> </u>	
		<u> </u>					
_		<u> </u>					
		<u> </u>					
_		 					
_							
—							
—		 					
		1					

		Exempt	Organiza	ations	ansiero ro an	u	iono una riciano	po		J.0		
1	Did the oras				ne in any of the foll	lowing with an	y other organization d	escribed		7 7	Yes	No
	-					_	, relating to political					
	organization			··· •• ·(•)(•)	, e. ga	00040 02.	, roldalig to political]]	ļ	
а	-		ntina found	ation to a no	onchantable exemp	nt organization	of:					1
_	(1) Cash	о а.о горо	g 100.10	0.5077 10 0 770	on and made oxem,	or organization				1a(1)	- 1	X
	(2) Other a	ceate								1a(2)		X
h	Other trans									10(2)		 -
U			, noncharit	able evemnt	organization					1b(1)	- 1	X
	• •			•	•					$\overline{}$		X
	- •				exempt organization	on				1b(2)		$\frac{x}{x}$
				or other ass	sets ,	•	•			1b(3)		X
	• •	irsement arr	•		• • •			•	•	1b(4)		X
		or loan guara	•		· · · · · · · · · · · · · · · · · · ·		• • •			1b(5)		X
					r fundraising solici			•		1b(6)		$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$
				-	other assets, or pai	, -				1c	لــــــــــــــــــــــــــــــــــــــ	<u> </u>
đ							lumn (b) should alway					
				_		-	If the foundation rece					
							of the goods, other as					
	a) Line no	(b) Amoun	t involved	(c) Name	e of nonchantable exem	pt organization	(d) Descripti	ion of transfers, trai	nsactions, and sharing	arrangeme	nts	
<u> N/</u>	,	}										
	·	ļ			 _							
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		<u> </u>										
		<u></u>										
		L										
	described in If "Yes," cor	section 50	1(c) (other ollowing scl	than section	with, or related to, 1 501(c)(3)) or in se	ection 527?	tax-exempt organization		ion of relationship		es X] No
1	I/A											
							schedules and statements, a		ny knowledge and beli	ef, it is true	9,	
	correct, a	na complete D	eciaration of p	reparer (other	tnan taxpayer) is based	on all information	of which preparer has any l	Knowledge	May the IRS di	scuss this r	eturn	
Sign	1		10		_				with the prepar		elow? Yes	¬ №
Here	•			سرننه					See mandano	<u> </u>	103	<u></u>
			Ama			2	5.15.18	DIRE	CTOR			
	Sign	ature of officer of	or trustee			C	ate	Title				
	Print/Tv	ype preparer's n	ame			Preparer's sign	ature	1	Date		Check	$\overline{\Box}$
						1		· /11 1.1	81	Wlid		nployed
Paid	MARG	ARET J.	WESTE	Y		n	700	- // years	7 1 9	11/18		
Prepa	arer Firm's r	name >	SUMME		STBY & SC	HILLER	CPAS		PTIN P	00131	107	<u> </u>
Use (Only	address >		BOX 5						-150		
	1			GORDA		951-030	8			1-63		
					<u>, </u>				, mono no			E (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** IMAMI FAMILY FOUNDATION INC 65-6249234 Organization type (check one). Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt chantable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, dunng the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

IMAMI FAMILY FOUNDATION INC

Employer identification number 65-6249234

Part I	Contributors (see instructions). Use duplicate copies of	f Part I if additional space is no	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RIAZUL H IMAMI 2118 AARON STREET PORT CHARLOTTE FL 33952	\$ 50,220	Person X 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) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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.)

Form 990-PF	Capital Gains and Losse	s for Tax on Investment Ir	ncome	2017
For calend	dar year 2017, or tax year beginning	, and ending	Employer Ide	ntification Number
aille			Employer ide	muncauon Numbe
IMAMI FAMILY FOUR	NDATION INC		65-6249	9234
(a) List and describ 2-story brick wa	e the kind(s) of property sold, e.g., real estate, rehouse, or common stock, 200 shs. MLC Co	(b) How acquired P-Purchase D-Donation	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
FNMA #31359W3B5		P	VARIOUS	VARIOUS
	3-RETURN PRINC	P	VARIOUS	VARIOUS
GNMA #P595154X-		P	VARIOUS	VARIOUS
WELLS FARGO #82 WELLS FARGO #82		P	VARIOUS	VARIOUS
		P	VARIOUS VARIOUS	VARIOUS VARIOUS
WELLS FARGO #73			VARCIOUS	VARIOUS
	" " " " " " " " " " " " " " " " " " " "			
0)				
1)	 		<u> </u>	<u> </u>
2)				
3)			 	
5)		-	 	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gai (e) plus (n or (loss) () minus (g)
293		293		
704		704		
181		181		
78,700		79,380		<u>-680</u>
52,125 276		42,820		9,305
404			 	276 434
434		 	 	
				
