**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

DLN: 93493135028079 OMB No 1545-0047

Form 990

		of the Treasur enue Service				C	pen to Public Inspection
A F	or th	e <b>2017</b> ca	alendar year, or tax year beginning 07-01-2017 , and ending 06-30-201	.8			
<b>B</b> Che □ Add □ Na	ck if a dress me ch	applicable change nange	C Name of organization Community Foundation for Palm Beach and  Doing business as		<b>D Employer</b> 23-71818		cation number
☐ Initial return ☐ Final return/terminated ☐ Amended return ☐ Application pending			Doning beameds as				
			Number and street (or P O box if mail is not delivered to street address) Room/suite 700 South Dixie Highway No 200	E Telephone (561) 659			
			City or town, state or province, country, and ZIP or foreign postal code West Palm Beach, FL 33401		<b>G</b> Gross rece	unts \$ 90	0.004.611
			F Name and address of principal officer H(a	V To 46.0		•	7,004,011
			Brad Hurlburt 700 South Divis Highway No 200	subord	a group retu inates? subordinates		□Yes ☑No □Yes □No
I Tax	(-exer	mpt status	✓ 501(c)(3) ☐ 501(c)( ) ◀ (insert no ) ☐ 4947(a)(1) or ☐ 527			t (see	instructions)
J W	ebsit	te:► www			exemption n	•	•
<b>K</b> Form	n of o	rganızatıon	✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Yea	ır of format	ion 1972 <b>N</b>	<b>M</b> State	of legal domicile FL
Pa	ri: T	Sumi	marv				
			cribe the organization's mission or most significant activities				
Ģ	2	See Sched	ule O				
e E	-						
Activities & Governance	-						
Ŏ.			s box $ ightharpoonup$ if the organization discontinued its operations or disposed of more the		of its net ass		
ල 25			of voting members of the governing body (Part VI, line 1a)			3	23
Š			of independent voting members of the governing body (Part VI, line 1b)			4	23
Ě			5	20			
ct			nber of volunteers (estimate if necessary)		•	6	410
Q.			elated business revenue from Part VIII, column (C), line 12			7a	-51,651
	b	Net unrela	ated business taxable income from Form 990-T, line 34	· · ·		7b	-146,084
		C	Land and marks (Park MIII June 14)	Prio	r Year	-	Current Year
ġ			ions and grants (Part VIII, line 1h)		6,271,86	0	16,707,297
Rəvenue		-	service revenue (Part VIII, line 2g)			1	0
æ			renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		12,953,62 -98,98		26,593,537 -9,697
			enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		19,126,50		43,291,137
			nd similar amounts paid (Part IX, column (A), lines 1–3)		8,255,26		9,677,073
			paid to or for members (Part IX, column (A), line 4)			0	9,077,073
			other compensation, employee benefits (Part IX, column (A), lines 5–10)		1,507,72	4-	1,667,998
Expenses		-	nal fundraising fees (Part IX, column (A), line 11e)			0	1,007,998
8			aising expenses (Part IX, column (D), line 25) ▶720,808			+	
핓			penses (Part IX, column (A), lines 11a–11d, 11f–24e)		2,287,29	95	2,662,699
			enses Add lines 13–17 (must equal Part IX, column (A), line 25)		12,050,28		14,007,770
			less expenses Subtract line 18 from line 12	7,076,21		29,283,367	
<u>ک ۵</u>		ar e	End of Year				
Net Assets or Fund Balances							
Bal	20	Total asse	ets (Part X, line 16)		150,709,10	16	162,416,168
ᇶ	21	Total liabi	ılıtıes (Part X, lıne 26)		13,151,82	:9	13,274,109
Zű	22	Net asset	s or fund balances Subtract line 21 from line 20		137,557,27	7	149,142,059
Par			ature Block				
	edge	and belief	erjury, I declare that I have examined this return, including accompanying sched f, it is true, correct, and complete Declaration of preparer (other than officer) is				
		*****		2019	-05-15		
Sign		Signatu	ure of officer	Date			
Here Steve			Erjavec CFO r print name and title				
			rint/Type preparer's name Preparer's signature Date cott Y Haynes Scott Y Haynes	Chec	k I If PO	IN 1366363	
Paid		F		self-e	employed		•
Prei	ara	or IF	ırm's name 🏲 Holyfield & Thomas LLC	Firm'	's EIN 🟲 65-10	J&3521	

May the IRS discuss this return with the preparer shown above? (see instructions) . . . . . . . . . . . . . . . For Paperwork Reduction Act Notice, see the separate instructions.

West Palm Beach, FL 33407

Firm's address ▶ 125 Butler Street

**Preparer** 

**Use Only** 

☑ Yes ☐ No Cat No 11282Y

Phone no (561) 689-6000

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Par	t IIII Statement	of Program Service	ce Accomplis	hments		
	Check If Sche	dule O contains a resp	onse or note to a	any line in this Part III		🗹
1	Briefly describe the o	organization's mission		•		
relev	ant issues and to addr	ess needs through gra	nt making This y	ear, the Community Fou	manent endowments To provide indation's grantmaking focused of few examples of how we respond	n discovering collective
2	-	undertake any significa		vices during the year wh	ich were not listed on	☐ Yes ☑ No
	If "Yes," describe the					
3	Did the organization services?	☐ Yes ☑ No				
	If "Yes," describe the	ese changes on Schedu	le O			
4	Section 501(c)(3) an		ons are required	to report the amount of	argest program services, as meas grants and allocations to others,	
4a	(Code	) (Expenses \$	109,342	including grants of \$	94,758 ) (Revenue \$	)
	See Additional Data	, (			, , , , , , , , , , , , , , , , , , , ,	,
4b	(Code	) (Expenses \$	115,391	including grants of \$	100,000 ) (Revenue \$	)
	See Additional Data					
4c	(Code	) (Expenses \$	1,261,684	including grants of \$	1,093,399 ) (Revenue \$	)
	See Additional Data					
	See Additional Data	Table				
4d	Other program servi	ces (Describe in Sched	ule O)			
	(Expenses \$	9,627,279 inc	luding grants of	\$ 8,388,91	.6 ) (Revenue \$	)
4e	Total program serv	/ice expenses ▶	11,113,6	96		

**Checklist of Required Schedules** 

Yes

Page 3

No

Nο

Nο

Nο

Nο

Nο

No

Nο

Nο

Nο

Nο

Nο

Nο

Nο

Nο

Nο

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Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 . . . . . . . If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

to provide advice on the distribution or investment of amounts in such funds or accounts?

12a Did the organization obtain separate, independent audited financial statements for the tax year? 

b Was the organization included in consolidated, independent audited financial statements for the tax year?

**b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . . . . . . . . . . .

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . .

foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . .

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . .

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

assessments, or similar amounts as defined in Revenue Procedure 98-19?

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

Did the organization receive or hold a conservation easement, including easements to preserve open space,

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🛸 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

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11a

11b

11c

11d

11e

11f

12a

12b

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14a

14b

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19

Yes

Yes

Yes

Yes

Yes

Yes

Yes

or X as applicable

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Part IV Checklist of Required Schedules (continued)								
			Yes	No				
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No				
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b						
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes					
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes					
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes					
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a	Yes					
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No				
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No				
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No				
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.							

25a

25b

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28a

28b

28c

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35a

35h

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Yes

Yes

Yes

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No

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Nο

Νo

Nο

Nο

Nο

Nο

Nο

Nο

Νo

Νo

Nο

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . .

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . 🥞

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . . Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

instructions for applicable filing thresholds, conditions, and exceptions)

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	0 (2017)			Page			
I	V Statements Regarding Other IRS Filings and Tax Compliance						
	Check if Schedule O contains a response or note to any line in this Part V			Ш			
<b>-</b>			Yes	No			
	nter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 26  nter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0						
(g	id the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming gambling) winnings to prize winners?	<b>1</b> c	Yes				
Ta	nter the number of employees reported on Form W-3, Transmittal of Wage and ax Statements, filed for the calendar year ending with or within the year covered by as return						
	at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes				
	ote.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)						
Dı	id the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes				
Ιf	"Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes				
At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, financial account in a foreign country (such as a bank account, securities account, or other financial account)?							
	"Yes," enter the name of the foreign country  ee instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)						
w	as the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No			
	id any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No			
	"Yes," to line 5a or 5b, did the organization file Form 8886-T?	טכ					
	res, to line 3a or 3b, did the organization life Form 8886-17	5c					
	oes the organization have annual gross receipts that are normally greater than \$100,000, and did the organization blicit any contributions that were not tax deductible as charitable contributions?	<b>6</b> a		No			
	"Yes," did the organization include with every solicitation an express statement that such contributions or gifts were ot tax deductible?	6b					
0	rganizations that may receive deductible contributions under section 170(c).						
	id the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services rovided to the payor?	7a	Yes				
Ιf	"Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7</b> b	Yes				
	id the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file orm 8282?	7c		No			
Ιf	"Yes," indicate the number of Forms 8282 filed during the year						
Dı	nd the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No			
Dı	id the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No			
	the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7g					
	the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 098-C?	7h					
Di	ponsoring organizations maintaining donor advised funds.  Id a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during  ne year?	8					
Dι	id the sponsoring organization make any taxable distributions under section 4966?	9a					
	id the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b					
	ection 501(c)(7) organizations. Enter	•					
	nitiation fees and capital contributions included on Part VIII, line 12   10a						
	ross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b						
	ection 501(c)(12) organizations. Enter						
	ross income from members or shareholders						
	ross income from other sources (Do not net amounts due or paid to other sources						
	gainst amounts due or received from them)................11b						
56	ection 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
	"Yes," enter the amount of tax-exempt interest received or accrued during the year						
Se	ection 501(c)(29) qualified nonprofit health insurance issuers.						
	s the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for						
Er	dditional information the organization must report on Schedule 0  Inter the amount of reserves the organization is required to maintain by the states in buch the organization is licensed to issue qualified health plans.	13a					
	The organization is necessed to issue quantities read plans						
	nter the amount of reserves on hand	1.4-		NI -			
				No			
	Id the organization receive any payments for indoor tanning services during the tax year?	14a 14b	-	orm <b>99</b>			

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Par	<b>rt VI Governance, Management, and Disclosure</b> For each "Yes" response to lines 2 through 7b below, and for a "N 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	o" respo	nse to li	nes				
	· · · · · · · · · · · · · · · · · · ·			<b>✓</b>				
Se	Check if Schedule O contains a response or note to any line in this Part VI	<del></del>	• •					
	scion A. Governing Body and Flanagement		Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year label 1a	:3						
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O							
b	Enter the number of voting members included in line 1a, above, who are independent  1b 2	:3						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	on <b>3</b>		No				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No				
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No				
6	<b>6</b> Did the organization have members or stockholders?							
7a	7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	,						
а	The governing body?	8a	Yes					
b	Each committee with authority to act on behalf of the governing body?	8b	Yes					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No				
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Code	≘.)					
			Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a		No				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No				
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes					
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes					
13	Did the organization have a written whistleblower policy?	13	Yes					
14	Did the organization have a written document retention and destruction policy?	14	Yes					
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a	Yes					
	Other officers or key employees of the organization	15b	Yes					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt							
	status with respect to such arrangements?	16b						
Se	ection C. Disclosure			<u> </u>				
17	List the States with which a copy of this Form 990 is required to be filed▶							
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only available for public inspection. Indicate how you made these available. Check all that apply	)						
	✓ Own website ☐ Another's website ✓ Upon request ☐ Other (explain in Schedule O)							
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest							
	policy, and financial statements available to the public during the tax year							
20	State the name, address, and telephone number of the person who possesses the organization's books and records  Steven Erjavec CFO 700 S Dixie Hwy Suite 200 West Palm Beach, FL 33401 (561) 659-6800							

(15) Dennis S Hudson III

(16) The Honorable Kathleen J Kroll

(17) Elizabeth Libby Marshall

Director

Director

Part VII

# Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII .

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations • List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations
- organization, more than \$10,000 of reportable compensation from the organization and any related organizations
- List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (E) (A) (D) (F) (B) (C) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation amount of other hours per compensation week (list person is both an officer from the from related compensation anv hours and a director/trustee) organization organizations from the for related (W- 2/1099-(W-2/1099organization and Highest or employee Individual to or director organizations MISC) MISC) Ē related Institutional 호 below dotted organizations employ 3 line) t con: trustee P pensat Ě 4 00 (1) Sherry S Barrat Х Chairman of the Board 4 00 (2) Jane M Mitchell Х 0 0 Х Vice Chairman 4 00 (3) Douglas A Stockham Х Χ Vice Chairman 4 00 4 00 (4) Steven A Templeton . . . . . . . . . . . . . . . . . . . х 4 00 (5) Andrew Kushner Х Х 0 Secretary 4 00 (6) Anson Beard Jr X 0 n Director 4 00 (7) Susan Brockway Director 4 00 (8) Christina M MacFarland 0 Х 4 00 (9) Timothy D Burke n 0 X Director 4 00 (10) Julie Fisher Cummings ..... Director 4 00 (11) Lore Moran Dodge 0 Х 4 00 (12) George T Elmore 0 Director 4 00 (13) Dennis P Gallon PhD Director 4 00 (14) Kathleen B Emmett CFRE 0 Х

4 00

4 00

4 00

Х

(B)

Description of services

(C)

