

Form **990**

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

**2018**

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Open to Public Inspection

**A For the 2018 calendar year, or tax year beginning and ending**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C Name of organization</b> THE MIAMI FOUNDATION, INC. Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 40 NW 3RD STREET 305 City or town, state or province, country, and ZIP or foreign postal code MIAMI, FL 33128 <b>F Name and address of principal officer:</b> JOSEPH A. FERNANDEZ SAME AS C ABOVE	<b>D Employer identification number</b> 65-0350357 <b>E Telephone number</b> 305-371-2711 <b>G Gross receipts \$</b> 80,485,028. <b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number ▶
<b>I Tax-exempt status:</b> <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J Website:</b> ▶ WWW.MIAMIFOUNDATION.ORG		
<b>K Form of organization:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		
<b>L Year of formation:</b> 1967		<b>M State of legal domicile:</b> FL

**Part I Summary**

	<b>1</b> Briefly describe the organization's mission or most significant activities: <u>SEE SCHEDULE O</u>		
Activities & Governance	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) .....	<b>3</b>	20
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) .....	<b>4</b>	20
	<b>5</b> Total number of individuals employed in calendar year 2018 (Part V, line 2a) .....	<b>5</b>	30
	<b>6</b> Total number of volunteers (estimate if necessary) .....	<b>6</b>	0
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 .....	<b>7a</b>	0.
	<b>b</b> Net unrelated business taxable income from Form 990-T, line 38 .....	<b>7b</b>	34,495.
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h) .....	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g) .....	106,436,266.	61,615,897.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) .....	3,477,839.	243,162.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .....	12,776,324.	18,625,969.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....	0.	0.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....	122,690,429.	80,485,028.
Expenses	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3) .....	48,020,925.	55,476,065.
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) .....	0.	0.
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) .....	2,425,491.	2,905,497.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) .....	0.	0.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,001,041.		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) .....	10,745,362.	9,175,141.
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) .....	61,191,778.	67,556,703.	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12 .....	61,498,651.	12,928,325.	
Net Assets or Fund Balances	<b>20</b> Total assets (Part X, line 16) .....	Beginning of Current Year	End of Year
	<b>21</b> Total liabilities (Part X, line 26) .....	354,920,519.	323,872,937.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20 .....	52,619,928.	32,774,385.
		302,300,591.	291,098,552.

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer JOSEPH A. FERNANDEZ, INTERIM PRESIDENT AND CEO Type or print name and title	Date			
<b>Paid Preparer Use Only</b>	Print/Type preparer's name LISETTE RODRIGUEZ, CPA	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P01404398
	Firm's name ▶ MORRISON, BROWN, ARGIZ & FARRA, LLC Firm's address ▶ 1450 BRICKELL AVENUE, 18TH FLOOR MIAMI, FL 33131	Firm's EIN ▶	Phone no. (305) 373-5500		

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code: ) (Expenses \$ 61,096,486. including grants of \$ 55,476,065. ) (Revenue \$ 243,162. ) THE MIAMI FOUNDATION MAKES GRANTS THAT SUPPORT PROGRAMS THAT FURTHER OUR COMMUNITY BUILDING MISSION IN THE BROAD FIELDS OF EDUCATION, HEALTH, HUMAN SERVICES, ARTS AND CULTURE, ENVIRONMENT, AND ECONOMIC AND COMMUNITY DEVELOPMENT. THE FOUNDATION ALSO MAKES GRANTS IN MORE SPECIFIC AREAS SUCH AS CHILDREN'S HEALTH AND WELFARE, CHILDREN WITH CANCER, YOUTH DEVELOPMENT, ABUSED AND NEGLECTED CHILDREN, HOMELESSNESS, HIV/AIDS, SOCIAL JUSTICE, BLACK AFFAIRS, ALZHEIMER'S, HEART DISEASE, AND USING ANIMALS TO ENHANCE PEOPLE'S QUALITY OF LIFE.

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 61,096,486.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and reporting.

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	X	
<b>23</b> 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> .....	X	
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> 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 of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....	X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? .....	X	

**Note.** All Form 990 filers are required to complete Schedule O

**Part 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

	Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .....		
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .....		
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 16 regarding employee counts, tax filings, foreign accounts, and charitable contributions.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (20); 1b Enter the number of voting members included in line 1a, above, who are independent (20); 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? (X); 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? (X); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (X); 6 Did the organization have members or stockholders? (X); 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? (X); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (X); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? (X); 8b Each committee with authority to act on behalf of the governing body? (X); 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 (X).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (X); 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (X); 11b 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 (X); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (X); 13 Did the organization have a written whistleblower policy? (X); 14 Did the organization have a written document retention and destruction policy? (X); 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? 15a The organization's CEO, Executive Director, or top management official (X); 15b Other officers or key employees of the organization (X); 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? (X); 16b 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?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed FL
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [ ] Another's website [X] 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 GLORIA ORTEGA REX - 305-371-2711 40 NW 3RD STREET SUITE 305, MIAMI, FL 33128