))				
)				
2)				
3)				
5)				- _
	ng gain in column (h) and owned by the		(I) Gains (C	ol (h) gain 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	col (k), but not le Losses (fro	of (h) gain minus ess than -0-) Of n col (h))
· · · · · · · · · · · · · · · · · · ·				
		 	 	-680 9,305
			 	<u>9,305</u> 276
	-		+	434
			 	
))				
1)				
2)				
3)	 	 	 	
4)	 			
5)	L			

Federal Statements

65-6249234

Statement 5 - Form 990-PF, Part II, Line 10a - US and State Government Investments

Fair Market Value	\$ 3,036 899 \$ 4,924
Basis of Valuation	COST COST COST
End of Year	919 2,830 974 4,723
	v v
eginning of Year	1,212 3,534 1,155 5,901
Be	w w
Description	FNMA CMO 1999 BOND FNMA CMO 2002 BOND GNMA P585154 TOTAL

Statement 6 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description	a	eginning of Year	!	End of Year	Basis of Valuation	щ	Fair Market Value
OPPENHEIMER INTERNATIONAL PRINCIPAL INVESTORS	w	110,719	᠕	114,448	COST	_የ	112,485 47,306
EATON VANCE GLBL MACRO PIONEER BOND FD CL C FATON VANCE EMERG MKTS		69, 344 90, 612 57, 690		92,583 92,583 57,921	COST		86,589 47,872
MFS INTL NEW DISCOURTS CL C MUTUAL SER FD EUROPEAN		14,581 29,779 25,208		14,917 29,865	COST		18,544 25,208
FINCO FLOATING INCOME PIMCO LOW DURATION CL A PIMCO LOW DURATION CL. C.		007107		11,356	COST		11,102
WELLS FARGO STOCK PORTFOLIO TOTAL	ς, V	356,214	· ω	400,219	COST	ا _س ا	500,174

Statement 7 - Form 990-PF, Part II, Line 13 - Other Investments

Fair Market Value	\$ 54,173 107,806 101,692 \$ 263,671
Basis of Valuation	COST COST COST COST
End of Year	54,173 107,806 101,692 263,671
Jinning Year	53,957 106,406 100,089 260,452 \$
Beg	w w
Description	CERTIFICATE OF DEPOSIT-BB&T CERTIFICATE OF DEPOSIT-OZARKS CERTIFICATE OF DEPOSIT-BANKUNITED CERTIFICATE OF DEPOSIT-FCB TOTAL

65-6249234

Federal Statements

Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

Name of Manager	 Amount
RIAZUL H IMAMI	\$ 50,220
TOTAL	\$ 50,220

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35
w.

Federal Statements

Statement 8 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Name	Address		
Address	Relationship Status	Purpose	Amount
CHARLOTTE COUNTY HOMELESS COALITION MURDOCK FL 33938	PO BOX	PREVENT HOMELESSNESS	200
CHARLOTTE HIGH SCHOOL	COOPER ST	SCIENCE AWARD	250
VTER	PO BOX 162		
	PC	ASSISTANCE TO INDIGENT	200
DARUL-ULOOM AL-MADANIA RIFEAIO NY 14212 NONE	182 SOBIESKI ST F	ASSISTANCE TO INDIGENT	200
COUNT	1445 EDUCAT		
PORT CHARLOTTE FL 33948 NONE	(ANTI-DRUG COALITION	1,000
FLORIDA SOUTHWESTERN COLLEGIATE HS PUNTA GORDA FL 33950 NONE		SCIENCE AWARD	250
BANK	3760 FOWLER ST	7000 A	005
FORT MYERS FL 33901 NONE HETDING HANDS	21199 HII.I.	FOOD BIDE	
SOUTHFIELD MI 48033 NONE	PC	ORPHAN SPONSORSHIP	730
	PO BOX 548	E	0000
SANTA CLARA CA 95056 NONE	PC 2333 ST TOHNS BIHER	ASSISTANCE TO INDIGENT	000 10
ISLAMIC CENIER OF NE FE INC. TACKSONVIILE FE 32246 NONE	2333 SI. COMNS BECT. PC	ASSISTANCE TO INDIGENT	200
DA I	3337 BROAD		
FORT MYERS FL 33901 NONE		ASSISTANCE TO INDIGENT	2,000
RTH AMERICA	87-91 144TF	e E	0
JAMAICA NY 11432 NONE		ASSISTANCE TO INDIGENT	002
ISLAMIC COMMUNITY OF SW FL	25148 HARBORVIEW RD	ASSISTANCE TO INDIGENT	2,000
OF NA	101 W 22ND ST, SUITE) 	•
	PC	ASSISTANCE TO INDIGENT	200
USA	PO BOX 222		00
	JE PC PIACIDA BD	ORPHAN SPONSORSHIP	0 0 0 0
LEMON BAY HIGH SCHOOL FNGIEWOOD FL 34224 NONE	PC PC FURNING PC	SCIENCE AWARD	250
	3418 W. AINSLIE		
IL 60625	1	ASSISTANCE TO INDIGENT	250
MEMORIAL SLOAN-KETTERING CANCER CIR HAGERSTOWN MD 21741	TR FO BOX 3028 IE PC	CANCER RESEARCH	200
MOFFITT CANCER CENTER FOUNDATION	PO BOX 23827		
TAMPA FL 33633 NONE		CANCER RESEARCH	200