Compensation

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Par	VIII Section A. Officers, Directors	s, Trustees, K	ey Em	ploy	/ees	, ar	ıd Hiç	jhe <sup>,</sup>	st Compensa	ited	<b>Employees</b>	(cont	tinued)	
	( <b>A)</b> Name and Title	(B) Average hours per week (list any hours for related	than o	one booth a direct	oox, u an off ctor/t	ot che unles officer truste	<del> </del>	rson a	compensation from the organization (	Reportable R compensation cor from the fro rganization (W- org		(E) Reportable compensation from related organizations (W- 2/1099-		rated of other nsation the
<u> </u>		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	key employee	Highest compensated employee	Former			MISC)		relat organız	
	.isa M Morgan Esq	4 00	×			[ '	[ '			ا		0		0
Direct	or	<u> </u>	<u> "                                 </u>	<u> </u>	ऻ_ॱ	⊥_′	<u> </u>	⊥_'			<u> </u>			
	/irginia H Smith	4 00	×			'	[ '			ا	1	0		0
Direct	or		····	'	ऻ	⊥_′	<u> </u>	⊥_'						
·	Caroline B Sory		x	'	'	'	1 '			0	1	0		0
Direct	or Susan S Stautberg	4 00		<u> </u>	+-	<u></u>	<del>                                     </del>	<del> </del>				$\dashv$	<u> </u>	
		4 00	)×	'	'	'	1	'		0	1	0		0
Direct (22) C	hristopher W Storkerson	1.00	<del></del> '	<del> </del>	+	+-'	<del></del> '	+-'	-	$\longrightarrow$		$\dashv$		
·····		4 00	<u> </u> ×	'	'	'	1			0		0		0
(23) R	or Roy J Zukerberg	4.00	-	<del>  '</del>	+	+	+	+-	+	$\longrightarrow$		$\dashv$		
		4 00	) <u> </u> ×	'	'	'	1 '	'		0	1	0		0
(24) E	Bradley Hurlburt	45 00		<del>                                     </del>	$\vdash$	+	<del></del>	+	+	$\rightarrow$		$\dashv$		
	lent and CEO		<b></b> '	'	X	'	1 '	'	181	1,666	1	0		17,095
(25)	Gloria Ortega Rex	45 00	, 🗔			$\vdash$		$\top$	1.5	200				:1093
	tive VP and CFO	†··· <i></i> /	<b></b> '	'	×	'	ĺ′	'	121	1,009		0		14,983
						\[\bar{\bar{\bar{\bar{\bar{\bar{\bar{								
1b S	Sub-Total		<u> </u>	<u>.                                    </u>	<del></del>	<u> </u>	<b>-</b>	<u></u>		—		$\top$		
сТ	otal from continuation sheets to Part	VII, Section A	٠			•	<u> </u>					1_		
d T	otal (add lines 1b and 1c)	<u> </u>	<u> </u>		<u>.                                    </u>	<b>&gt;</b>	<u> </u>	_	332,675			0		32,078
2	Total number of individuals (including but of reportable compensation from the organization)		those lis	sted a	abov	/e) v	vho re	ceiv	ed more than \$	\$100,	,000			
													Yes	No
3	Did the organization list any <b>former</b> officine 1a? <i>If "Yes," complete Schedule J for</i>			key (	emp	loye	e, or h	nghe •	est compensate	ed en	nployee on	3		No
4	For any individual listed on line 1a, is the organization and related organizations gr individual										he	4	Yes	
5	Did any person listed on line 1a receive o services rendered to the organization? If '											5	103	No
Se	ction B. Independent Contractors	<u> </u>			_			_						
1	Complete this table for your five highest	compensated in										npen	sation	
l	from the organization Report compensat	tion for the caler	ndar ye	ar en	ding	j with	n or w	<u>ithir</u>	1 the organizati		tax year		100	

(A)

Name and business address

compensation from the organization ▶ 0

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

	90 (2017)						Page <b>9</b>
Part '							
	Check if Schedul	e O contains a resp	onse or note to any l	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s s	1a Federated campaig	ns 1a					_
ons, Gifts, Grants Similar Amounts	<b>b</b> Membership dues	1b					
Gr.	c Fundraising events	1c	42,330				
fs, r A	d Related organizatio	ns 1d					
ia Gi	e Government grants (co	ontributions) <b>1e</b>					
ıs,	f All other contributions	, gıfts, grants,					
tion since	and similar amounts n above	ot included 1f	16,664,967				
tributio Other	g Noncash contribution	ons included					
Contributions, Gifts, Grants and Other Similar Amounts	· <del>-</del>		<u>,195</u>				
CC a	h Total.Add lines 1a-1	lf	<b>▶</b>	16,707,297			
활			Business	Code			
₹.	2a 						
Service Revenue	b						
¥C.	C -						
₹	u						
an	e —						
Program	<b>f</b> All other program se	rvice revenue			•	· ·	
4	<b>gTotal.</b> Add lines 2a-2	f	<u> </u>				
	<b>3</b> Investment income (is similar amounts).	ncluding dividends,	interest, and other	3,593,581			3,593,581
	4 Income from investme					1	<del> </del>
	<b>5</b> Royalties		<b>.</b>				
		(ı) Real	(II) Personal				
	<b>6a</b> Gross rents	625.757					
	<b>h</b> Less rental expenses	635,757 687,408		-			
		·					
	<ul> <li>Rental income or (loss)</li> </ul>	-51,651					
	<b>d</b> Net rental income o	r (loss)		-51,651		-51,651	
		(ı) Securities	(II) Other			<u> </u>	<del>                                     </del>
	7a Gross amount						
	from sales of assets other	68,974,353					
	than inventory						
	b Less cost or other basis and	45,974,397					
	sales expenses	22,999,956					
	<ul><li>C Gain or (loss)</li><li>d Net gain or (loss)</li></ul>			] 22,999,956			22,999,956
	<b>8a</b> Gross income from f		<b>•</b>	<u> </u>			, ,
e E	(not including \$	42,330 of					
₹	contributions reporte See Part IV, line 18		35,100				
Re	<b>b</b> Less direct expense	s <b>b</b>	51,669				
e _	<b>c</b> Net income or (loss)	from fundraising ev	rents •	-16,569			-16,569
Other Revenue	<b>9a</b> Gross income from g See Part IV, line 19						
	See Part IV, IIIle 19		}				
	<b>b</b> Less direct expense	s <b>b</b>					
	c Net income or (loss)	from gaming activit	iles •	J			
	10aGross sales of invent						
	returns and allowand	æs a	}				
	<b>b</b> Less cost of goods s						
	c Net income or (loss)			J			
	Miscellaneous		Business Code				
	11a <sub>M&amp;R</sub> Pew PEF Inv N	1an Fee	900099	52,778			52,778
	<b>b</b> Other Income		900099	23,187			23,187
	Change in Value of S	Split-Interest	900099	-17,442		1	-17,442
	d All other revenue .						
	e Total. Add lines 11a	-11d	•	58,523			
	12 Total revenue. See	Instructions		·		1	
				43,291,137		0 -51,651	. 26,635,491 Form <b>990</b> (2017)

Form 990 (2017)				Page <b>10</b>
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	inizations must comp	lete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX	<u></u>		🗆
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	8,583,674	8,583,674	-	
<b>2</b> Grants and other assistance to domestic individuals See Part IV, line 22	1,093,399	1,093,399		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16				
4 Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	572,007	100,977	286,555	184,475
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	802,870	589,829	130,117	82,924
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	134,438	67,548	40,743	26,147
9 Other employee benefits	56,755	28,517	17,200	11,038
<b>10</b> Payroll taxes	101,928	51,214	30,890	19,824
11 Fees for services (non-employees)				
a Management				
<b>b</b> Legal	24,463		11,226	13,237
c Accounting	62,630		62,630	
<b>d</b> Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	1,396,965		1,396,965	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	153,066	85,015		68,051
12 Advertising and promotion	107,573	44,341		63,232
13 Office expenses	183,945	92,423	55,747	35,775
<b>14</b> Information technology	34,260	17,214	10,383	6,663
15 Royalties				
<b>16</b> Occupancy	67,702	34,017	20,518	13,167
<b>17</b> Travel	5,636	2,832	1,708	1,096
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials .				
<b>19</b> Conferences, conventions, and meetings	22,564	5,469	1,726	15,369
<b>20</b> Interest	65,700	33,011	19,911	12,778
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	81,065	40,731	24,568	15,766
23 Insurance	68,106	34,220	20,640	13,246
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a Donor Relations	237,047	125,814		111,233
<b>b</b> Repairs and Maintenance	90,678	45,561	27,481	17,636

45,863

14,253

1,183

14,007,770

c Misc Expenses

d Annual Report

e All other expenses

25 Total functional expenses. Add lines 1 through 24e

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

22,454

14,253

1,183

11,113,696

14,258

2,173,266

9,151

720,808

Form **990** (2017)

1

24

26

27

28

29

30

31

32

33

34

Fund Balances

Assets or

Net

Page **11** 

1,200

194,429

1.034.300

13,274,109

66,260,131

2,124,316

80.757.612

149,142,059

162,416,168

Form **990** (2017)

24

25

26

27

28

29

30

31 32

33

34

2.115.363

13,151,829

60.052.047

2,111,739

75.393.491

137,557,277

150,709,106

# Check if Schedule O contains a response or note to any line in this Part IX .

	<b>(A)</b> Beginning of year		( <b>B)</b> End of ye
Cash-non-interest-bearing	1,200	1	
1			

	2	Savings and temporary cash investments	4,046,564	2	4,200,202
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
<b>,</b>	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
ets	7	Notes and loans receivable, net		7	

Assets	7	Loans and other receivables from other disquali section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organizations voluntary employees' beneficiary organizations Part II of Schedule L		6			
SS	8	Inventories for sale or use				8	
A	9	Prepaid expenses and deferred charges			162,464	9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	12,206,014			
	ь	Less accumulated depreciation	10b	4,662,048	7,734,256	<b>10</b> c	
	11	Investments—publicly traded securities .			137,602,035	11	1.
	12	Investments—other securities See Part IV, line		12			
	13	Investments—program-related See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11	1,162,587	15			

Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ightharpoonup and

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958),

check here  $\blacktriangleright$   $\square$  and complete lines 30 through 34.

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

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

1	r repaid expenses and deterred charges		• •	102, 101		101,120
10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	12,206,014			
Ь	Less accumulated depreciation	10b	4,662,048	7,734,256	<b>10</b> c	7,543,966
11	Investments—publicly traded securities .	137,602,035	11	148,280,960		
12	Investments—other securities See Part IV, line	11 .	[		12	
13	Investments—program-related See Part IV, line		13			
14	Intangible assets		14			
15	Other assets See Part IV, line 11	1,162,587	15	2,195,411		
16	Total assets. Add lines 1 through 15 (must equ	150,709,106	16	162,416,168		
17	Accounts payable and accrued expenses	Accounts payable and accrued expenses				371,553
18	Grants payable			4,455,864	18	6,952,280
19	Deferred revenue				19	
20	Tax-exempt bond liabilities			6,310,613	20	4,915,976
21	Escrow or custodial account liability Complete F	Part IV	of Schedule D		21	
22	Loans and other payables to current and former key employees, highest compensated employee		· · · · · · · · · · · · · · · · · · ·			
	persons Complete Part II of Schedule L $$ .		22			
23	Secured mortgages and notes payable to unrela	ted thi	rd parties		23	

Page **12** 

-52,778

**~** 

No

Nο

No

Form 990 (2017)

149,142,059

Yes

Yes

Yes

2a

2b

2c

3a

3b

9

10

3	Revenue less expenses Subtract line 2 from line 1	3	29
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	137
5	Net unrealized gains (losses) on investments	5	-17
6	Donated services and use of facilities	6	

Other changes in net assets or fund balances (explain in Schedule O) . . . . . .

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))

Check if Schedule O contains a response or note to any line in this Part XII . . .

If the organization changed its method of accounting from a prior year or checked "Other," explain in

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

Form 990 (2017)

**Reconcilliation of Net Assets** 

Prior period adjustments . . .

**1** Accounting method used to prepare the Form 990

separate basis, consolidated basis, or both

**Financial Statements and Reporting** 

Part XI

Part XII

Schedule O

☐ Separate basis

consolidated basis, or both

Audit Act and OMB Circular A-133?

Separate basis

4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	137,557,2
5	Net unrealized gains (losses) on investments	5	-17,645,8
6	Donated services and use of facilities	6	
7	Investment expenses	7	

☐ Cash ☑ Accrual ☐ Other

☐ Both consolidated and separate basis

☑ Both consolidated and separate basis

#### Additional Data

Software ID:

Software Version:

individuals, received a \$50,000 grant. The grant will allow them to ensure their shelters are in adequate condition to house their homeless clients.

**EIN:** 23-7181875

Name: Community Foundation for Palm Beach and

Form 990 (2017)

Form 990, Part III, Line 4a:

HEALTH AND HUMAN SERVICESThe Community Foundation strives to be a tremendous partner to the nonprofits we support in our community by creating a seamless granting experience. We invest in our nonprofit partners through confidence in their expertise and excellence of service. In 2018, instead of only funding specific programs with defined outcomes, the Community Foundation provided assistance to nonprofits through both program and general support. A \$44,758 grant was awarded to House of Hope The grant afforded House of Hope with the needed funds to continue to support the organization's work through their Golden Gate Enrichment Center and the Elizabeth Lahti Nutrition Center A grant was also awarded to Northwest Community Consortium, Inc. to help continue building vital community assets in the Historic Northwest Neighborhood of West Palm Beach The Lord's Place, who serves more than 1,500 homeless, formerly homeless and extremely low-income families and

Form 990, Part III, Line 4b: EDUCATIONEducation continues to be an important focus area of the Community Foundation. A grant of \$50,000 was awarded to the Education Foundation of Martin County in support of their general operations. The Education Foundation seeks to enrich and enhance educational opportunities for all students and teachers, in the Martin County School District. The aforementioned efforts are done through positive collaborative partnerships and innovative programming. In addition, grant a \$50,000 was awarded to the United Way of Palm Beach County to continue the support of Achieve Palm Beach County our Local College Access Network, which is made up of community partners

from various sectors (e.g., K-12 education, post-secondary education, government, philanthropy, business, nonprofit, faith-based institutions, etc.) that came together to

create a collective impact initiative focused on enhancing the education system in Palm Beach County

SCHOLARSHIP PROGAMThis year approximately 380 students completed an application for our scholarship program. With the help of local volunteers, we granted 108 scholarships to deserving students in our community. These students received awards from \$1,000 to \$50,000 to use towards their college of choice. Our scholarship

recipients attend major Florida universities as well as Massachusetts Institute of Technology (MIT), Duke University and Harvard College. The Community Foundation is one of the largest providers of scholarship grants in Palm Beach and Martin counties. We support a wide range of students based on criteria of over 100 scholarship funds.

Scholarship funds are often established to honor or memorialize a loved one. Each year fund holders are informed of the recipients and receive thank you letters from the students, allowing the fund holder to be part of the students' college journey. Since 1983, over \$11.5 million in scholarships have been awarded to over 2,200 students.