**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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the 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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) RICHARD GIUSTO CHAIRMAN	1.00	X		X				0.	0.	0.
(2) RICHARD BERKOWITZ TREASURER	1.00	X		X				0.	0.	0.
(3) TERE BLANCA BOARD MEMBER	1.00	X						0.	0.	0.
(4) JOSE HERNANDEZ-SOLAUN BOARD MEMBER	1.00	X						0.	0.	0.
(5) ISABEL SANTO TOMAS BOARD MEMBER	1.00	X						0.	0.	0.
(6) BARRON CHANNER BOARD MEMBER	1.00	X						0.	0.	0.
(7) AVRA JAIN BOARD MEMBER	1.00	X						0.	0.	0.
(8) JOSEPH A. FERNANDEZ VICE CHAIR	1.00	X		X				0.	0.	0.
(9) JOHN FUMAGALLI BOARD MEMBER	1.00	X						0.	0.	0.
(10) MICHAEL N. ROSENBERG BOARD MEMBER	1.00	X						0.	0.	0.
(11) ALLISON P. SHIPLEY SECRETARY	1.00	X		X				0.	0.	0.
(12) JULIE NEITZEL BOARD MEMBER	1.00	X						0.	0.	0.
(13) NATHAN LEIGHT BOARD MEMBER	1.00	X						0.	0.	0.
(14) MARK SCOTT BOARD MEMBER	1.00	X						0.	0.	0.
(15) ANNETTE FRANQUI BOARD MEMBER	1.00	X						0.	0.	0.
(16) PANDWE GIBSON BOARD MEMBER	1.00	X						0.	0.	0.
(17) VICTORIA ROGERS BOARD MEMBER	1.00	X						0.	0.	0.

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) PATRICIA NEAL BOARD MEMBER	1.00	X					0.	0.	0.	
(19) ALISON MILLER BOARD MEMBER	1.00	X					0.	0.	0.	
(20) GARY RESSLER BOARD MEMBER	1.00	X					0.	0.	0.	
(21) JAVIER ALBERTO SOTO PRESIDENT & CEO	50.00			X			322,990.	0.	13,500.	
(22) CHARISSE L. GRANT SENIOR VICE PRESIDENT	50.00			X			162,672.	0.	7,346.	
(23) GLORIA REX ORTEGA VICE PRESIDENT OF FINANCE	50.00			X			0.	0.	0.	
(24) REBECCA MANDELMAN VICE PRESIDENT OF DEVELOPM	50.00				X		139,243.	0.	7,184.	
(25) CARLOS ABAUNZA FORMER VICE PRESIDENT OF FINANCE	40.00					X	127,589.	0.	5,419.	
<b>1b Sub-total</b>							752,494.	0.	33,449.	
<b>c Total from continuation sheets to Part VII, Section A</b>							0.	0.	0.	
<b>d Total (add lines 1b and 1c)</b>							752,494.	0.	33,449.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **4**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	X	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
PARTNER, THOMAS MITCHELL & ASSOC. LLC, 6750 NORTH ANDREWS AVENUE, SUITE 200, FT. SEI INVESMENTS	CONSULTING SERVICES FOR ANNUITY PROGRAM	1,177,863.
P.O BOX 945794, ATLANTA, GA 30394	INVESTMENT ADVISORY SERVICES	819,001.
THE M NETWORK, INC, 7610 NE 4TH COURT, MAILBOX #62, MIAMI, FL 33138	MARKETING AND PRINTING	241,372.
BALSERA COMMUNICATIONS, 2199 PONCE DE LEON BOULEVARD, SUITE 200, CORAL GABLES, FL 33	CONSULTING SERVICES	109,205.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **4**



**Part VIII Statement of Revenue**

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns	<b>1a</b>						
	<b>b</b> Membership dues	<b>1b</b>						
	<b>c</b> Fundraising events	<b>1c</b>						
	<b>d</b> Related organizations	<b>1d</b>						
	<b>e</b> Government grants (contributions)	<b>1e</b>						
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	61,615,897.					
	<b>g</b> Noncash contributions included in lines 1a-1f: \$		5,028,034.					
	<b>h Total.</b> Add lines 1a-1f			61,615,897.				
<b>Program Service Revenue</b>	<b>2 a</b> ADMINISTRATIVE FEES	<b>Business Code</b>	900099	243,162.	243,162.			
	<b>b</b>							
	<b>c</b>							
	<b>d</b>							
	<b>e</b>							
	<b>f</b> All other program service revenue							
	<b>g Total.</b> Add lines 2a-2f			243,162.				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)			5,558,427.			5,558,427.	
	<b>4</b> Income from investment of tax-exempt bond proceeds							
	<b>5</b> Royalties							
	<b>6 a</b> Gross rents	(i) Real	(ii) Personal					
		<b>b</b> Less: rental expenses						
		<b>c</b> Rental income or (loss)						
		<b>d</b> Net rental income or (loss)						
	<b>7 a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
		13,067,542.						
		<b>b</b> Less: cost or other basis and sales expenses		0.				
		<b>c</b> Gain or (loss)		13,067,542.				
	<b>d</b> Net gain or (loss)			13,067,542.			13,067,542.	
	<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	<b>a</b>						
		<b>b</b> Less: direct expenses	<b>b</b>					
		<b>c</b> Net income or (loss) from fundraising events						
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>a</b>							
	<b>b</b> Less: direct expenses	<b>b</b>						
	<b>c</b> Net income or (loss) from gaming activities							
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>a</b>							
	<b>b</b> Less: cost of goods sold	<b>b</b>						
	<b>c</b> Net income or (loss) from sales of inventory							
<b>Miscellaneous Revenue</b>			<b>Business Code</b>					
<b>11 a</b>								
	<b>b</b>							
	<b>c</b>							
	<b>d</b> All other revenue							
	<b>e Total.</b> Add lines 11a-11d							
<b>12 Total revenue.</b> See instructions				80,485,028.	243,162.	0.	18,625,969.	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