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Statement 8 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name	Ac	Address	ļ	
Address	Relationship	Status	Purpose	Amount
MOSQUE FOUNDATION	7360 W. 93RD	D STREET		
BRIDGEVIEW IL 60455 NONE		PC	HELP NEEDY FAMILIES	200
	LAKEVIEW D			
PORT CHARLOTTE FL 33952 NONE		PC	SCIENCE AWARD	250
FOR CHILDREN	2900 ROCKY	POINT DR.		
		PC	PEDIATRIC CARE	200
SIUT NORTH AMERICA	L E KIVEKCKEST DK	EST UK	GON KESTSS K TKOTOGM	000000000000000000000000000000000000000
ACCOLUNIA //O42	501 ST	FC FINE PLACE	MEDICAL ASSISTANCE	000'2
	3	PC PC	MEDICAL ASSISTANCE	200
CENTER	7827 N.	WICKHAM RD		
MELBOURNE FL 32940 NONE		PC	ASSISTANCE TO INDIGENT	2,000
UMMAH RELIEF INTERNATIONAL	PO BOX 1426			
ELGIN IL 60121 NONE		PC	PURCHASE EQUIPMENT	200
VIRGINIA B. ANDES VOLUNTEER COMMUNI	II 21297 OLEAN BLVD UNIT	BLVD UNIT B		
PORT CHARLOTTE FL 33952 NONE		PC	HEALTH CARE	200
ZAKAT FOUNDATION OF AMERICA	PO BOX 639			
WORTH IL 60482 NONE		PC	ASSISTANCE TO INDIGENT	500
RISE FOR EQUALITY USA	11310 GRANDVIEW DR	VIEW DR		
DADE CITY FL 33525 NONE			PROMOTE YOUTH SPORTS	200
ISLAMIC SOCIETY OF FOLSOM	1835 PRAIRIE CITY RD	E CITY RD		
FOLSOM CA 95630 NONE		PC	BUILDING FUND	1,000
DOCTORS WITHOUT BORDERS	333 SEVENTH AVE,	AVE, 2ND FLR	Z.	
NEW YORK NY 10001 NONE			MEDICAL CARE	200
DEVELOPME	144450	PINETREE DR STE	20	
PLYMOUTH MI 48170-9919 NONE		PC	MEDICAL ASSISTANCE	200
AMERICAN INSTITUTE CANCER RESEARCH	1759 R S	TREET NW		
WASHINGTON DC 20077-7824 NONE	r-1	PC	RESEARCH	200
AMERICAN HEART ASSOCIATION	P O BOX 78851	51		
PHOENIX AZ 85062-8851 NONE		PC	RESEARCH	200
AMERICAN CANCER SOCIETY	P O BOX 13600	0.0		
		PC	RESEARCH	200
HABITAT FOR HUMANITY	121 HABITAT	TAT ST		
			ASSISTANCE FOR THE NEEDY	200
USA INC	14219 SW	42ND ST	1	(
MIAMI FL 33175 NONE		PC	ASSISTANCE TO INDIGENT	2,000

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	Amount	2,016
ı	Purpose	40 COMMUNITY HEALTH ASSISTANCE
Address	Status	LGONQUIN RD STE 240 PC CO
	Relationship	2775 ALGON NONE
Name	Address	HUMAN DEV FOUNDATION ROLLING MEADOWS IL 60008 TOTAL