Form 990, Part III, Line 4c:

# (Code ) (Expenses \$ 75,005 including grants of \$ 65,000 ) (Revenue \$ ) ENVIRONMENTTHE Community Foundation supports the preservation and conservation of our environment partnering with organizations that address causes that are important to the region. A grant to Florida Oceanographic Society of \$45,000 provided the needed funds to support the

organization's general operations. Florida Oceanographic Society works to protect the coastal ecosystems and inspire environmental stewardship in

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code

help residents achieve their self-sufficiency goals

Martin County, Florida For the past 50 years, this has been done through education, research, restoration, and advocacy A grant of \$10,000 was awarded to Community Greening to allow the planting of trees in urban neighborhoods. Research has shown that communities with 30 to 40 percent tree canopy are considered as a healthy urban forest. Through a grant to the Memory Tree Corporation in the amount of \$10,000, afforded the organization with the necessary resources to continue services through their Environmental Urban Blight Revitalization, Food Insecurity and Jobs for Unique Abilities programs

COMMUNITY AND ECONOMIC DEVELOPMENTPalm Beach and Martin Counties are very diverse in terms of their community make-up. Some areas very affluent with the latest architecture designs, while others suffer from outdated and dilapidated infrastructures. As a community leader, the Community Foundation is consistently seeking opportunities that will help change and revitalize neighborhoods of need. Habitat for Humanity of Palm Beach County is one of those key partners that receive a \$50,000 grant award. The grant helped Habitat for Humanity PBC to expand its work into the Glades community to build new homes for low-income families. A \$50,000 grant was also provided to Neighborhood Renaissance for

100.000 ) (Revenue \$

) (Expenses \$ 115.391 including grants of \$

Palm Beach County is one of those key partners that receive a \$50,000 grant award. The grant helped Habitat for Humanity PBC to expand its work into the Glades community to build new homes for low-income families. A \$50,000 grant was also provided to Neighborhood Renaissance for the 1) Development of single-family, multi-family and mixed-use developments in partnerships with municipalities, financial institutions, and the county, 2) For property management of rental homes owned by NRI and our Community Land Trust, 3) Housing and financial counseling services as a pathway to homeownership. This ranges from offering homebuyer classes to financial literacy workshops through our extensive network of nonprofit housing partners and one on one counseling and 4) Case management through a support system of local nonprofit providers available to

#### Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Expenses \$

(Code

Other fees and expenses

NONPROFIT ENDOWMENT BUILDINGOne of the Community Foundation's core components is to help nonprofits build a sustainable source of Income through endowment-building. We help local nonprofits build their endowments so that their programs and services can continue for years to come. We are committed to strengthening and serving our nonprofit community. As part of that commitment, we manage assets and reserves for nonprofit organizations. The Foundation awarded \$615,000 which helped local nonprofits create an endowment fund or build upon an existing lone (Code (Expenses \$ including grants of \$ 7,608,916 ) (Revenue \$ 8,727,228

709,655 including grants of \$

615,000 ) (Revenue \$

	GKA	APHIC prin	<u>nt - DO NO</u>	T PROCESS	As Filed Data -			DLN: 93	3493135028079	
	IED	ULE A		Public (	Charity Statu			ort	OMB No 1545-0047	
(Fort 990E:		or	Con	plete if the o	ganization is a sect 4947(a)(1) nonexe			r a section	2017	
<b>770E</b> .	<i></i>				► Attach to Form	990 or Form 99	0-EZ.		Open to Public	
-		the Treasury	► Inte	ormation abou	it Schedule A (Form <u>www.irs.g</u>	990 or 990-EZ <u>ov/form990</u> .	) and its instru	ictions is at	Inspection	
Name	of th	e organiza	<b>tion</b> 'alm Beach and		<u>.                                      </u>			Employer identific	ation number	
Commu	illicy i c	Juliuacion Tor F	ann beach and					23-7181875		
Par					us (All organization			See instructions.		
	ganıza		•		it is (For lines 1 thro	•	,			
1	Ш	A church, convention of churches, or association of churches described in <b>section 170(b)(1)(A)(i).</b>								
2		A school de	scribed in <b>se</b>	ction 170(b)(	1)(A)(ii). (Attach Sch	nedule E (Form 9	90 or 990-EZ) )			
3		A hospital o	r a cooperat	ive hospital serv	/ice organization desc	rıbed ın <b>section</b>	170(b)(1)(A)(	iii).		
4			esearch orga and state _	nization operate	ed in conjunction with	a hospital descri	bed in <b>section</b> :	170(b)(1)(A)(iii). E	nter the hospital's	
5		(b)(1)(A)	( <b>iv).</b> (Comple	ete Part II )	t of a college or unive				ped in <b>section 170</b>	
6	Ш	·	·	_	governmental unit de					
7	<b>✓</b>	section 17	0(b)(1)(A)	( <b>vi).</b> (Complete				init or from the genera	al public described in	
8	Ш	A communi	ty trust desc	ribed in <b>section</b>	170(b)(1)(A)(vi)	(Complete Part I	Ι)			
9					escribed in <b>170(b)(1)</b> ee instructions Enter				ege or university or a	
10		from activit	ies related to income and	its éxempt fun unrelated busin	(1) more than 331/39 ctions—subject to cer ess taxable income (le mplete Part III)	tain exceptions, a	and (2) no more	than 331/3% of its su	- '	
11		An organiza	ition organize	ed and operated	exclusively to test fo	r public safety S	ee section 509	(a)(4).		
12		more public	ly supported:	organizations of	l exclusively for the be described in <b>section 5</b> the type of supporting	<b>09(a)(1)</b> or <b>se</b> d	ction 509(a)(2	). See <b>section 509(</b> a		
a		Type I. A so	supporting or n(s) the pow	ganızatıon oper er to regularly a	ated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by		
b		Type II. A	supporting o		ervised or controlled i ation vested in the sar					
С		Type III fo	unctionally		supporting organizatio				ted with, its	
	_		•	, ,	ons) You must com	•				
d	П	functionally	integrated i	The organization	d. A supporting organi n generally must satis rt IV, Sections A and	fy a distribution i	requirement and			
e					ved a written determir		RS that it is a Ty	pe I, Type II, Type II	I functionally	
f	Enter			ion-functionally I organizations	integrated supporting	organization				
				_	pported organization(	s)				
	(i) N	ame of supp organization	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organia (in your govern		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
						Yes	No			
Total										

supported organization

ightharpoons

Page 2

	(b)(1)(A)(ix)								
	(Complete only if you ch	necked the box of	on line 5, 7, 8, c	r 9 of Part I or	if the organizati	on failed to qual	ify under Part		
	III. If the organization f	ails to qualify ur	nder the tests lis	ted below, plea	se complete Par	t III.)	-		
Section A	Section A. Public Support								

	III. If the organization fa	alls to qualify und	der the tests list	ed below, please	e complete Part	III.)	to quanti	, and i are
	Section A. Public Support			•				
	Calendar year (or fiscal year beginning in) ▶	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2	2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	4,527,234	6,515,974	9,205,746	6,271,865	1	6,707,297	43,228,11
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	<b>Total.</b> Add lines 1 through 3	4,527,234	6,515,974	9,205,746	6,271,865	1	6,707,297	43,228,11
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							6,913,88
6	<b>Public support.</b> Subtract line 5 from line 4							36,314,23
-5	Section B. Total Support			·	•			
	Calendar year	(a)2013	<b>(b)</b> 2014	(c)2015	(d)2016	(e)2	2017	(f)Total
_	(or fiscal year beginning in) ▶	` '			` '			
7		4,527,234	6,515,974	9,205,746	6,271,865	1	6,707,297	43,228,11
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,593,683	1,588,558	1,690,053	2,455,396		4,229,338	11,557,02
9	Net income from unrelated business activities, whether or not the business is regularly carried on	-33,341	-111,785	-24,292	-90,580		-146,084	-406,08
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI )	59,505	29,712	35,588	52,473		23,187	200,46
11	10					_		54,579,52
	Gross receipts from related activities,					12		396,21
13	First five years. If the Form 990 is for	or the organization'	s first, second, thii	d, fourth, or fifth	tax year as a sect	ion 501(	(c)(3) or <u>ga</u> ı	nızatıon,
	check this box and <b>stop here</b>						<u>▶⊔</u>	
S	Section C. Computation of Public	c Support Perce	entage					
14	Public support percentage for 2017 (III	ne 6, column (f) div	vided by line 11, co	olumn (f))		14		66 530 %
15	Public support percentage for 2016 Sc	hedule A, Part II, lı	ine 14			15		73 540 %
16a	<b>33 1/3% support test—2017.</b> If the	organization did n	ot check the box o	n line 13, and line	14 is 33 1/3% or	more, c	heck this b	ox
Ŀ	and <b>stop here.</b> The organization qual <b>33</b> 1/3% <b>support test—2016.</b> If th				nd line 15 is 33 1/	3% or m	nore, check	<b>▶</b> ✓ this
17a	box and <b>stop here.</b> The organization a <b>10%-facts-and-circumstances test</b> is 10% or more, and if the organization in Part VI how the organization meets	t <b>—2017.</b> If the org n meets the "facts	anization did not c and-circumstance	heck a box on lines" test, check this	box and stop her	e. Expla	ain	▶□
b	organization  10%-facts-and-circumstances tes 15 is 10% or more, and if the organization Explain in Part VI how the organization	ation meets the "fa	acts-and-circumsta	nces" test, check	this box and stop	here.		▶ □

Р	Support Schedule for						
	(Complete only if you cl the organization fails to						er Part II. If
Se	ection A. Public Support	quality under t	ine tests listed i	below, please co	ompiete Part II.,	)	
	Calendar year	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
_	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(6) 2015	(4) 2016	(e) 2017	(I) Iotai
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
S	from line 6 ) ection B. Total Support						
	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9							
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
Ь	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI )						
13	Total support. (Add lines 9, 10c,						
14	11, and 12)  First five years. If the Form 990 is for	l r the organization	l 's first, second, th	L urd, fourth, or fift	l lax vear as a sec	ction 501(c)(3) o	l rganization.
	check this box and <b>stop here</b>			,,	,		▶ □
Se	ection C. Computation of Public S	Support Perce	ntage				
15	Public support percentage for 2017 (lin			column (f))		15	
16	Public support percentage from 2016 S	chedule A, Part II	II, line 15			16	
Se	ction D. Computation of Investr	nent Income	Percentage				
17	Investment income percentage for 201	7 (line 10c, colur	nn (f) divided by	lıne 13, column (f	·))	17	
18	Investment income percentage from 20	<b>016</b> Schedule A, I	Part III, line 17			18	
	<b>331/3% support tests—2017.</b> If the	organization did n	ot check the box	on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and s						ightharpoons
	33 1/3% support tests—2016. If the						. —
_	not more than 33 1/3%, check this box	-			· ·		ightharpoons
20	Private foundation. If the organization	-	-				ightharpoons

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V ) Section A. All Supporting Organizations

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1	İ	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2)			
	in section 309(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the			
	determination	3b		

b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the	·		
	determination			
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?			
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			

				3.
c	Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)(B)$ purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use	-		
		3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or		$\overline{}$	
	supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections			
	501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c	$\overline{}$	
	to the following supported organization was about exclusively for section 17 o(e)(2)(b) purposes			
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and			

			, ,	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the			
	organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		

6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing		
	organization's supported organizations? If "Yes," provide detail in <b>Part VI.</b>	6	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a		
	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)		

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

10a

answer line 10b below

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"		
	complete Part I of Schedule L (Form 990 or 990-EZ)	8	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as		i

```
defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"
provide detail in Part VI.
```