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	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	53,369,029.	53,369,029.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	2,107,036.	2,107,036.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	768,076.	165,567.	293,203.	309,306.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,388,469.	359,510.	758,571.	270,388.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	605,881.	123,177.	400,041.	82,663.
10 Payroll taxes	143,071.	36,129.	70,468.	36,474.
11 Fees for services (non-employees):				
a Management				
b Legal	150,373.	75,095.	75,278.	
c Accounting	58,000.		58,000.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	1,006,812.		1,006,812.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion	311,009.	13,276.	41,429.	256,304.
13 Office expenses	76,278.	6,103.	70,175.	
14 Information technology	143,198.		143,198.	
15 Royalties				
16 Occupancy	142,170.	34,616.	69,338.	38,216.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	402,046.	322,677.	79,369.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	109,370.		109,370.	
23 Insurance	23,547.		23,547.	
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 <b>DIRECT SUPPORT</b>	4,427,192.	4,427,192.		
b <b>CONSULTING</b>	2,167,350.		2,167,350.	
c <b>OTHER EXPENSES</b>	143,599.	57,079.	82,600.	3,920.
d <b>FUNDRAISING</b>	14,197.		10,427.	3,770.
e All other expenses				
25 <b>Total functional expenses.</b> Add lines 1 through 24e	67,556,703.	61,096,486.	5,459,176.	1,001,041.
26 <b>Joint costs.</b> 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)

**Part X Balance Sheet**

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

		(A)		(B)
		Beginning of year		End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....		<b>1</b>	
	<b>2</b> Savings and temporary cash investments .....	12,718,555.	<b>2</b>	4,757,702.
	<b>3</b> Pledges and grants receivable, net .....	2,581,728.	<b>3</b>	2,371,329.
	<b>4</b> Accounts receivable, net .....		<b>4</b>	
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		<b>5</b>	
	<b>6</b> 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 instr). Complete Part II of Sch L .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	301,506.	<b>9</b>	377,837.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 1,099,975.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 532,059.	654,366.	<b>10c</b> 567,916.
	<b>11</b> Investments - publicly traded securities .....	266,082,300.	<b>11</b>	249,554,263.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	36,715,760.	<b>12</b>	38,283,651.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	35,866,304.	<b>15</b>	27,960,239.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	354,920,519.	<b>16</b>	323,872,937.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	1,156,763.	<b>17</b>	1,796,828.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....	18,945,574.	<b>21</b>	18,300,763.
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	32,517,591.	<b>25</b>	12,676,794.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	52,619,928.	<b>26</b>	32,774,385.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets .....	262,872,468.	<b>27</b>	259,114,097.
	<b>28</b> Temporarily restricted net assets .....	39,428,123.	<b>28</b>	31,984,455.
	<b>29</b> Permanently restricted net assets .....		<b>29</b>	
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds .....		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>32</b>	
<b>33</b> Total net assets or fund balances .....	302,300,591.	<b>33</b>	291,098,552.	
<b>34</b> Total liabilities and net assets/fund balances .....	354,920,519.	<b>34</b>	323,872,937.	

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	80,485,028.
2	Total expenses (must equal Part IX, column (A), line 25)	2	67,556,703.
3	Revenue less expenses. Subtract line 2 from line 1	3	12,928,325.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	302,300,591.
5	Net unrealized gains (losses) on investments	5	-32,011,306.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	7,880,942.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	291,098,552.

**Part XII Financial Statements and Reporting**

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
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? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	3a	X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____	3b	

Form 990 (2018)



**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	53983590.	56925949.	50401780.	106436267	61615897.	329363483
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	53983590.	56925949.	50401780.	106436267	61615897.	329363483
<b>5</b> 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) .....						156065152
<b>6 Public support.</b> Subtract line 5 from line 4.						173298331

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>7</b> Amounts from line 4 .....	53983590.	56925949.	50401780.	106436267	61615897.	329363483
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	3367402.	3883910.	2748158.	5936150.	5558427.	21494047.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10						350857530
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	12,884,896.
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	49.39 %
<b>15</b> Public support percentage from 2017 Schedule A, Part II, line 14 .....	<b>15</b>	50.62 %
<b>16a 33 1/3% support test - 2018.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2017.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2018.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2017.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** .....

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2017 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2017 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2018.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

**b 33 1/3% support tests - 2017.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization .....

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions .....

**Part IV Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of 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	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
<b>b</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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
<b>c</b> 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)? <i>If "Yes," explain in Part VI 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.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, 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).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
<b>9a</b> Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		



**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> 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?		
<b>b</b> A family member of a person described in (a) above?		
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI</b> .		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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.		
<b>2</b> 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.		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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).		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>2</b> 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).		
<b>3</b> 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.		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions).		
<b>2</b> Activities Test. Answer (a) and (b) below.		
<b>a</b> 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</b> identify those supported organizations and explain 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>b</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.		
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.		
<b>a</b> 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> .		
<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.		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  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.

<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

<b>Section B - Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

<b>Section C - Distributable Amount</b>			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

**Part V** Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in <b>Part VI</b> ). See instructions.	
<b>7 Total annual distributions.</b> Add lines 1 through 6.	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	
<b>9</b> Distributable amount for 2018 from Section C, line 6	
<b>10</b> Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
<b>1</b> Distributable amount for 2018 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in <b>Part VI</b> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2018			
<b>a</b> From 2013			
<b>b</b> From 2014			
<b>c</b> From 2015			
<b>d</b> From 2016			
<b>e</b> From 2017			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2018 distributable amount			
<b>i</b> Carryover from 2013 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
<b>4</b> Distributions for 2018 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2018 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from 4.			
<b>5</b> Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>6</b> Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>7 Excess distributions carryover to 2019.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2014			
<b>b</b> Excess from 2015			
<b>c</b> Excess from 2016			
<b>d</b> Excess from 2017			
<b>e</b> Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

**Part VI**

**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.)

Multiple horizontal lines for supplemental information.