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

```
9a
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

Pa	rt IV Supporting Organizations (continued)		•	-9	
	·		Yes	No	
11	Has the organization accepted a gift or contribution from any of the following persons?				
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a			
b	A family member of a person described in (a) above?	11b			
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c			
	ection B. Type I Supporting Organizations				
	· · · · · · · · · · · · · · · · · · ·		Yes	No	
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1			
_					
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2			
-	ection C. Type II Supporting Organizations				
	cetion c. Type 11 Supporting Organizations		Yes	No	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the				
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1			
S	ection D. All Type III Supporting Organizations		l		
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		Yes	No	
		1			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)				
		2			
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard	3			
S	ection E. Type III Functionally-Integrated Supporting Organizations				
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction and the organization satisfied the Activities Test Complete line 2 below  The organization is the parent of each of its supported organizations. Complete line 3 below  The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	·	ctions)		
2	Activities Test Answer (a) and (b) below.		Yes	No	
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	<b>2</b> a			
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b			
3	Parent of Supported Organizations Answer (a) and (b) below.				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <b>Part VI</b> .	3a			
	<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in <b>Part VI.</b> the role played by the organization in this regard	3b			

Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year) a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 2 Acquisition indebtedness applicable to non-exempt use assets 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 8

Section C - Distributable Amount **Current Year** Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 6

2 4 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 (ii) (iii)

**10** Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i) Underdistributions Distributable instructions) **Excess Distributions** Pre-2017 Amount for 2017 1 Distributable amount for 2017 from Section C, line

2 Underdistributions, if any, for years prior to 2017

(reasonable cause required-- explain in Part VI)

See instructions		
3 Excess distributions carryover, if any, to 2017		
a		
<b>b</b> From 2013		
c From 2014		
<b>d</b> From 2015		
e From 2016		
f Total of lines 3a through e		
g Applied to underdistributions of prior years		
<b>h</b> Applied to 2017 distributable amount		
<ul> <li>Carryover from 2012 not applied (see instructions)</li> </ul>		
j Remainder Subtract lines 3g, 3h, and 3i from 3f		
4 Distributions for 2017 from Section D, line 7		
<u>      \$                              </u>		
Applied to underdistributions of prior years		

b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4

Schedule A (Form 990 or 990-EZ) (2017)

5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2018. Add lines

c Excess from 2015. . . . .

See instructions

d Excess from 2016. Excess from 2017.

31 and 4c 8 Breakdown of line 7 a Excess from 2013. **b** Excess from 2014.

### Additional Data

#### Software ID: Software Version:

**EIN:** 23-7181875

Name: Community Foundation for Palm Beach and

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Schedule A (	(Form 990 or 990-EZ) 2017
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See

instructions)
Facts And Circumstances Test

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE D** 

## **Supplemental Financial Statements**

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

DLN: 93493135028079 OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990)

► Attach to Form 990. Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Inspection Employer identification number

Par	munity Foundation for Palm Beach and						
2-1	•					181875	
اند	Organizations Maintaining Donor Advi				or Acc	ounts.	
	Complete if the organization answered "Ye			•	1	(h)Eundo and ather a	nto
	Total number at end of year	(a) Dono	or advis	sed funds		(b)Funds and other accou	nts
	Total number at end of year						
	Aggregate value of contributions to (during year)						
	Aggregate value of grants from (during year)						
	Aggregate value at end of year						
	Did the organization inform all donors and donor advisor organization's property, subject to the organization's ex			ets held in donor a	dvised f	funds are the  ✓ Yes	□ N
	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?						□ N
311	Conservation Easements. Complete if the	ne organization a	inswei	ed "Yes" on For	m 990		
	Purpose(s) of conservation easements held by the orga	-				,	
	Preservation of land for public use (e.g., recreation	•	$\Box$		n histori	ically important land area	
		ir or caucation,	$\overline{}$			d historic structure	
	☐ Protection of natural habitat		ш	Preservation of a	certifie	a nistoric structure	
	☐ Preservation of open space						
	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservat	tion co	ntribution in the fo	rm of a		
	Total number of conservation easements				ا مد ا	Held at the End of the	Year
					2a		
	Total acreage restricted by conservation easements		J /-		2b		
	Number of conservation easements on a certified histori		•		2c		
	Number of conservation easements included in (c) acqu structure listed in the National Register				2d		
	Number of conservation easements modified, transferre tax year ▶	ed, released, exting	luished	, or terminated by	the org	ganization during the	
	Number of states where property subject to conservation	on easement is loca	ted 🕨				
	Does the organization have a written policy regarding the		ing, in	spection, handling	of viola		
	and enforcement of the conservation easements it hold	s <sup>7</sup>					No
	and enforcement of the conservation easements it hold:  Staff and volunteer hours devoted to monitoring, inspect  •		ıolatıor	ns, and enforcing c	conserva	ation easements during the	<b>No</b> year
	Staff and volunteer hours devoted to monitoring, inspec	cting, handling of v				-	year
	Staff and volunteer hours devoted to monitoring, inspecting, Amount of expenses incurred in monitoring, inspecting,	cting, handling of v	ons, ar	d enforcing conse	rvation	easements during the year	year
	Staff and volunteer hours devoted to monitoring, inspecting,  Amount of expenses incurred in monitoring, inspecting,  \$ \bigsize \text{\$\text{\$}}\$  Does each conservation easement reported on line 2(d)	thandling of violation above satisfy the servation easement footnote to the organization to the organization to the organization to the organization easement of the organization to the organization easement of the organization to the organization easement of the organization e	ons, ar require	d enforcing conseinments of section 1	rvation 170(h)(4 ense sta	easements during the year 4)(B)(i)  Yes  atement, and	year
ìrt	Staff and volunteer hours devoted to monitoring, inspecting,  Amount of expenses incurred in monitoring, inspecting,  \$  Does each conservation easement reported on line 2(d) and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports consbalance sheet, and include, if applicable, the text of the	handling of violation above satisfy the servation easement footnote to the organists	ons, ar require s in its ganizat	d enforcing consent ments of section 1 revenue and expension's financial state easures, or Oth	rvation 170(h)(4 ense sta ements	easements during the year  4)(B)(i)  Yes  atement, and that describes	year
	Staff and volunteer hours devoted to monitoring, inspecting,  Amount of expenses incurred in monitoring, inspecting,  \$	handling of violation above satisfy the servation easement footnote to the order of <b>Art, Historic</b> es" on Form 990, 16 (ASC 958), not to public exhibition, established.	ons, ar require s in its ganizat cal Tro Part 1 to repo	d enforcing consent ments of section 1 revenue and expension's financial state easures, or Other to the first revenue ston, or research in	rvation  170(h)(4  ense statements  ner Sir  atemen	easements during the year  4)(B)(i)  Yes  atement, and that describes  milar Assets.	year No
	Staff and volunteer hours devoted to monitoring, inspecting,  Amount of expenses incurred in monitoring, inspecting,  \$	handling of violation above satisfy the interest of Art, Historic es" on Form 990, 16 (ASC 958), not to public exhibition, encial statements that 16 (ASC 958), to re	requires in its ganizate Part 1 o repoeducatiat description	ments of section 1 revenue and experience financial state easures, or Oth V, line 8. It in its revenue state on, or research in ribes these items its revenue stater	rvation  L70(h)(4  ense statements  ner Sir  atemen  furthera  ment an	easements during the year  4)(B)(i)  Yes  Interment, and Is that describes  Interment and balance sheet works ance of public service,  and balance sheet works of a	No of
)	Staff and volunteer hours devoted to monitoring, inspect  Amount of expenses incurred in monitoring, inspecting,  \$  Does each conservation easement reported on line 2(d) and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports consibilities sheet, and include, if applicable, the text of the the organization's accounting for conservation easement  Organizations Maintaining Collections  Complete if the organization answered "Yes art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finar If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for publisher in the publisher in the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for publisher in the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for publisher in the organization elected in the organization ele	handling of violation above satisfy the interest of Art, Historic es" on Form 990, 16 (ASC 958), not to public exhibition, encial statements that 16 (ASC 958), to re	requires in its ganizate Part 1 o repoeducatiat description	ments of section 1 revenue and experion's financial state easures, or Oth V, line 8. It in its revenue state on, or research in ribes these items its revenue stater	rvation  L70(h)(4  ense statements  ner Sir  atemen  furthera  ment an	easements during the year  4)(B)(i)  Yes  Interment, and is that describes  Interment and balance sheet works ance of public service, and balance sheet works of a service, provide the service, provide the service of public service, provide the service of public service, provide the service of public service, provide the service of service of public service, provide the service of se	No of art, the
) (i	Staff and volunteer hours devoted to monitoring, inspecting,  Amount of expenses incurred in monitoring, inspecting,  \$  Does each conservation easement reported on line 2(d) and section 170(h)(4)(B)(II)?  In Part XIII, describe how the organization reports considiance sheet, and include, if applicable, the text of the the organization's accounting for conservation easement  Organizations Maintaining Collections  Complete if the organization answered "Yes If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finant if the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for pub following amounts relating to these items  Revenue included on Form 990, Part VIII, line 1	handling of violation above satisfy the interest of Art, Historic es" on Form 990, 16 (ASC 958), not to public exhibition, encial statements that 16 (ASC 958), to re	requires in its ganizate Part 1 o repoeducatiat description	ments of section 1 revenue and experion's financial state easures, or Oth V, line 8. It in its revenue state on, or research in ribes these items its revenue stater	rvation  L70(h)(4  ense statements  ner Sir  atemen  furthera  ment an	easements during the year  4)(B)(i)  Yes  atement, and that describes  milar Assets.  It and balance sheet works ance of public service,  at of public service, provide to	No of art, the
) (i	Staff and volunteer hours devoted to monitoring, inspect  Amount of expenses incurred in monitoring, inspecting,  \$  Does each conservation easement reported on line 2(d) and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports consibilities sheet, and include, if applicable, the text of the the organization's accounting for conservation easement.  Organizations Maintaining Collections  Complete if the organization answered "Yes If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finar If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for pub following amounts relating to these items  Revenue included on Form 990, Part VIII, line 1  Assets included in Form 990, Part X  If the organization received or held works of art, historical treasures, or other similar assets held for pub following amounts relating to these items  The provided in Form 990, Part X  If the organization received or held works of art, historical treasures, or other similar assets held for pub following amounts relating to these items	handling of violation above satisfy the servation easement footnote to the organism of Art, Historic es" on Form 990, 16 (ASC 958), not to public exhibition, educal statements that 16 (ASC 958), to reall call treasures, or other controls of the control of the c	requires in its ganizate part in o repo educati at description, other sinches in the results.	ments of section 1 revenue and experience financial state  casures, or Oth V, line 8. rt in its revenue state on, or research in ribes these items its revenue stater or research in furth	rvation  L70(h)(4  ense statements  ner Sir  atement furthera  ment an	easements during the year  4)(B)(i)  Yes  Interment, and is that describes  milar Assets.  Int and balance sheet works ance of public service, and balance sheet works of a service, provide to \$	No of art, the
) (i	Amount of expenses incurred in monitoring, inspecting,  \$  Does each conservation easement reported on line 2(d) and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports consibilities sheet, and include, if applicable, the text of the the organization's accounting for conservation easement  Organizations Maintaining Collections  Complete if the organization answered "Yes of the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finar If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for pub following amounts relating to these items  Revenue included on Form 990, Part VIII, line 1  Assets included in Form 990, Part X	handling of violation above satisfy the servation easement footnote to the organism of Art, Historic es" on Form 990, 16 (ASC 958), not to public exhibition, educal statements that 16 (ASC 958), to reall call treasures, or other controls of the control of the c	requires in its ganizate part in o repo educati at description, other sinches in the results.	ments of section 1 revenue and experience financial state  casures, or Oth V, line 8. rt in its revenue state on, or research in ribes these items its revenue stater or research in furth	rvation  L70(h)(4  ense statements  ner Sir  atement furthera  ment an	easements during the year  4)(B)(i)  Yes  Interment, and is that describes  milar Assets.  Int and balance sheet works ance of public service, and balance sheet works of a service, provide to \$	No of art, the

Pai	t III	Organizations Ma	intaining Collectior	ns of Art, H	istori	cal Tı	eas	ures, or Othe	r Similar A	ssets (	ontinued)	
3		g the organization's acqu s (check all that apply)	isition, accession, and o	ther records,	check	any of	the fo	ollowing that are	a significant	use of its	collection	1
а		Public exhibition			d		Loar	n or exchange pr	ograms			
b		Scholarly research			е		Othe	er				
С		Preservation for future	generations									
4	Provid Part	de a description of the o XIII	rganızatıon's collections	and explain h	ow the	y furth	ner th	ie organization's	exempt purp	ose in		
5		ng the year, did the orga s to be sold to raise fund							ımılar	☐ Ye	s 🗆	No
Pa	rt IV		dial Arrangements anization answered "		n 990	, Part	IV, I	ine 9, or repor	ted an amo	unt on F	orm 990	, Part
1a		e organization an agent, ded on Form 990, Part X		her intermedia	ary for	contril	oution	ns or other asset	s not	☐ Ye	s 🗸	No
Ь	If "Y∈	es," explain the arranger	ment in Part XIII and coi	mplete the foll	lowing	table				Amount		_
С	Begin	nning balance		·	_			1c				
d	Addıt	ions during the year						1d				
е	Dıstrı	butions during the year						1e				
f	Endın	ng balance						1f				
<b>2</b> a	Did th	he organization include a	an amount on Form 990,	, Part X, line 2	1, for	escrow	or cu	ustodial account	liability?	☐ Ye	<u> </u>	— No
b	If "Ye	es," explain the arranger	nent in Part XIII Check	here if the ex	planatı	on has	beer	n provided in Par	t XIII		_	
Pa	art V	Endowment Fund	s. Complete if the or		nswer	ed "Ye	es" o					
	_		<b>(a)</b> Cı	urrent year		rior year	-	(c)Two years bac			(e)Four ye	
	_	ning of year balance .		114,819,628		107,968		114,908,5		0,606,366		5,837,443
		outions		5,497,171 6,593,945		11,289	917	2,224,6 -3,688,2		655,337 -548,450		7,499,008
		vestment earnings, gains		0,555,545		11,203	,,,,,,	-3,000,2				
		or scholarships							<u> </u>	1,424,026	•	2,972,987
	and pr	expenditures for facilitie ograms	S	4,243,433		3,648	$\rightarrow$	3,812,6		620,776		336,616
f	Admını	istrative expenses .		1,424,439		1,065	<u> </u>	1,663,7		759,950		1,404,145
g	End of	year balance		121,242,872		114,819	,628	107,968,4	83 114	1,908,501	12	0,606,366
2	Provid	de the estimated percen	tage of the current year	end balance (	(line 1	g, colui	mn (a	a)) held as				
а	Board	d designated or quasi-en	dowment ► 32 740	%								
b	Perm	anent endowment 🕨	66 600 %									
С	Temp	orarily restricted endow	ment ▶ 0 660 %									
		percentages on lines 2a,	·									
3а		here endowment funds r	not in the possession of	the organization	on that	t are h	eld ar	nd administered	for the		- T	<del></del>
	-	nization by nrelated organizations								2:	Yes a(i)	No No
	. ,	elated organizations .			•	•	•	• •			(ii)	No
Ь		es" on $3a(\pi)$ , are the rela		as required of	.     . n Sche	dule R	, .			_	3b	<del> </del>
4	Descr	ribe in Part XIII the inter	nded uses of the organiz	ation's endow	ment f	unds					l	
Pa	rt VI	Land, Buildings, a	ınd Equipment.									
			anization answered "									
	Descri	iption of property	(a) Cost or other basis (investment)	(b) Cost o	or other	basis (d	other)	(c) Accumulated	d depreciation	(	<b>d)</b> Book va	lue
1a	Land					3,39	8,980	ו				3,398,980
b	Buildin	ngs	5,765,	820		2,01	.3,219		3,672,180			4,106,859
		nold improvements										
		nent				22	20,785	5	197,119			23,666
						80	7,210	1	792,749			14,461
		lines 1a through 1e (Co.	lumn (d) must equal For	m 990 Part Y	colur					<b> </b>		7 542 066

<b>Investments—Other Securities.</b> Complete if the See Form 990, Part X, line 12.	organızat	ion answe	ered "Yes" on Form 99	م. 0, Part IV, line 11b.
(a) Description of security or category (including name of security)		(b) Book value		d of valuation -year market value
Financial derivatives				
Closely-held equity interests Other				
al. (Column (b) must equal Form 990, Part X, col (B) line 12)	•			
Treatments—Program Related.  Complete if the organization answered 'Yes' on Form  (a) Description of investment	m 990, P	art IV, lin		Part X, line 13.
	(0) 50	ock value		year market value
)				
tal. (Column (b) must equal Form 990, Part X, col (B) line 13 )  art IX  Other Assets. Complete if the organization answered 'Ye	<b>•</b>	- 000 David	IV line 11d Can Form O	OO Dort V line 15
Other Assets. Complete if the organization answered 'You (a) Description	es on ron	11 990, Fait	TV, IIIIe 11a See Form 9	(b) Book value
tal. (Column (b) must equal Form 990, Part X, col (B) line 15)  art X  Other Liabilities. Complete if the organization ans See Form 990, Part X, line 25.	wered 'Ye	es' on For	n 990, Part IV, line 11	e or 11f.
(a) Description of liability Federal income taxes		<b>(b)</b> Boo	ok value	
nuity Obligations			1,034,300	
	<b>b</b>		1,034,300	

Part XI

2

b

1

2

c

d

3

4

b

5

Part XIII

See Additional Data Table

Schedule D (Form 990) 2017

Page 4

-15,576,207 41,841,394

1,449,743

43,291,137

14,387,903

1,777,098

12,610,805

1,396,965

14.007.770

Schedule D (Form 990) 2017

d	Other (Describe in Part XIII )	2d			1,963,708		
е	Add lines <b>2a</b> through <b>2d</b>					2e	1
3	Subtract line <b>2e</b> from line <b>1</b>		•			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		_				

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

2a

2b

2c

2a

2b

2c

2d

4a 4b

Explanation

-17,645,808

105.893

1.449.743

105,893

1,671,205

1.396.965

4c

2e

3

4c

5

Investment expenses not included on Form 990, Part VIII, line 7b . 4a

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . . .

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

4b

Add lines **4a** and **4b** . . . . . .

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . . .

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments . . . .

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

5 Part XII

Donated services and use of facilities . . .

Other (Describe in Part XIII ) . . . . .

Add lines 2a through 2d . .

Return Reference

Total expenses and losses per audited financial statements . . . . . . . .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Subtract line 2e from line 1 . . . . Amounts included on Form 990, Part IX, line 25, but not on line 1:

Supplemental Information

Investment expenses not included on Form 990, Part VIII, line 7b . . .

Page <b>5</b>		Schedule D (Form 990) 2017		
	ormation (continued)	Part XIII Supplemental Info		
	Explanation	Return Reference		

Schedule D (Form 990) 2017

#### Additional Data

#### Software ID: Software Version:

**EIN:** 23-7181875

Name: Community Foundation for Palm Beach and

Supplemental Information

Return Reference

Explanation

Part X, Line 2

The Internal Revenue Service (the "IRS") has determined the Foundation is an organization exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code Howev er, income from certain activities not directly related to the Foundation's tax-exempt pur pose may be subject to taxation as unrelated business income Due to the carryover of prio r year net operating losses, there is no provision for income taxes made in the accompanying financial statements. The Foundation files two federal information returns with the IRS, one for the Pew Fund and one for the Foundation.

Supplemental Information Return Reference Explanation M & R Pew P E F Revenue 1,508,328 Rental Expenses 403,712 Special Event Expenses 51,668 Part XI, Line 2d - Other Adjustments

Supplemental Information	
Return Reference	Explanation
Part XI, Line 4b - Other Adjustments	Investment management fees 1,396,965 Management admin fees 52,778

Supplemental Information Return Reference Explanation Part XII, Line 2d - Other Expenses-M&R Pew Public Education Fund 1,215,825 Rental Expenses 403,712 Special Event Expenses Adjustments 51,668

Supplemental Information	
Return Reference	Explanation
Part XII, Line 4b - Other Adjustments	Investment management fees 1,396,965

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135028079 OMB No 1545-0047 SCHEDULE G **Supplemental Information Regarding** (Form 990 or 990-EZ) **Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a Open to Public Department of the Treasury Attach to Form 990 or Form 990-EZ. Inspection Internal Revenue Service ▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form990. **Employer identification number** Name of the organization Community Foundation for Palm Beach and 23-7181875 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants ☐ Solicitation of government grants Phone solicitations ☐ Special fundraising events In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundraiser) fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col (i) contributions? Yes No 1 8 10 Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat No 50083H Schedule G (Form 990 or 990-EZ) 2017

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (b) Event #2 (a)Event #1 (c)Other events (d) Total events Founder's Lunch (add col (a) through (event type) (total number) (event type) col (c)) Revenue 1 Gross receipts. 77,430 77,430 2 Less Contributions. 42,330 42,330 3 Gross income (line 1 minus 35,100 35,100 line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses Rent/facility costs 7 Food and beverages 8 Entertainment **9** Other direct expenses 51,669 51,669 **10** Direct expense summary Add lines 4 through 9 in column (d) . . . 51,669 11 Net income summary Subtract line 10 from line 3, column (d) -16,569 Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. Revenue (b) Pull tabs/Instant (d) Total gaming (add (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) 1 Gross revenue . Expenses | 2 Cash prizes Noncash prizes Direct 4 Rent/facility costs 5 Other direct expenses Yes Yes % Yes\_\_\_\_ 6 Volunteer labor No Direct expense summary Add lines 2 through 5 in column (d) Net gaming income summary Subtract line 7 from line 1, column (d). Enter the state(s) in which the organization conducts gaming activities \_ ☐ Yes ☐ No Is the organization licensed to conduct gaming activities in each of these states? If "No," explain . 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No If "Yes," explain \_

Sche	dule G (Form 990 or 990-EZ) 2017				F	Page <b>3</b>
11	Does the organization conduct gaming	activities with nonmembers?		Yes	□No	
12	Is the organization a grantor, beneficial formed to administer charitable gaming	ry or trustee of a trust or a member of a partnership or other entit	ΣY	□Yes	□No	
13	Indicate the percentage of gaming acti	vity conducted in				
а	The organization's facility		13	а		%
b	An outside facility		13	ь		%
14	Enter the name and address of the per	son who prepares the organization's gaming/special events books	and record	s		
	Name ►					
	Address •					
15a	Does the organization have a contract revenue?	with a third party from whom the organization receives gaming		□Yes	□No	
Ь		evenue received by the organization ► \$ a the third party ► \$	and the			
c	If "Yes," enter name and address of the	e third party				
	Name •					
	Address ►					
16	Gaming manager information					
	Name ►					
	Gaming manager compensation ▶ \$	······································				
	Description of services provided ►					
	☐ Director/officer	☐ Employee ☐ Independent contractor				
17	Mandatory distributions					
а	Is the organization required under state retain the state gaming license?	e law to make charitable distributions from the gaming proceeds to	)	□Yes	Пио	
b	Enter the amount of distributions requing the organization's own exempt activities.	red under state law distributed to other exempt organizations or spities during the tax year <b>&gt;</b> \$	pent	63		
Pai		on. Provide the explanations required by Part I, line 2b, col 5c, 16, and 17b, as applicable. Also provide any additional				s).
	Return Reference	Explanation				

Schedule G (Form 990 or 990-EZ) 2017

efile GRAPHIC print - DC	NOT PROCESS	As Filed Data -					DLI	N: 934931350	28079
Schedule I (Form 990)  Department of the Treasury	Co	Governments omplete if the organiz	Other Assistandand Individual ation answered "Yes," Attach to Form le I (Form 990) and its	S in the Unite on Form 990, Part IV n 990.	d States , line 21 or 22.		0	2017 Open to Public Inspection	
Internal Revenue Service  Name of the organization					<u> </u>	Emplo	yer identific	ation number	
Community Foundation for Paln	n Beach and					23-71	81875		
	mation on Grants								
the selection criteria used  Describe in Part IV the or	d to award the grants ganization's procedu	or assistance? res for monitoring the u	se of grant funds in the U	nited States	for the grants or assistand		Part IV, line	Yes	□ <b>No</b>
			(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Descrip noncash ass	otion of	(h) Purpose of or assistance	
(1) See Additional Data									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
<ul><li>2 Enter total number of sec</li><li>3 Enter total number of oth</li></ul>							<b>&gt;</b>		240
For Paperwork Reduction Act Not	tice, see the Instruction	ns for Form 990.		Cat No 50055	5P		Sch	edule I (Form 990	) 2017

					Page <b>2</b>		
		als. Complete if the orga	nization answered "Yes'	on Form 990, Part IV, line 22			
tance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance		
	108	1,093,399					
			1				
			·				
			·				
			·				
			·				
Informatic	<b>n.</b> Provide the info	ormation required in F	∂art I, line 2; Part III	, column (b); and any other a	additional information.		
Explanatio	ən						
eference Explanation  2 Proposals are received and reviewed by Vice President for Community Investment Proposals are approved by the Board of Directors Community Investment staff visits and meets with grantees Grantee's reports request are evaluated							
ata	Informatio  Explanatio  Proposals ar	Information. Provide the info  Explanation  Proposals are received and review	Information. Provide the information required in P  Explanation  Proposals are received and reviewed by Vice President for	Information. Provide the information required in Part I, line 2; Part III  Explanation  Proposals are received and reviewed by Vice President for Community Investmen	Information. Provide the information required in Part I, line 2; Part III, column (b); and any other a Explanation  Proposals are received and reviewed by Vice President for Community Investment Proposals are approved by the line of the information of cash grant (d) Amount of noncash assistance (e) Method of valuation (book, FMV, appraisal, other)  (d) Amount of noncash assistance (e) Method of valuation (book, FMV, appraisal, other)  (e) Method of valuation (book, FMV, appraisal, other)  (a) Amount of noncash assistance (e) Method of valuation (book, FMV, appraisal, other)  (b) Number of cash grant (look), FMV, appraisal, other)  (e) Method of valuation (book, FMV, appraisal, other)  (b) Number of cash grant (look), FMV, appraisal, other)  (e) Method of valuation (book, FMV, appraisal, other)  (f) Method of valuation (book, FMV, appraisal, other)  (h) Amount of noncash assistance (look), appraisal, other)  (f) Method of valuation (book, FMV, appraisal, other)  (h) Amount of noncash assistance (look), appraisal, appraisal, appraisal, other)  (h) Amount of noncash assistance (look), appraisal, a		

## **Additional Data**

Beaches Inc

1712 Second Avenue North Lake Worth, FL 33460

## Software ID: Software Version:

**EIN:** 23-7181875 Name: Community Foundation for Palm Beach and

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation
organization		ıf applıcable	grant	cash	(book, FMV, appraisal,
or government				assistance	other)

or government	п аррпсавіе	grant	assistance	other)	
					$\overline{}$

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(g) Description of (h) Purpose of grant non-cash assistance or assistance

General Support

General Support

211 Palm Beach Treasure 23-7153017 501(C)(3) 5,429 Coast Inc PO Box 3588 Lantana, FL 33465 Adopt-A-Family of the Palm 59-2471253 501(C)(3) 90,000

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 59-2486620 501(C)(3) 10.000 General Support Aid to Victims of Domestic Abuse

PO Box 6161 Delray Beach, FL 33482

AIM Academy 10-0849648 501(C)(3) 20,000 General Support 1200 River Road Conshohocken, PA 19428

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Alzheimer's Community Care 31-1481653 501(C)(3) 60.000 General Support Inc 800 Northpoint Parkway Suite

101B West Palm Beach, FL 33407					
Amateur Athletic Union of the United States Inc Rockets Baseball 18353 Flagship	81-2838043	501(C)(3)	5,000		General Support

Cırcle

Jupiter, FL 33458

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance American Friends of Beit Issie 13-3434781 501(C)(3) 10.000 General Support Shapiro Inc 25 W 45th Street 13-1568923 501(C)(3) 7.500 General Support

New York, NY 10036 American Friends of Hebrew University 100 West Cypress Creek Road Suite

865

Fort Lauderdale, FL 33309

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 501(C)(3) 35.000 General Support American Friends of Leket 20-8202424 Israel Inc

PO Box 2090 Teaneck, NJ 07666

75,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

American Friends of Maoz-Seal

7 Hawthorne Circle Somersworth, NH 03878

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance neral Support

Americares Foundation 06-1008595 501(C)(3) 5,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

88 Hamilton Avenue Stamford, CT 06902

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Arise Media Inc. 47-4295795 501(C)(3) 25.000 General Support CrotononHudson, NY 10520

48 Pond Meadow Road Auroras Voice dba Delrav 26-1535000 501(C)(3) 100,000 Beach Children's Garden

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1220 Sea Grape Circle Delray Beach, FL 33445

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Baptist Health South Florida 59-1923401 501(C)(3) 5,000 General Support

Foundation Inc 6855 Red Road Coral Gables, FL 33143					
Bascom Palmer Eye Institute University of Miami Health System	59-0624458	501(C)(3)	13,000		General Support

900 NW 17th St Suite 6

Miami, FL 33136

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 82-0985009 501(C)(3) 35.000 General Support Bear Warriors United Inc. 995 Oklahoma Street

51,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Oviedo, FL 32765

9045 La Fontana Blvd Boca Raton, FL 33434

Best Foot Forward Foundation

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Boca Raton Philharmonic 20-1454440 501(C)(3) 130.000 General Support Symphonia Inc 2285 Potomac Road Boca Raton, FL 33431

50.500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Boca Raton Regional Hospital

Foundation 745 Meadows Road Boca Raton, FL 33486

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Boys & Girls Clubs of Martin 23-7060561 501(C)(3) 30.000 General Support

County PO Box 910 Hobe Sound, FL 33475		(-)(-)	,		
Boys & Girls Clubs of Palm Beach County 800 Northpoint Parkway Suite	23-7060561	501(C)(3)	16,250		General Support

ichpolit Farkway Juice 204 West Palm Beach, FL 33407

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 05-0258809 501(C)(3) 50,000 General Support Brown University Sports F----

1 Prospect Street Box 1877 Providence, RI 02912					
Buddist Film Foundation Inc Zaentz Media Center 2600 Tenth St	94-3402911	501(C)(3)	10,000		General

Berkley, CA 94710

ral Support Suite 409

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 59-1802917 501(C)(3) 10.000 General Support CROS Ministries 3677 23rd Avenue South

15,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Lake Worth, FL 33461
Canterbury School Inc

101 Aspetuck Avneue New Milford, CT 06776

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance ort

Cardinal Newman High School 512 Spencer Drive West Palm Beach, FL 33409	59-0938455	170(c)(1)	13,500		General Support
Caridad Center Inc	65-0149423	501(C)(3)	228,182		General Support

8645 W Boynton Beach Blvd Boynton Beach, FL 33472

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Catholic Charities Diocese of 59-2470479 501(C)(3) 7.631 General Support Palm Beach 9995 N Military Trail Palm Beach Gardens, FL

20,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

33410

PO Box 710 Tucson, AZ 85702

Center for Biological Diversity