**Schedule B**

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2018**

Name of the organization

**THE MIAMI FOUNDATION, INC.**

Employer identification number

**65-0350357**

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization  <b>THE MIAMI FOUNDATION, INC.</b>	Employer identification number  <b>65-0350357</b>
---------------------------------------------------------------	---------------------------------------------------------

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	 <hr/> <hr/> <hr/>	\$ <u>26,392,328.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>	 <hr/> <hr/> <hr/>	\$ <u>3,158,824.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>	 <hr/> <hr/> <hr/>	\$ <u>2,020,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>	 <hr/> <hr/> <hr/>	\$ <u>1,416,999.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>	 <hr/> <hr/> <hr/>	\$ <u>5,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>	 <hr/> <hr/> <hr/>	\$ <u>5,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>THE MIAMI FOUNDATION, INC.</b>	Employer identification number  <b>65-0350357</b>
---------------------------------------------------------------	---------------------------------------------------------

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/> <hr/>	\$ <u>1,350,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>THE MIAMI FOUNDATION, INC.</b>	Employer identification number  <b>65-0350357</b>
---------------------------------------------------------------	---------------------------------------------------------

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	DONATION OF EQUITY STOCK _____ _____ _____	\$ 3,158,824.	05/07/18
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____



Name of organization  <b>THE MIAMI FOUNDATION, INC.</b>	Employer identification number  <b>65-0350357</b>
---------------------------------------------------------------	---------------------------------------------------------

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2018**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527  
 ▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**  
 ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

**If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

**If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

**If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then**

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <b>THE MIAMI FOUNDATION, INC.</b>	Employer identification number <b>65-0350357</b>
-----------------------------------------------------------	-----------------------------------------------------

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

- 2 Political campaign activity expenditures ..... ▶ \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities ..... \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....  Yes  No
- 4a Was a correction made? .....  Yes  No
- b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year? .....  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2018

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check  if the filing organization checked box A and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying) .....														
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....														
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....														
<b>d</b> Other exempt purpose expenditures .....														
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....														
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width:65%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....														
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....														
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....														
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

	(a)		(b)
	Yes	No	Amount
<i>For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.</i>			
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers?		X	
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
<b>c</b> Media advertisements?		X	
<b>d</b> Mailings to members, legislators, or the public?		X	
<b>e</b> Publications, or published or broadcast statements?		X	
<b>f</b> Grants to other organizations for lobbying purposes?		X	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
<b>i</b> Other activities?		X	
<b>j</b> Total. Add lines 1c through 1i			0.
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?	1	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
<b>3</b> Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."**

<b>1</b> Dues, assessments and similar amounts from members	1	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year	2a	
<b>b</b> Carryover from last year	2b	
<b>c</b> Total	2c	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions)	5	

**Part IV Supplemental Information**

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

**PART II-B, LINE 1, LOBBYING ACTIVITIES:**

LOBBYING FOR TRANSPORTATION AND PARKS FUNDING.

**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**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.

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2018**

Open to Public Inspection

Name of the organization **THE MIAMI FOUNDATION, INC.** Employer identification number **65-0350357**

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....	272	
2 Aggregate value of contributions to (during year) .....	16,727,685.	
3 Aggregate value of grants from (during year) .....	21,052,486.	
4 Aggregate value at end of year .....	123,160,555.	
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**Part II Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education)  Preservation of a historically important land area

Protection of natural habitat  Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

Yes  No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 .....

(ii) Assets included in Form 990, Part X .....

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 .....

b Assets included in Form 990, Part X .....

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2018

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	18,945,528.
d Additions during the year	154,420.
e Distributions during the year	799,184.
f Ending balance	18,300,763.

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment  \_\_\_\_\_ %
- b Permanent endowment  \_\_\_\_\_ %
- c Temporarily restricted endowment  \_\_\_\_\_ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	<input type="checkbox"/>	<input type="checkbox"/>
(ii) related organizations	<input type="checkbox"/>	<input type="checkbox"/>
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	<input type="checkbox"/>	<input type="checkbox"/>

4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		699,955.	271,401.	428,554.
d Equipment		225,744.	192,820.	32,924.
e Other		174,276.	67,838.	106,438.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				567,916.

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely-held equity interests .....		
(3) Other		
(A) ALTERNATIVE INVESTMENTS	38,283,651.	END-OF-YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	<b>38,283,651.</b>	

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) INSURANCE CONTRACTS	27,960,239.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	<b>27,960,239.</b>

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) UNFUNDED PROJECTED BENEFIT	
(3) OBLIGATIONS	89,808.
(4) LIABILITIES UNDER ANNUITIES	12,586,986.
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	<b>12,676,794.</b>

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements		<b>1</b>
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	
<b>b</b>	Donated services and use of facilities	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)		<b>5</b>

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements		<b>1</b>
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>		<b>2e</b>
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>		<b>3</b>
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>		<b>4c</b>
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)		<b>5</b>

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

**PART IV, LINE 2B:**

THE FOUNDATION IS CUSTODIAN FOR FUNDS HELD IN TRUST AND AS ORGANIZATION ENDOWMENTS.