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Center for Child Counseling Inc 65-0932032 501(C)(3) 13.000 General Support 7731 N Military Trail Palm Beach Gardens, FL 33410

100.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

65-0594599

Center for Creative EducationLearning 425 24th Street

West Palm Beach, FL 33407

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Center for Technology 65-0362710 501(C)(3) 5.000 General Support Enterprise & Development

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Road

Cape Neddick, ME 03902

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 20-8128398 501(C)(3) 148.500 General Support Chabad Lubavitch of West Palm Beach 2112 North Jog RoadSuite 101

25.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

West Palm Beach, FL 33411

151 West 30th Street New York, NY 10001

11-2940331

Char Lifeline

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 43-1634280 501(C)(3) 10.000 General Support Charities Aid Foundation of America 225 Reinekers Lane Suite 375

37,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Alexandra, VA 22314
Child Evangelism Fellowship

Cuvahoga Falls, OH 44221

641 Acorn Place

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Children's Case Management 65-0166352 501(C)(3) 13.920 General Support Organization DBA Families First 3333 Forest Hill Blvd 2nd Floor West Palm Beach, FL 33406

25.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

City of Riviera Beach Dept of

Parks & Recreation 1621 W Blue Heron Blvd Riviera Beach, FL 33404

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 56-6000448 501(C)(3) 245.000 General Support City of West Palm Beach 401 Clematis Street West Palm Beach, FL 33401

Classic Stage Company (CSC 23-7025308 501(C)(3) 26,000 General Support

Repertory Ltd) 136 E 13th Street New York, NY 10003

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Coastline Children's Film 47-2039811 501(C)(3) 6.200 General Support Festival

9098 Trillium Lane	
Bridman, MI 49106	

Cold Spring Harbor Laboratory
One Bungtown Road
Cold Spring Harbor, NY 11724
General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Colgate University 15-0532078 170(c)(1) 40.000 General Support 13 Oak Drive Hamilton, NY 13346

20,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

College Foundation of UVA

Charlottesville, VA 22904

PO Box 400801

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Commission for Jewish Ed Of 65-0219982 501(C)(3) 5.000 General Support The Palm Beaches 3267 N Military Trail West Palm Beach, FL 33409

5.746

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Community Caring Center of

Greater Boynton Beach 145 NE 4th Avenue Boynton Beach, FL 33435

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 81-3559159 501(C)(3) 10.000 General Support Community Greening Corp 610 SE 15th Avenue

64,664

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Delray Beach, FL 33444

Community Partners Group

2001 W Blue Heron Blvd Riviera Beach, FL 33404

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Community Partnership School 20-3195763 501(C)(3) 50.000 General Support C/O Advancement Office 1026

N					
Judson Street Philadelphia, PA 19121					
Compete 2 Give Inc 1095 NW Broken Sound Pkwy	47-1789531	501(C)(3)	5,000		General Support

Ste 203

Boca Raton, FL 33487

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Cong Simchat Tzion - Libi 11-3636715 501(C)(3) 53.000 General Support Bmizrah 428 Clifton Ave 44

Lakewood, NJ 08701

Cradles to Cravons 04-3584367 501(C)(3) 5.000 General Support 155 North Beacon Street Brighton, MA 02135

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Creative City Collaborative of 26-3210202 501(C)(3) 15.000 General Support Delray Beach Inc 180 NE 1st Street Delray Beach, FL 33444

75.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Creative Development

Community Centers 124 Bella Vista Way Royal Palm Beach, FL 33411

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Cystic Fibrosis Foundation 13-1930701 501(C)(3) 10.000 General Support

4550 Montgomery Ave SuiteE 1100 N Bethesda, MD 20814		(-)(-)			
Delray Beach Firefighters & Paramedics Benevolent Fund Inc	26-4503731	501(C)(3)	10,000		General Support

PO Box 6805 Delray Beach, FL 33482

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Delray Beach Public Library 59-0217683 501(C)(3) 5.000 General Support Association Inc 100 W Atlantic Ave Delray Beach, FL 33444

11.500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Delray Citizens for Delray

Police Inc 40 S Ocean Blvd Delray Beach, FL 33483

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 46-1037515 501(C)(3) 207.500 General Support

Delray Tennis Outreach 13614 Weyburne Drive

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Greenacres, FL 33463

port

Deiray Beach, FL 33446					
Digital Vibez Inc 5199 10th Ave Suite 200	46-5032425	501(C)(3)	7,850		General Suppo

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 59-2438903 501(C)(3) 5.058 General Support Diocese of Palm Beach 9995 N Military Trail Palm Beach Gardens, FL

10.390

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

33410

Direct Relief International

6100 Wallace Bechnell Rd Santa Barbara, CA 93117

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 59-1196390 501(C)(3) 20.000 General Support Downtown Development Authority 301 Clematis St Suite 200

Authority
301 Clematis St Suite 200
West Palm Beach, FL 33401

Eagles Wings Foundation 65-1089571 501(C)(3) 6,000

General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

375 Possum Pass

West Palm Beach, FL 33413

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Ebony Chorale of the Palm 65-0379536 501(C)(3) 5.000 General Support Beaches 1512 39th St West Palm Beach, FL 33407

50.600

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Education Foundation of Martin

County PO Box 291 Stuart, FL 34995

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Education Foundation of Palm 59-2420369 501(C)(3) 16.500 General Support Beach County

3300 Forest Hill Blvd Suite C-141 West Palm Beach, FL 33406

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Delray Beach, FL 33444

Emmaus Alliance Ministries Inc. 01-0801449 501(C)(3) 10,000 General Support 49 SW 7th Ave

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Executive Women of the Palm 59-2703382 501(C)(3) 15.125 General Support

170 NW Fifth Ave Delray Beach, FL 33444

Beaches Foundation 2701 N Australian Ave Suite 205 West Palm Beach, FL 33407		===(=/(=/	,		
Expanding & Preserving Our Cultural Heritage Inc	65-0687303	501(C)(3)	50,500		General Support

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 81-1372464 501(C)(3) 25,000 General Support Experience Learning Inc 18 Woodlands Way

5,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Circleville, WV 26804
Family Church

West Palm Beach, FL 33401

1101 S Flagler Dr

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 59-1830267 501(C)(3) 17.050 General Support Farmworker Coordinating Council of PB County Inc 1123 Crestwood Blvd Lake Worth, FL 33460

15.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

First Care Family Resources

PO Box 15198

dba First Care Wonen's Clinic

West Palm Beach, FL 33416

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance First Congregational Church of 01-0211499 501(C)(3) 10.000 General Support Kittery Point 23 Pepperrell Road Kittery Point, ME 03905

20.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

First United Methodist Church

625 NE Mizner Boulevard Boca Raton, FL 33432

of Boca Raton

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 45-3862555 501(C)(3) 9.400 General Support

Fishing for Families in Need 2613 NW 38th Street Boca Raton, FL 33434

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Lake Worth, FL 33460

Flamingo Clav Studio Inc 20-2847213 501(C)(3) 9,400 General Support 15 South 1 Street

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 59-1312245 501(C)(3) 5.000 General Support Boca Raton, FL 33432

Florence Fuller Child Development Center 200 NE 14th Street

50.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Florida Angel Nexus

12201 Research Parkway Orlando, FL 32826

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 65-0604547 501(C)(3) 6.000 Florida Arts & Dance Company General Support

938 SE Central Parkway Stuart, FL 34994 Florida Atlantic University 59-0917284 501(C)(3) 66.021 General Support Foundation Inc.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

777 Glades Road ADM 295 Boca Raton, FL 33431

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Florida Oceanographic Society 59-1114306 501(C)(3) 53.000 General Support 890 NE Ocean Blvd General Support

Stuart, FL 34996

Florida Philanthropic Network 20-1328734 501(C)(3) 5,000

1211 N Westshore Boulevard Suite 314

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Tampa, FL 33607

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 59-0638479 501(C)(3) 152.502 General Support Florida United Methodist Children's Home 51 Childrens Way Enterprise, FL 32725 Floridians for a Sustainable 59-3275788 501(C)(3) 10.000 General Support

Population Inc 378 Northlake Blvd North Palm Beach, FL 33408

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Folds of Honor Foundation 75-3240683 501(C)(3) 5.000 General Support 5800 Patriot Drive Owasso, OK 74055

17,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Friends of Mounts Botanical

531 N Military Trail
West Palm Beach, FL 33415

Garden

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Friends of Recreation Inc. 81-2812213 501(C)(3) 25.000 General Support PO Box 977 65-0788164 501(C)(3) 10.876 General Support

Palm Beach, FL 33480 Friends of the Gale Academy of Environmental Science and Technology 3200 Summit Blvd

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

West Palm Beach, FL 33415

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Friends of the Graduate 27-2229822 501(C)(3) 25.000 General Support

Institute Genuva Inc 120 Vincennes Road Charlottesville, VA 22911	, , , ,	'		

New York, NY 10022

Friends of United Hatzalah Inc. 11-3533002 25.000 General Support 501(C)(3) 208 E 51st St Suite 303

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Future Generations University 400 Road Less Traveled Road Franklin, WV 26807	45-2208063	501(C)(3)	75,000		General Support
Genesis Community Health Inc	80-0374741	501(C)(3)	100,000		General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2623 S Seacrest Blvd Suite 65 Boynton Beach, FL 33435

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 23-1352639 501(C)(3) 25,000 General Support Germantown Academy

340 Morris Rd Fort Washington, PA 19034

5,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

God's Army Raising Youth

5139 Woodstone Circle Fast Lake Worth, FL 33463

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 64-0962873 501(C)(3) 13.000 General Support Good Samaritan Alliance Church of Boynton Beach 425 NF 10th Ave Boynton Beach, FL 33435

49.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Gospel Crusade Inc

1200 Glory Way Blvd Bradenton, FL 34212

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 59-1778407 501(C)(3) 25.000 General Support Grace Community Church

Foundation 600 W Camino Rd Boca Raton, FL 33486 Grace Fellowship Church DBA 59-1278108 501(C)(3) 20.000 General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Berean Christian School 8350 Okeechobee Blvd West Palm Beach, FL 33411

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Habitat for Humanity of Martin 59-2816698 501(C)(3) 53.000 General Support County 2090 NW Federal Hwv Stuart, FL 34994

55.200

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Habitat for Humanity of Palm

Beach County Inc 6758 N Military Trail Riviera Beach, FL 33407

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Habitat for Humanity of South 65-0307017 501(C)(3) 74.550 General Support Palm Beach County 181 SE 5th Ave Delray Beach, FL 33483

5.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Hannah's Home of South

Florida Inc PO Box 4512 Tequesta, FL 33469

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 13-0873838 501(C)(3) 26.000 General Support Henry Morrison Flagler Museum General Support

One Whitehall Way Palm Beach, FL 33480 Historical Society of Lake 81-3200453 501(C)(3) 10.000 Worth

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

15 North M St Lake Worth, FL 33460

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 59-0913326 501(C)(3) 10.561 General Support Historical Society of Martin County Inc 825 NF Ocean Blvd Hutchinson Island, FL 34996 Historical Society of Palm 59-6158821 501(C)(3) 5.000 General Support

Beach County PO Box 4364

West Palm Beach, FL 33402

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 59-6155092 501(C)(3) 5.000 General Support

Hobe Sound Community Chest Inc PO Box 511 Hobe Sound, FL 33475

50.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

59-1935485

HomeSafe

2840 Sixth Avenue South Lake Worth, FL 33461

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 20-4559210 501(C)(3) 10.000 General Support Hope for Depression Research Foundation 777 S Flagler Dr Suite 801E West Palm Beach, FL 33401

15.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Hospice of Okeechobee Inc

411 SE 4th Street Okeechobee, FL 34974

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance House of Hone 59-2422998 501(C)(3) 44 758 General Support

2484 SE Bonita St Stuart, FL 34997	33 2422330	301(0)(3)	44,733		ocherar :
Immigration Reform Law Institute 25 Massachusetts Avenue NW Suite	52-1469956	501(C)(3)	5,000		General S

l Support 335 Washington, DC 20001

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Indian River State College 59-1105591 501(C)(3) 20.500 General Support Foundation Inc 3209 Virginia Ave Fort Pierce, FL 34946 InterVarsity Christian 36-2171714 501(C)(3) 6.000 General Support

Fellowship - USA PO Box 7895 Madison, WI 53707

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Israel Horizon Foundation Inc 81-3460728 501(C)(3) 18,000 General Support

NEFESH BNEFESH 50 Eisenhower Dr Paramus, NJ 07652					
Israel Tennis Centers Foundation 3275 W Hillsboro Blyd Suite	13-2961273	501(C)(3)	26,000		General Support

102

Deerfield Beach, FL 33442

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Jack the Bike Man Inc 26-0579626 501(C)(3) 7.000 General Support

PO Box 17665
West Palm Beach, FL 33416

Jefferson Scholars Foundation 31-1755873 501(C)(3) 80,000

PO Box 400891

Charlottesville, VA 22904

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 65-0452075 501(C)(3) 8.000 General Support Jesus and You Outreach Ministries 2831 Avenue S Riviera Beach, FL 33404

16.500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Jewish Federation of Palm

1 Harvard Circle Suite 100 West Palm Beach, FL 33409

Beach County

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 59-1945109 501(C)(3) 7.000 General Support Jewish Federation of South Palm Beach 9901 Donna Klein Blvd Boca Raton, FL 33428 Jewish Heritage Center of 11-2891771 501(C)(3) 65.000 General Support

Queens and Long Island 6829 Main Street Flushing, NY 11367

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Jewish Women's Foundation of 47-1611411 501(C)(3) 20.000 General Support the Greater Palm Beaches

500 S Australian Ave 517 West Palm Beach, FL 33401

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Baltimore, MD 21287

Johns Hopkins 52-0595110 501(C)(3) 11.000 General Support 601 N Caroline St Suite 6210

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance Junior Achievement of the 59-2333738 501(C)(3) 34.500 General Support

170(c)(1)

59-6000783

Palm Beaches and Treasure Coast 6903 Vista Parkway North Suite 10 West Palm Beach, FL 33411				,

5,000

General Support

Jupiter Community High School 500 N Military Trail

Jupiter, FL 33458

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 65-0132406 501(C)(3) 500.000 General Support Jupiter Medical Center Foundation 1210 S Old Dixie Hwv Jupiter, FL 33458

5.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

65-0016849

Jupiter Tequesta Athletic

Association 200 Military Trail Jupiter, FL 33458

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 23-7148171 501(C)(3) 5.000 General Support La Jolla Music Society

7946 Ivanhoe Ave Suite 309 La Jolla, CA 92037 Lake Worth West Resident 65-0838753 501(C)(3) 100,000 General Support Planning Group Inc

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

4730 Maine St Lake Worth, FL 33461

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Lambda Legal Defense and 23-7395681 501(C)(3) 5.000 General Support Education Fund Inc

120 Wall St 19th Floor New York, NY 10005 Law Enforcement Assistance 65-0036801 501(C)(3) 11.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

General Support Foundation PO Box 17725 West Palm Beach, FL 33416

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Light House Cafe Ministries of 65-0980934 E01/C1/31 5 000 General Support

Light house care ministries of	03-0300334	301(0)(3)	3,000		General .
the Glades					i
400 SW Ave B Place					ł
Belle Glade, FL 33430					l

10.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Lighthouse ArtCenter Inc

373 Tequesta Dr Tequesta, FL 33469

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance ort

Lowell Catholic High School	04-2563657	501(C)(3)	40,800		General Suppor
530 Stevens St					
Lowell, MA 01851					

Belle Glade, FL 33430

Lutheran Services Florida Inc. 5,000 59-2198911 501(C)(3) General Support 200 SF 9th St

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 65-0985652 501(C)(3) 201.001 General Support Maltz Jupiter Theatre Inc 1001 E Indiantown Rd Jupiter, FL 33477

10,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Mandel Jewish Community

Boynton Beach, FL 33472

8500 Joa Rd

Center of the Palm Beaches Inc.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 59-2349297 501(C)(3) 5.600 General Support

 Mariner Sands Chapel
 59-2349297
 501(C)(3)
 5,600
 General Support

 6500 SE Congressional Way
 Stuart, FL 34997
 34997
 501(C)(3)
 15,000
 General Support

 Martha's House
 65-0094350
 501(C)(3)
 15,000
 General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO BOX 727

Okeechobee, FL 34973

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Martin County School District 59-6000742 170(c)(1) 12.000 General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

West Palm Beach, FL 33402

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance eneral Support

12,000

Memorial Presbyterian Church 1300 S Olive Ave	59-0678771	501(C)(3)	5,000		Gen
West Palm Beach, FL 33401					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Memory Trees Corporation

6742 Forest Hill Blvd Greenacres, FL 33257

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 59-0760220 501(C)(3) 25.000 General Support Mental Health Association of

Palm Beach County 909 Fern St West Palm Beach, FL 33401

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Boca Raton, FL 33496

Morgan Pressel Foundation Inc 27-2854677 501(C)(3) 15.000

General Support 7559 Fairmont Ct

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 59-2301320 501(C)(3) 75.000 General Support NAMI of Palm Beach County Mollie Wilmot Ctr- Palm

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Reconstruction

333 E 30th St Lobby Unit New York, NY 10016

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance National Tropical Botanical 52-6057064 501(C)(3) 27,000 General Support

Neighborhood Renaissance Inc	65-0352279	501(C)(3)	50,000		General Support
Garden 3530 Papalına Road Kalaheo, FL 96741					

510 24th St Suite A West Palm Beach, FL 33407

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance New Mount Carmel Foundation 26-3332215 501(C)(3) 5.000 General Support Inc

| North Palm Beach Little League | 65-0459774 | 501(C)(3) | 5,000 | | General Support |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Palm Beach Gardens, FL

33418

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 27-1113574 501(C)(3) 50.000 General Support Northwest Community Consortium Inc 409 N Rosemary Ave

40.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

West Palm Beach, FL 33401

Norton Museum of Art Inc

1451 S Olive Avenue West Palm Beach, FL 33401

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 65-0509255 501(C)(3) 10.000 General Support Ocean Reef Community Foundation 35 Ocean Reef Dr Suite 148 Key Largo, FL 33037

9.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Operation Hope Inc

1253 10th Street Lake Park, FL 33403

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization ıf applıcable grant cash or assistance or government other) assistance Pace Center for Girls Palm 59-2414492 501(C)(3) 9,250 General Support Beach County

1225 South Military Trail Suite D West Palm Beach, FL 33415					
Palm Beach Area Tennis Patrons Inc 2247 Palm Beach Lakes Blvd Suite 203	65-0461384	501(C)(3)	5,000		General Support

West Palm Beach, FL 33409

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Palm Beach Civic Association 59-0542089 501(C)(3) 5,300 General Support

525 Gator Drive Lantana, FL 33462

Palm Beach County Food Bank	90-0788707	501(C)(3)	274,125		General Support
Inc The Paramount Bldg 139 N County Rd Suite 33 Palm Beach, FL 33480					

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Palm Beach County Golf 59-2151354 501(C)(3) 5.000 General Support Association Inc PO Box 32123 Palm Beach Gardens, FL

29,500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

170(c)(1)

59-0873834

33420

Palm Beach Day Academy

241 Seaview Avenue Palm Beach, FL 33480

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Palm Beach Gardens Youth 23-7299387 501(C)(3) 7.900 General Support Athletic Association Inc.

PO Box 31913 Palm Beach Gardens, FL 33420					
Palm Beach Habilitation Center Inc	59-6213381	501(C)(3)	10,000		General Support

4522 S Congress Ave Lake Worth, FL 33461

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Palm Beach Orthodox 65-0478910 501(C)(3) 10.000 General Support Synagogue 120 N County Rd Palm Beach, FL 33480

5.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Palm Healthcare Foundation

700 S Dixie Hwy Suite 205 West Palm Beach, FL 33401

Inc

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Parish of Blessed Miriam 81-0776033 501(C)(3) 6,500 General Support

Teresa 326 Avenue C Bayonne, NJ 07002					
Pediatric Oncology Support Team Inc 5325 Greenwood Ave Suite 301	45-4769367	501(C)(3)	27,000		General Support

West Palm Beach, FL 33407

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Place of Hope at the Leighan 46-1808939 501(C)(3) 101.000 General Support and David Rinker Campus 21441 Boca Rio Rd Boca Raton, FL 33433

110.500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Place of Hope Inc

9078 Isiah Lane Palm Beach Gardens, FL

33418

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance E04/63/33 26 200 Support

5.000

Planned Parenthood of South	59-1391115	[ 501(C)(3)	26,200		General
East and North Florida					
2300 N Florida Mango Rd					
West Palm Beach, FL 33409					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Pomfret School Inc.

398 Pomfret St PO Box 128 Pomfret, CT 06258

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Preservation Foundation of 59-1989832 501(C)(3) 10.000 General Support

Palm Beach Inc 311 Peruvian Avenue Palm Beach, FL 33480 05-0252708 27.000 Preservation Society of

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Newport, RI 02840

501(C)(3) General Support Newport County 424 Bellevue Avenue

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Prime Time Palm Beach County 65-1071628 501(C)(3) 7.500 General Support

Inc
2300 High Ridge Rd Suite 330
Boynton Beach, FL 33426

27 2040112 E01/C1/21 100 000 Project LIET Inc.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Canada Company

Project LIFT Inc	2/-3949112	201(C)(3)	100,000		General Support
1330 SW 34th St					
Palm City, FL 34990					1

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance neral Support

Quantum House Inc 987 45th Street West Palm Beach, FL 33407	65-0898326	501(C)(3)	6,000		General Support
Real Life Children's Ranch Inc	59-6173061	501(C)(3)	26,000		General Support

7777 US Hwy 441 SE Okeechobee, FL 34974

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 55-0808840 501(C)(3) 5.000 General Support Restoration Bridge

International 7255 S Military Trail Palm Springs, FL 33461

7.700

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Roots and Wings Inc

335 E Linton Blvd Suite 2219 Delray Beach, FL 33483

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 59-0638481 501(C)(3) 6.925 General Support Rosarian Academy 807 N Flagler Dr

100,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

West Palm Beach, FL 33401
Roseaure Retreat Inc

PO Box 431440 Miami, FL 33243

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 20-1750379 501(C)(3) 15.000 General Support Ryan Licht Sang Foundation

8.728

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

875 N Michigan AVE STE 3100 Chicago, IL 60611

Sandoway Discovery Center

142 South Ocean Boulevard Delray Beach, FL 33483

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Save the Children Federation 06-0726487 501(C)(3) 10.000 General Support Inc

501 Kings Hwy East Suite 400 Fairfield, CT 06825

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Poughkeepsie, NY 12601

Scenic Hudson Inc. 13-2898799 501(C)(3) 50.000 General Support One Civic Ctr Plaza Suite 200

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Scripps Research Institute 33-0435954 501(C)(3) 114.000 General Support

Seeina Eve Inc	22-1539721	501(C)(3)	50,000		General Support
Florida 130 Scripps Way C349 Jupiter, FL 33458		, , , ,	'		

PO Box 375 Morristown, NJ 07963

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 52-1367538 501(C)(3) 24,500 General Support Share Our Strength Inc 1030 15th St NW Ste 1100 Washington, DC 20005

5,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

South Florida Hunger Coalition

Fort Lauderdale, FL 33301

599 SW 2nd Ave

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance South Florida Science Center & 59-0915177 501(C)(3) 30.133 General Support Aguarium 4801 Dreher Trail North West Palm Beach, FL 33405

10.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

South Florida Symphony

Fort Lauderdale, FL 33312

Orchestra 221 SW 3rd Ave

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance South Tech Charter Academy 32-0089102 501(C)(3) 20.000 General Support Inc 1300 SW 30th Ave Boynton Beach, FL 33426

5.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Southeast Florida Honor Flight

Inc

7586 Worral Dr Lake Worth, FL 33463

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Southeastern Guide Dogs Inc 59-2252352 501(C)(3) 25,000 General Support 4210 77th St East

5,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Palmetto, FL 34221
Southern Palm Zen Group

PO Box 880551 Boca Raton, FL 33488

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 63-0598743 501(C)(3) 10.000 General Support Southern Poverty Law Center 400 Washington Ave

Montgomery, AL 36104

Sovereign Order of St John of Jerusalem
Commandery of the Palm
Beaches 2000
PGA Blvd Ste 4410

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

North Palm Beach, FL 33408

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Spirit of America 20-1687786 501(C)(3) 5.000 General Support

Spirit of America 20-1687/86 501(C)(3) 5,000 General Support 1100 N Glebe Rd Arlington, VA 22201 St Ann Church 59-2438903 501(C)(3) 5,200 General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

310 N Olive Ave

West Palm Beach, FL 33401

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 59-2438903 501(C)(3) 5.000 General Support St Edward's Catholic Church 144 N County Rd Palm Beach, FL 33480

144 N County Rd
Palm Beach, FL 33480

St Joan of Arc Catholic Church and School
501 SW Third Ave

General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Boca Raton, FL 33432

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance St Patrick's Episcopal Church 59-1276272 501(C)(3) 10.000 General Support 418 N Sapodilla Avenue West Palm Beach, FL 33401

West Palm Beach, FL 33401

St Vincent de Paul Regional Seminary

59-1276272

501(C)(3)

25,000

General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

10701 S Military Trail Boynton Beach, FL 33436

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Stem HQ dba TechGarage 46-2516444 501(C)(3) 50.000 General Support 824 Par Circle Delray Beach, FL 33445

Stone Barns Center for Food 13-4150082 501(C)(3) 50,000 and Agriculture

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

General Support 630 Bedford Rd Pocantico, NY 10591

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 27-0969454 501(C)(3) 190.000 General Support Strang Cancer Prevention Institute 575 Madison Avenue 10th Floor New York, FL 10022

56,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Susan G Komen Breast Cancer

340 Royal Poinciana Way Suite

Palm Beach, FL 33480

Foundation

317-810

75-1835298

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 65-0254225 501(C)(3) 25.000 General Support Susan G Komen South Florida 1309 N Flagler Dr 5th Floor West Palm Beach, FL 33401

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

West Palm Beach, FL 33405

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Tequesta's First Baptist Church 59-1364205 501(C)(3) 10.000 General Support 423 Tequesta Drive

100,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Tequesta, FL 33469
The Animal Medical Center

510 East 62nd Street New York, NY 10065 13-5505367

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance The Arts Council Inc 59-2015691 501(C)(3) 41.200 General Support 80 Southeast Ocean Boulevard Stuart, FL 34994

10,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Stuart, FL 34994

The East Harlem School at Exodus House
309 E 103rd St

New York, NY 10029

13-3738559

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance The Everglades Foundation Inc 59-3228899 501(C)(3) 18.104 General Support 18001 Old Cutler Road Suite 625 Palmetto Bav. FL 33157 The Gathering Palm Beach 59-2810392 501(C)(3) 10.000 General Support County 7711 N Military Trail Suite

1016 Palm Beach Gardens, FL

33410

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 59-1441000 501(C)(3) 5.000 General Support The Independent Florida Alligator 2700 SW 13th St

59-2240502 501(C)(3) 60.250 General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Gainesville, FL 32608 The Lord's Place Inc. 2808 North Australian Avenue

West Palm Beach, FL 33407

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance The Michelle McGann Fund Inc. 45-4350963 501(C)(3) 5.000 General Support PO Box 1592

117,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

West Palm Beach, FL 33402

65-0804625

The Milagro Center

695 Auburn Avenue Delray Beach, FL 33444

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 59-1542539 501(C)(3) 25.500 General Support The Palm Beach Symphony Society Inc

44 Cocoanut Row Suite M207B Palm Beach, FL 33480

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

58-0660607 501(C)(3) 5.000 General Support The Salvation Army 821 SE Martin Luther King Jr Blvd Stuart, FL 34994

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 59-0454318 501(C)(3) 25.000 General Support The Society of the Four Arts 2 Four Arts Plaza

Palm Beach, FL 33480

The Village Baptist ChurchFeed 59-0766989 501(C)(3) 150,000
the Hungry 3600 Village Blvd

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

West Palm Beach, FL 33407

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Town of Palm Beach United 59-0637885 501(C)(3) 7.000 General Support Way Inc

 Way Inc

 44 Cocoanut Row Ste M201

 Palm Beach, FL 33480

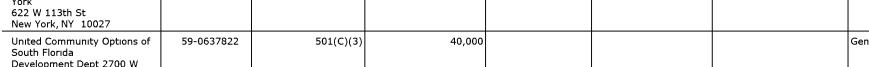
 Treasure Coast Hospice
 65-0047497
 501(C)(3)
 25,000

 Foundation

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1201 SE Indian St Stuart, FL 33997

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 13-5598093 501(C)(3) 50.000 General Support Trustees Of Columbia University In The City of New York



Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Hialeah, FL 33016

General Support Development Dept 2700 W 81st St

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance ral Support

United States Artists Inc 980 N Michigan Ave Ste 1300 Chicago, IL 60611	22-3903993	501(C)(3)	60,000		Genera

23,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

United Way of Martin County

PO Box 362 Stuart, FL 34995 23-7273540

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 59-0683258 501(C)(3) 91.413 General Support United Way of Palm Beach County

County
477 S Rosemary Ave Ste 230
West Palm Beach, FL 33401

University of Florida 59-0974739 501(C)(3) 6,000

General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO Box 14425 Gainesville, FL 32604

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance

Urban League of Palm Beach County Inc 1700 North Australian Ave West Palm Beach, FL 33407	59-1533710	501(C)(3)	59,400		General Support
West Pallit Beach, FL 33407					<b></b>

105.872

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

91-1901103

Urban Youth Impact Inc

2823 North Australian Ave West Palm Beach, FL 33407

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 26-1300231 501(C)(3) 5.000 General Support Vets Helping Heroes Inc 8000 N Federal Hwy Suite 207 Boca Raton, FL 33487 General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Women's Foundation of 45-2514055 501(C)(3) 5.000 General Support Southwest Florida 9015 Strada Stell Ct Ste 205 Naples, FL 34109

10.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

Wood Island Life Saving

Kittery Point, ME 03905

Station Association PO Box 11

45-3543669

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 59-1416281 501(C)(3) 36.555 General Support YMCA of South Palm Beach County 6631 Palmetto Circle South Boca Raton, FL 33433

10.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

York College Foundation Inc

94-20 Guy R Brewer Blvd Jamaica, NY 11451 11-2982841

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant **(b)** EIN (c) IRC section organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 501(C)(3) 50.000 Young Singers of the Palm 30-0193514 General Support Beaches 701 Okeechobee Blvd Ste 305

West Palm Beach, FL 33401

efil	e GRAPHIC pr	rint - DO NOT PROCESS	As Filed Dat	a -	DLN: 934	9313	35028	3079
Sch	nedule J	C	ompensat	ion Information	ОМ	B No	1545-0	0047
(For	m 990)	For certain Offic	ers, Directors, 1	Frustees, Key Employees, and Hig	hest			
		Complete if the or		ated Employees vered "Yes" on Form 990, Part IV	line 23	20	17	7
		-	► Attach	ı to Form 990.				
•	tment of the Treasury al Revenue Service	▶ Information a		I (Form 990) and its instructions in a conferment in a conferm	is at •		to Pul ectio	
Nar	me of the organiza				Employer identificat			
Con	nmunity Foundation	for Palm Beach and			23-7181875			
Pa	rt I Questi	ons Regarding Compensa	ntion					
							Yes	No
1a				f the following to or for a person liste by relevant information regarding the				
	First-class	s or charter travel		Housing allowance or residence for	•			
	_	companions	님	Payments for business use of perso				
		nification and gross-up paymen	ts 📙	Health or social club dues or initiation				
	☐ Discretion	nary spending account	Ш	Personal services (e g , maid, chauf	reur, cner)			
b		xes in line 1a are checked, did t all of the expenses described ab		ollow a written policy regarding paym nplete Part III to explain	nent or reimbursement	<b>1</b> b		