**PART X, LINE 2:**

THE FOUNDATION ACCOUNTS FOR UNCERTAINTY IN INCOME TAXES IN ACCORDANCE WITH GAAP, WHICH REQUIRES RECOGNITION IN THE CONSOLIDATED FINANCIAL STATEMENTS OF A TAX POSITION ONLY AFTER DETERMINING THAT THE RELEVANT TAX AUTHORITY WOULD MORE LIKELY THAN NOT SUSTAIN THE POSITION FOLLOWING AN AUDIT. FOR TAX POSITIONS MEETING THE MORE LIKELY THAN NOT THRESHOLD, THE AMOUNT RECOGNIZED IN THE CONSOLIDATED FINANCIAL STATEMENTS IS THE LARGEST BENEFIT THAT HAS A GREATER THAN 50 PERCENT LIKELIHOOD OF BEING REALIZED UPON



**Part XIII** Supplemental Information (continued)

ULTIMATE SETTLEMENT WITH THE RELEVANT TAX AUTHORITY.

THE FOUNDATION HAD NO MATERIAL UNRECOGNIZED TAX BENEFITS AND NO  
 ADJUSTMENTS TO ITS CONSOLIDATED FINANCIAL POSITION, ACTIVITIES OR CASH  
 FLOWS WERE REQUIRED AS OF DECEMBER 31, 2018. THE FOUNDATION DOES NOT  
 EXPECT THAT UNRECOGNIZED TAX BENEFITS WILL INCREASE WITHIN THE NEXT TWELVE  
 MONTHS. THE FOUNDATION'S TAX RETURNS FOR THE YEARS ENDED DECEMBER 31, 2015  
 THROUGH 2018 REMAIN SUBJECT TO EXAMINATION BY MAJOR TAX JURISDICTIONS.  
 THE FOUNDATION RECOGNIZES ACCRUED INTEREST AND PENALTIES, IF ANY, RELATED  
 TO UNCERTAIN TAX POSITIONS AS INCOME TAX EXPENSE.

**SCHEDULE F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2018**

Open to Public Inspection

Name of the organization **THE MIAMI FOUNDATION, INC.** Employer identification number **65-0350357**

**Part I General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .....  **Yes**  **No**
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
EUROPE	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION	ORGANIZE AND INVOLVE THOUSANDS OF PEOPLE INTERNATIONALLY IN PRACTICAL, CAUSAL	137,500.
NORTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION	ORGANIZE AND INVOLVE THOUSANDS OF PEOPLE INTERNATIONALLY IN PRACTICAL, CAUSAL	143,967.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTS TO RECIPIENTS LOCATED IN THE REGION	TO PROVIDE A PERMANENT HOME FOR ORPHANED AND ABANDONED CHILDREN IN HAITI AND FOR STUDENT	163,050.
<b>3 a</b> Subtotal .....	0	0			444,517.
<b>b</b> Total from continuation sheets to Part I .....	0	0			0.
<b>c Totals</b> (add lines 3a and 3b) .....	0	0			444,517.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule F (Form 990) 2018  
SEE PART V FOR COLUMN (E) DESCRIPTIONS

**Part II** Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	PROGRAM SUPPORT	5,000.	CASH PAYMENT	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA,	PROGRAM SUPPORT	137,500.	CASH PAYMENT	0.		
		NORTH AMERICA	PROGRAM SUPPORT	137,500.	CASH PAYMENT	0.		
		CENTRAL AMERICA AND THE CARIBBEAN	PROGRAM SUPPORT	158,050.	CASH PAYMENT	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ \_\_\_\_\_

3 Enter total number of other organizations or entities ▶ \_\_\_\_\_



Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* .....  Yes  No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* .....  Yes  No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)* .....  Yes  No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* .....  Yes  No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* .....  Yes  No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* .....  Yes  No

**Part V Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

**PART I, LINE 2:**

WHEN THE FOUNDATION AWARDS GRANTS FOR A SPECIFIC PROJECT THROUGH A GRANT PROGRAM, ALL GRANTEES SIGN AN AGREEMENT THAT DOCUMENTS THE PURPOSE, TERMS AND CONDITIONS OF THE AWARD AND REPORTING REQUIREMENTS. FOR GENERAL SUPPORT GRANTS, THERE ARE NO REPORTING REQUIREMENTS. HOWEVER, PRE-GRANT DUE DILIGENCE FOR ALL SUCH GRANTS INCLUDES VERIFYING THE CHARITABLE PURPOSE OF THE GRANT, AND TAX STATUS AND PUBLIC CHARITY CLASSIFICATION OF EACH RECIPIENT. IF ADVERSE INFORMATION ABOUT POSSIBLE MISUSE OF FUNDS BY A GRANTEE IS OBTAINED, E.G., THROUGH REPORT IN THE MEDIA OR OTHER RELIABLE SOURCES, GRANTS TO THAT ORGANIZATION ARE SUBJECT TO FURTHER SCRUTINY AND ADDITIONAL INFORMATION MAY BE REQUIRED.

**PART I, LINE 3, COLUMN (E):**

REGION: EUROPE

(E) SPECIFIC TYPES OF SERVICES IN REGION: ORGANIZE AND INVOLVE THOUSANDS OF PEOPLE INTERNATIONALLY IN PRACTICAL, CAUSAL RESEARCH TO DISCOVER NEW WAYS TO MANAGE THE ROLE OF ARTIFICIAL INTELLIGENCE IN ONLINE SOCIAL LIFE

REGION: NORTH AMERICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: ORGANIZE AND INVOLVE THOUSANDS OF PEOPLE INTERNATIONALLY IN PRACTICAL, CAUSAL RESEARCH TO DISCOVER NEW WAYS TO MANAGE THE ROLE OF ARTIFICIAL INTELLIGENCE IN ONLINE SOCIAL LIFE

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(E) SPECIFIC TYPES OF SERVICES IN REGION: TO PROVIDE A PERMANENT HOME FOR ORPHANED AND ABANDONED CHILDREN IN HAITI AND FOR STUDENT SCHOLARSHIPS

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2018**

**Open to Public  
Inspection**

Name of the organization **THE MIAMI FOUNDATION, INC.** Employer identification number **65-0350357**

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  **Yes**  **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
MASSACHUSETTS INSTITUTE OF TECHNOLOGY - 77 MASSACHUSETTS AVENUE - CAMBRIDGE, MA 02139	04-2103594		3,086,332.	0.			PROGRAM SUPPORT
RANSOM EVERGLADES SCHOOL, INC. 3575 MAIN HIGHWAY COCONUT GROVE, FL 33133	59-0659070		2,626,933.	0.			PROGRAM SUPPORT
MERCY CORPS 45 SW ANKENY STREET PORTLAND, OR 97204	91-1148123		1,900,000.	0.			PROGRAM SUPPORT
HARVARD UNIVERSITY 124 MOUNT AUBURN STREET CAMBRIDGE, MA 02138	04-2103580		1,642,832.	0.			PROGRAM SUPPORT
PRESIDENT AND FELLOWS OF HARVARD COLLEGE - 124 MOUNT AUBURN STREET - CAMBRIDGE, MA 02138	04-2103580		1,575,000.	0.			PROGRAM SUPPORT
OHIO & ERIE CANALWAY COALITION 47 W. EXCHANGE STREET AKRON, OH 44308	34-1636766		1,333,333.	0.			PROGRAM SUPPORT

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ \_\_\_\_\_
- 3** Enter total number of other organizations listed in the line 1 table ▶ \_\_\_\_\_

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2018)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPACE FUND NFP 6918 DORCHESTER AVENUE CHICAGO, IL 60637	47-3026162		1,166,667.	0.			PROGRAM SUPPORT
JORGE M. PEREZ ART MUSEUM OF MIAMI-DADE COUNTY, INC. - 1103 BISCAYNE BLVD. - MIAMI, FL 33130	59-2048869		1,013,678.	0.			PROGRAM SUPPORT
INVEST DETROIT FOUNDATION 600 RENAISSANCE CENTER, DETROIT, MI 48243	27-1927369		888,889.	0.			PROGRAM SUPPORT
PERFORMING ARTS CENTER TRUST, INC. 1300 BISCAYNE BOULEVARD MIAMI, FL 33132	26-2567808		674,070.	0.			PROGRAM SUPPORT
U3 ADVISORS, INC. 1735 MARKET STREET, PHILADELPHIA, PA 19103	46-4252021		666,667.	0.			PROGRAM SUPPORT
NEW YORK UNIVERSITY C/O GREENBERG, TRAUIG, ET AL. 155 EAST 53RD STREET, 35TH FLOOR - NEW YORK,	13-5562308		662,000.	0.			PROGRAM SUPPORT
ACLU FOUNDATION OF MASSACHUSETTS 211 CONGRESS STREET BOSTON, MA 02110	47-3686152		500,000.	0.			PROGRAM SUPPORT
JACKSON HEALTH FOUNDATION, INC. 1501 NW NORTH RIVER DRIVE MIAMI, FL 33125	65-0077727		405,000.	0.			PROGRAM SUPPORT
BEACON COLLEGE PREP 13400 NW 28TH AVENUE OPA LOCKA, FL 33054	46-1615260		400,000.	0.			PROGRAM SUPPORT

Schedule I (Form 990)



**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INSTITUTE OF CONTEMPORARY ART MIAMI, INC. - 4040 NE 2ND AVENUE STE 200 - MIAMI, FL 33137	47-1251523		378,216.	0.			PROGRAM SUPPORT
UNIVERSITY OF MIAMI U OF MIAMI ATHLETICS 5821 SAN AMARO DRIVE - CORAL GABLES, FL 33146	59-0624458		354,653.	0.			PROGRAM SUPPORT
FLORIDA INTERNATIONAL UNIVERSITY FOUNDATION, INC. - 11200 SW 8TH STREET MARC 5TH FLOOR - MIAMI, FL 33199	23-7047106		259,500.	0.			PROGRAM SUPPORT
MOZILLA FOUNDATION 331 E. EVELYN AVENUE MOUNTAIN VIEW, CA 94041	20-0097189		250,000.	0.			PROGRAM SUPPORT
NEW AMERICA FOUNDATION 740 15TH STREET NW WASHINGTON, DC 20005	52-2096845		250,000.	0.			PROGRAM SUPPORT
JORGE M. PEREZ ART MUSEUM OF MIAMI-DADE COUNTY, INC. - 1103 BISCAYNE BOULEVARD - MIAMI, FL 33130	59-2048869		240,385.	0.			PROGRAM SUPPORT
NEW FLORIDA MAJORITY EDUCATION FUND INC - 8330 BISCAYNE BOULEVARD, SUITE 1 - MIAMI, FL 33138	45-3956785		232,500.	0.			PROGRAM SUPPORT
MIAMI NEW DRAMA 1040 LINCOLN ROAD MIAMI BEACH, FL 33139	47-1690840		224,592.	0.			PROGRAM SUPPORT
ASU FOUNDATION FOR A NEW AMERICAN UNIVERSITY - P.O. BOX 2260 - TEMPE, AZ 85280-2260	86-6051042		223,520.	0.			PROGRAM SUPPORT