2				or allowing expenses incurred by all	4.3	2		
	directors, truste	es, officers, including the CEO/	Executive Directo	r, regarding the items checked in line	e 1a/			
3				ed to establish the compensation of the	ne			
				not check any boxes for methods CEO/Executive Director, but explain i	n Part III			
		-						
		ation committee ent compensation consultant	<b>□</b>	Written employment contract Compensation survey or study				
		of other organizations	<b>\rightarrow</b>	Approval by the board or compensa	tion committee			
		-						
4	related organiza		990, Part VII, Se	ection A, line 1a, with respect to the f	lling organization or a			
а	Receive a sever	ance payment or change-of-cor	ntrol payment?			4a		No
b	Participate in, o	r receive payment from, a supp	lemental nonqual	lified retirement plan?		4b		No
c	•	r receive payment from, an equ		<del>-</del>		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons an	d provide the app	plicable amounts for each item in Part	: III			
	Only 501(c)(3	), 501(c)(4), and 501(c)(29	) organizations	must complete lines 5-9.				
5	For persons liste		on A, line 1a, did	the organization pay or accrue any				
а	The organization	n?				5a		No
b	Any related orga	anization?				5b		No
	If "Yes," on line	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Section ontingent on the net earnings o		the organization pay or accrue any				
а	The organization	n?				6a		No
b	Any related orga					6b		No
	•	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Section escribed in lines 5 and 67 If "Ye		the organization provide any nonfixed art III	d	7		No
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," do	escribe			
9		8, did the organization also folk	ow the rebuttable	presumption procedure described in	Regulations section	9		No
Eau I		iction Act Notice, see the Inc	structions for E	orm 990. Cat No "	50053T Schedule J		2 000)	2017

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

			y Employees, and Hi					
instructions, on row (ii)	Do no	ot list any individuals that	rted on Schedule J, report at are not listed on Form 99 ndividual must equal the to	990, Part VII				at individual
(A) Name and Title			n of W-2 and/or 1099-MISo (ii) Bonus & Incentive compensation	C compensation (iii) Other reportable	(C) Retirement and other deferred compensation	( <b>D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred on prior
		<u> </u>	!	compensation				Form 990
1 Bradley Hurlburt President and CEO	(i)	181,666	0	0	9,356	7,739	198,761	0
	(ii)	0	0	0	0	0	0	0
2 Gloria Ortega Rex Executive VP and CFO	(i)		7,000	0	7,244	7,739	165,992	0
Executive vr and Cro	(ii)		0	0	0	0	0	0
			!					
			1					
			+					
	+		<del>                                     </del>					<del> </del>
			<u> </u>					<u> </u>
			!					
			!					
			<u> </u>					
			1					

Schedule J (Form 990) 2017 Page 3 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation

Schedule 1 (Form 990) 2017

efile GRAPHIC print - DO NO	OT PROCESS As	Filed Data -									934931		
Schedule K (Form 990)	Su Complete if th	pplemental I	nformation o	n Tax-E	xempt	Bonds	escriptions				No 154		
		explanations,	and any additional	informatior								•	
Department of the Treasury Internal Revenue Service	▶Informatio		► Attach to Form 99 ( (Form 990) and its		s is at <u>ww</u> ı	w.irs.gov/fo	rm990.				en to Pi Inspecti		
Name of the organization Community Foundation for Palm Bea	ach and							Emplo	yer iden		n numbe		
	acri ariu							23-71	81875				
Part I Bond Issues													
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue p	orice	(f) Descript	ion of purpos	e (g) De	efeased	beha	On alf of uer		Pool ncing
								Yes	No	Yes	No	Yes	No
A Palm Beach County Revenue Bond	23-7181875		03-01-2004	6,9	00,000 Fina	ance developr	nent		Х		Х		Х
Part II Proceeds									<u> </u>	<u> </u>			<u> </u>
					Α		В	(	:			D	
1 Amount of bonds retired													
2 Amount of bonds legally defe													
3 Total proceeds of issue					6,900,00	0							
4 Gross proceeds in reserve fur													
5 Capitalized interest from proc													
6 Proceeds in refunding escrow													
7 Issuance costs from proceeds													
8 Credit enhancement from pro													
9 Working capital expenditures													
10 Capital expenditures from pro					6,900,00	0							
11 Other spent proceeds													
12 Other unspent proceeds													
13 Year of substantial completion	n		• •		)34		1						
				Yes	No	Yes	No	Yes	No		Yes		No
14 Were the bonds issued as par					X								
15 Were the bonds issued as par					Х								
16 Has the final allocation of pro	ceeds been made? .			Х									
Does the organization mainta proceeds?	nn adequate books and	records to support th	e final allocation of	Х									
Part IIII Private Business	Use				· ·								
					A	<u> </u>	B					D	
Was the organization a partner financed by tax-exempt bond				Yes	No X	Yes	No	Yes	No		Yes		<u>No</u>
Are there any lease arrangem property?	nents that may result in	n private business use	of bond-financed		Х								
For Panerwork Reduction Act No	tice, see the Instruct	tions for Form 990		Ca	t No 5019	3F			5	chedul	e K (For	m 990	1) 2017

9

C

Part IV

Arbitrage

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?

organization, or a state or local government . . . . . . . . . . . .

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

Rebate not due yet? . . . . . .

hedge with respect to the bond issue?

Exception to rebate? . . . . . . .

the issue are remediated in accordance with the requirements under

Regulations sections 1 141-12 and 1 145-2?

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Enter the percentage of financed property used in a private business use by entities other than

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

Page 2

No

		4	-		•	'	C		,
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		×						
ь	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
С	Are there any research agreements that may result in private business use of bond-financed property?		x						

Χ

Χ

Α

Yes

Χ

No

Χ

Χ

Х

Χ

Х

Х

Yes

No

C

No

Yes

Schedule K (Form 990) 2017

Yes

the GIC satisfied? . . . . . . . . .

requirements of section 148? . . .

Were gross proceeds invested in a guaranteed investment contract

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

**Procedures To Undertake Corrective Action** 

if self-remediation is not available under applicable regulations?

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

Schedule K (Form 990) 2017

(GIC)?

period?

Part V

Page 3

No

No

A B C
Yes No Yes No Yes No Yes

Yes

No

Yes

No

Yes

Schedule K (Form 990) 2017

X

Yes

Χ

**Supplemental Information.** Provide additional information for responses to questions on Schedule K (see instructions).

Nο

efil	e GRAPHIC pr	rint - DO NOT PR	OCESS	As Filed Data -		DLN: 9	349313	5028	079
SCH	EDULE M			Noncash Contri	hutione		OMB No 1	545-0	047
(For	m 990)		1	ioncasii contii	Dutions		20	1 7	
		▶Complete if the	organizati	ons answered "Yes" on F	orm 990, Part IV, lines 2	9 or 30.	<b>20</b>	1/	
		► Attach to Form							
•	tment of the Treasury al Revenue Service	▶Information abo	ut Schedu	ıle M (Form 990) and its i	nstructions is at <u>www.ir</u> :	s.gov/form990	Open to		
	e of the organizat					Employer identif	ication n	umbei	-
Comm	nunity Foundation fo	r Pallii Beach and				23-7181875			
Pa	rt I Types	of Property							
			(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	Method o noncash con	(d) of determin tribution a		:s
1	Art—Works of art	+			1g				
2	Art—Historical tr								
3	Art—Fractional in								
4	Books and public	ations							
5	Clothing and hou								
e	goods					+			
6 7	Cars and other v Boats and planes					+			
-	Intellectual prope					1			
	Securities—Public	•	X		802,19	5 Public Exchange			
	Securities—Close					1			
11	Securities—Partr or trust interest								
12	Securities—Misce	ellaneous							
13	Qualified conserve contribution—Hi structures .	ıstorıc							
	Qualified conserve contribution—Of	ther							
	Real estate—Res								
	Real estate—Cor					-			
17	Real estate—Oth					+			
18 19	Collectibles . Food inventory					+			
20	Drugs and medic								
21	Taxidermy .								
22	Historical artifact	ts							
23	Scientific specim	ens							
	Archeological art								
	Other ▶ (					1			
26 27	Other ► (					+			
	Other • (	•				1			
	· '	<u> </u>	he organiza	I ation during the tax year for	contributions	<del>†                                    </del>			
				3, Part IV, Donee Acknowled		29			
								Yes	No
30a	must hold for at	least three years fro	om the date	y contribution any property is e of the initial contribution, a	and which is not required to	be used for exem			   <sub>N-</sub>
b		e the arrangement I					30a		No_
31	Does the organi	zation have a gift ac	ceptance p	olicy that requires the review	v of any nonstandard contr	ibutions?	31		No
32a				or related organizations to s		ash • • • •	32a		No
b	If "Yes," describ								
	•	ion did not report an	amount in	column (c) for a type of pro	perty for which column (a)	ıs checked,			
For D		on Act Notice, see the	Instruction	as for Form 990	Cat No. 512271	Schadu	le M (Form	990)	(2017)

Schedule M (Fo	rm 990) (2017)	Page <b>2</b>
Part II	Supplemental Info	rmation.
	Provide the informat	ion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part
	I, column (b), the nu	imber of contributions, the number of items received, or a combination of both. Also complete
	this part for any add	itional information.
Ret	urn Reference	Explanation
		Schedule M (Form 990) (2017)

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135028079 OMB No 1545-0047 Supplemental Information to Form 990 or 990-EZ SCHEDULE O Complete to provide information for responses to specific questions on (Form 990 or 990-Form 990 or 990-EZ or to provide any additional information. EZ) ▶ Attach to Form 990 or 990-EZ. Open to Public ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at Department of the Treasury Inspection www.irs.gov/form990. Name of the organization **Employer identification number** Community Foundation for Palm Beach and 23-7181875 990 Schedule O, Supplemental Information Return **Explanation** Reference PART 1 LINE SUMMARY OF EXEMPT PURPOSE The Community Foundation for Palm Beach and Martin Counties is an organization led by a board of local leaders that carefully stewards an endowment to me et changing community needs and manages 300 charitable funds for like-minded individuals, families, businesses and nonprofits who are connected by their passion for making a differ ence As one of Florida's largest community foundations, the Community Foundation has awar ded \$139 million in grants and scholarships over its 45-year history. We believe philanthr opy is essential to building healthy communities. HELPING OUR DONORS MAKE AN IMPACT For do nors, the Community Foundation offers philanthropic quidance, leadership and stewardship t hat is rooted in a deep knowledge of our community. We help our donors fulfill their phila nthropic vision and honor their passions -- whether it's responding to an urgent need, sup porting a particular cause or organization, creating a family legacy or partnering in a Co mmunity Foundation initiative Together, we address challenges, seek solutions and provide support to create vibrant communities where individuals and families flourish. Through the e generosity of our donors, we award millions in grants and scholarships each year that co ntinue to build and strengthen the communities we live in and love STRENGTHENING OUR COMM UNITIES For the community, the Community Foundation serves as a grant maker and a civic le ader We award grants to local organizataions to help meet community needs, fulfill our do nors' philanthropic wishes and strengthen the nonprofit sector. Using local knowledge, net works, influence and creativity, the Community Foundation brings people together to improv e the community's quality of life now and in the future. We challenge our nonprofit partne rs to create innovative proposals, engage in dialogue to discover new opportunities and pr ovide ideas for collective solutions PROVIDING COMMUNITY LEADERSHIP We are involved in Pa Im Beach and Martin counties by encouraging conversations, asking questions and bringing c ommunity partners together to address critical issues affecting our children, families and neighborhoods. We forge productive partnerships to develop sustainable solutions to tackl e the many challenges facing our communities, and are willing to take risks and make longterm investments for positive change. Through the support of our donors and fundholders, t he Community Foundation has been able to address some of the community's most pressing nee ds, including hunger, housing and education

Return Explanation
Reference

line 11b

Form 990, Part VI, Section B,

Return Explanation
Reference

Form 990,
Part VI,
Section B,
Inne 12c

A conflict of interest statement is completed and submitted annually by the officers, dire
ctors and key employees for review by the CFO for potential conflicts of interest. The for
m must be completed and submitted prior to the beginning of the fiscal year

Return Explanation
Reference

Form 990,
Part VI,
Section B,
Inne 15

Return Explanation
Reference

Form 990,	The Organization makes its governing documents, conflict of interest policy, and financial statements available upon request
Part VI,	
Section C,	
line 19	

990 Schedule O, Supplemental Information Return Explanation Reference

Form 990, Eliminated M&R Pew fee revenue -52,778 Part XI, line

990 Schedule O, Supplemental Information Return Explanation

Reference	
Part XII Line	The audit report is reviewed at the annual audit report review meeting as presented by the

independent auditor. The process has not changed from the prior year

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135028079 OMB No 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships** 2017 (Form 990) ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** Community Foundation for Palm Beach and 23-7181875 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I **(f)** Direct controlling (a)
Name, address, and EIN (if applicable) of disregarded entity **(b)** Primary activity (c) Legal domicile (state (d) (e) Total income End-of-year assets or foreign country) entity

Part II Identification of Related Tax-Exempt Organization	e Complete if the organ	nization answered !	'Ves" on Form 990	Part IV line 34 he	cause it had one or	more	
related tax-exempt organizations during the tax year.	is complete if the organ	iization answered	res on rollingso,	raiciv, iiie 54 be	cause it flad offe of	HIOLE	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (13) cor enti	512(b) ntrolled
						Yes	No
(1)Mary & Robert Pew Public Education Fund 601 Heritage Drive Ste 206 Jupiter, FL 33458 58-6365702	Type 1 Supporting Organization of the Community Foundation of P B & Mtn Cty	FL	501(c)(3)	Line 12b, II			No
For Paperwork Reduction Act Notice, see the Instructions for Form 9	90.	Cat No 50135	5Y		Schedule R (Form	990) 20	117

			1		1	1				ı .			
(a) Name, address, and EIN of related organization		<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related unrelated, excluded fron tax under sections 512- 514)	d, total income	Share of end-of-year assets	Disprop		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana parti	ral or iging	(k) Percenta ownersh
					314)			Yes	No		Yes	No	
Identification of Related Organization because it had one or more related organizations.						ization ans	wered "Yes	" on F	orm 99	90, Part IV,	line	34	
(a)	(b)		(c)		(d)	(e)	(f)	Т	(g)	(1	1)	Т	(1)
Name, address, and EIN of related organization	Primary activity	do (state	egal omicile or foreign untry)		entity (C	pe of entity corp, S corp, or trust)	Share of total income		e of end- year assets	of- Percel owne		(1	ction 51 3) contr entity
			unu y)									\	res
								+					
												$\top$	$\top$

Schedule R (Form 990) 2017		Pa	ge <b>3</b>
Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	П		
a Receipt of (i) interest, (ii)annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)	<b>1</b> b		No
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	<b>1</b> g	$\neg$	No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	<b>1</b> i	$\neg$	No
j Lease of facilities, equipment, or other assets to related organization(s)	<b>1</b> j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
I Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	$\neg$	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
o Sharing of paid employees with related organization(s)	10		No
p Reimbursement paid to related organization(s) for expenses	<b>1</b> p		No
q Reimbursement paid by related organization(s) for expenses	1q		No

j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
o Sharing of paid employees with related organization(s)	10		No
p Reimbursement paid to related organization(s) for expenses	<b>1</b> p		No
<b>q</b> Reimbursement paid by related organization(s) for expenses	<b>1</b> q		No
r Other transfer of cash or property to related organization(s)	1r		No
s Other transfer of cash or property from related organization(s)	1s		No

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

was not a related organization. See instructions regarding exclusion for certain investment partnerships																		
<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)	section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(f) Share of total Income	s of Share of end-of-year assets	(h) Disproprtionat allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership	
			514)	Yes	No			Yes	No		Yes	No						
Schedule R (Form 990) 2017																		

Schedule R (Form 990) 2017 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2017