Schedule I (Form 990)

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HEALTH INITIATIVES FOUNDATION, INC 800 WHARF STREET, SW, #12 WASHINGTON, DC 20024	26-2686306		200,050.	0.			PROGRAM SUPPORT
ENTERTAINMENT INDUSTRY FOUNDATION 1900 AVENUE OF THE STARS LOS ANGELES, CA 90067	95-1644609		200,000.	0.			PROGRAM SUPPORT
REGENTS OF THE UNIVERSITY OF CALIFORNIA AT BERKELEY - 2195 HEARST AVENUE - BERKELEY, CA 94720	94-6002123		200,000.	0.			PROGRAM SUPPORT
HERITAGE WORKS 4444 SECOND AVENUE DETROIT, MI 48201	38-3581720		200,000.	0.			PROGRAM SUPPORT
ALLIED MEDIA PROJECTS 4126 THIRD STREET DETROIT, MI 48201	01-0559608		192,430.	0.			PROGRAM SUPPORT
THE IMPAC FUND, INC. 121 ALHAMBRA PLAZA, SUITE 1100 CORAL GABLES, FL 33134	82-1512029		192,428.	0.			PROGRAM SUPPORT
NEW WORLD SYMPHONY, INC. 500 17TH STREET MIAMI BEACH, FL 33139	59-2809056		190,500.	0.			PROGRAM SUPPORT
NATIONAL OPINION RESEARCH CENTER (NORC) - 55 EAST MONROE STREET, 20TH FLOOR - CHICAGO, IL 60603	36-2167808		185,000.	0.			PROGRAM SUPPORT
AYITI COMMUNITY TRUST 1201 HAYS STREET, TALLAHASSEE, FL 32301	81-4814751		177,500.	0.			PROGRAM SUPPORT

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MEEDAN, INC. 1355 MARKET, SUITE 488 SAN FRANCISCO, CA 94103	20-4504068		175,000.	0.			PROGRAM SUPPORT
ANN STORCK CENTER, INC. 1790 SW 43RD WAY FORT LAUDERDALE, FL 33317	59-2171081		170,724.	0.			PROGRAM SUPPORT
MIAMI-DADE COUNTY PUBLIC SCHOOLS 1450 NE 2ND AVENUE MIAMI, FL 33132	59-6000572		170,526.	0.			PROGRAM SUPPORT
HISTORY MIAMI MUSEUM 101 WEST FLAGLER STREET MIAMI, FL 33130	59-0968005		170,000.	0.			PROGRAM SUPPORT
THE UNIVERSITY OF AKRON FOUNDATION 302 BUCHTEL COMMON AKRON, OH 44325	34-6575496		166,744.	0.			PROGRAM SUPPORT
EARLY CHILDHOOD INITIATIVE FOUNDATION - 3250 SW THIRD AVENUE 6TH FLOOR - MIAMI, FL 33129	31-1626706		151,000.	0.			PROGRAM SUPPORT
COMMUNITY PARTNERS 606 SOUTH OLIVE STREET LOS ANGELES, CA 90014	95-4302067		150,000.	0.			PROGRAM SUPPORT
CREATIVE CAPITAL FOUNDATION 15 MAIDEN LANE 18TH FLOOR NEW YORK, NY 10038	31-1605982		150,000.	0.			PROGRAM SUPPORT
BREAKTHROUGH MIAMI, INC. 3250 SW THIRD AVENUE SIXTH FLOOR MIAMI, FL 33129	26-2105534		148,600.	0.			PROGRAM SUPPORT

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CATALYST MIAMI, INC. 3000 BISCAYNE BOULEVARD, #210 MIAMI, FL 33137	65-0690368		145,300.	0.			PROGRAM SUPPORT
MIAMI DADE COLLEGE FOUNDATION, INC. - 300 NE 2ND AVENUE, SUITE 1424 - MIAMI, FL 33132	59-6169745		141,192.	0.			PROGRAM SUPPORT
ARTS FOR LEARNING MIAMI, INC. 404 NW 26TH STREET MIAMI, FL 33127	65-1141598		140,000.	0.			PROGRAM SUPPORT
OUTREACH AID TO THE AMERICAS, INC. P.O. BOX 546135 MIAMI, FL 33154	65-0510432		140,000.	0.			PROGRAM SUPPORT
SUNDARI FOUNDATION, INC. 1514 NW 2 AVENUE, #1 MIAMI, FL 33136	81-0652266		137,600.	0.			PROGRAM SUPPORT
NORTHEAST OHIO CENTER FOR CHOREOGRAPHY - 13110 SHAKER SQUARE, SUITE 106 - CLEVELAND, OH 44120	47-5231350		137,116.	0.			PROGRAM SUPPORT
CENTRAL DETROIT CHRISTIAN COMMUNITY DEVELOPMENT CORPORATION - 1550 TAYLOR STREET - DETROIT, MI 48206	38-3128822		135,000.	0.			PROGRAM SUPPORT
PROJECT HOPE 255 CARTER HALL LANE P.O. BOX 250 MILWOOD, VA 22646	53-0242962		133,333.	0.			PROGRAM SUPPORT
OFFICE OF NEW AMERICANS OF MIAMI-DADE, INC. - 601 NW 1ST COURT, SUITE 116 - MIAMI, FL 33136	82-2568845		131,110.	0.			PROGRAM SUPPORT

Schedule I (Form 990)

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CAMBRIDGE IN AMERICA 1120 AVENUE OF THE AMERICAS NEW YORK, NY 10036	52-6071299		126,146.	0.			PROGRAM SUPPORT
CONVENT OF THE SACRED HEART OF MIAMI CARROLLTON SCHOOL - 3747 MAIN HIGHWAY - COCONUT GROVE, FL 33133	59-6082015		126,000.	0.			PROGRAM SUPPORT
TAKE STOCK IN CHILDREN 3000 NE 30TH PLACE SUITE 409 FORT LAUDERDALE, FL 33306	59-3331584		125,663.	0.			PROGRAM SUPPORT
CREATIVE TIME, INC. 59 EAST 4TH STREET, FLOOR 6 NEW YORK, NY 10003	13-2835847		125,000.	0.			PROGRAM SUPPORT
MOSAIC YOUTH THEATRE OF DETROIT 2251 ANTIETAM AVENUE DETROIT, MI 48207	38-3069610		125,000.	0.			PROGRAM SUPPORT
CAMILLUS HOUSE, INC. 336 NORTHWEST 5TH STREET MIAMI, FL 33128	65-0032862		121,025.	0.			PROGRAM SUPPORT
ORGANIZE FLORIDA EDUCATION FUND 134 EAST COLONIAL DRIVE ORLANDO, FL 32801	27-4384675		120,000.	0.			PROGRAM SUPPORT
THE CAPITAL GOOD FUND 22 A STREET PROVIDENCE, RI 02907	80-0348382		120,000.	0.			PROGRAM SUPPORT
WAYNE STATE UNIVERSITY 5700 CASS AVENUE, SUITE 1200 DETROIT, MI 48202	38-3555142		119,357.	0.			PROGRAM SUPPORT

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UNITED WAY OF MIAMI-DADE, INC. 3250 SW 3RD AVENUE MIAMI, FL 33129	59-0830840		114,505.	0.			PROGRAM SUPPORT
AKRON ART MUSEUM ONE SOUTH HIGH AKRON, OH 44308	34-0813426		114,044.	0.			PROGRAM SUPPORT
SPRINGBOARD FOR THE ARTS 308 PRINCE STREET, SUITE 270 SAINT PAUL, MN 55101	41-1690483		113,325.	0.			PROGRAM SUPPORT
BUSINESS & LEADERSHIP INSTITUTE FOR EARLY LEARNING, INC. - 1271 HAYES STREET - HOLLYWOOD, FL 33019	46-3455244		111,278.	0.			PROGRAM SUPPORT
NATIONAL FOUNDATION FOR ADVANCEMENT IN THE ARTS, INC. - 2100 BISCAYNE BOULEVARD - MIAMI, FL 33137	59-2141837		110,000.	0.			PROGRAM SUPPORT
TRUSTEES OF PRINCETON UNIVERSITY 701 CARNEGIE CENTER PRINCETON, NJ 08540	21-0634501		109,320.	0.			PROGRAM SUPPORT
PATRICIA AND PHILLIP FROST ART MUSEUM - 1101 BISCAYNE BOULEVARD - MIAMI, FL 33132	59-0854960		109,080.	0.			PROGRAM SUPPORT
MIAMI MUSIC PROJECT, INC. 2125 BISCAYNE BLVD., SUITE 215 MIAMI, FL 33137	26-4084871		107,500.	0.			PROGRAM SUPPORT
NATIONAL MULTIPLE SCLEROSIS SOCIETY, SOUTH FLORIDA CHAPTER - 733 THIRD AVENUE, 3RD FLOOR - NEW YORK, NY 10017	59-0954683		105,169.	0.			PROGRAM SUPPORT

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SHAKE-A-LEG MIAMI, INC. 2620 SOUTH BAYSHORE DRIVE MIAMI, FL 33133	65-0611917		105,056.	0.			PROGRAM SUPPORT
WDNA 88.9FM PUBLIC RADIO/BASCOMB MEMORIAL BROADCASTING FOUND - 2921 CORAL WAY - MIAMI, FL 33145	23-7412945		105,000.	0.			PROGRAM SUPPORT
MOTIONPOEMS, INC. 511 S 4TH STREET APT 522 MINNEAPOLIS, MN 55415	46-2297006		104,400.	0.			PROGRAM SUPPORT
LADIES EMPOWERMENT AND ACTION PROGRAM, INC. (LEAP) - PO BOX 848 - MIAMI, FL 33243	27-0193483		100,500.	0.			PROGRAM SUPPORT
HARRY AND ROSE SAMSON FAMILY JEWISH COMMUNITY CENTER, INC. - 6255 N. SANTA MONICA BOULEVARD - WHITEFISH, WI 53217	39-0806234		100,300.	0.			PROGRAM SUPPORT
ACCESS NOW INC. 1616 MICHIGAN AVE UNIT #1 MIAMI BEACH, FL 33139	65-0813823		100,000.	0.			PROGRAM SUPPORT
DATA & SOCIETY RESEARCH INSTITUTE 36 WEST 20TH STREET NEW YORK, NY 10011	46-2904827		100,000.	0.			PROGRAM SUPPORT
UNITED NEGRO COLLEGE FUND, INC. 3550 BISCAYNE BOULEVARD MIAMI, FL 33137	13-1624241		100,000.	0.			PROGRAM SUPPORT
UP2US, INC. 520 8TH AVENUE NEW YORK, NY 10018	80-0535933		100,000.	0.			PROGRAM SUPPORT

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ALS ASSOCIATION GREATER NEW YORK CHAPTER - 42 BROADWAY, SUITE 1724 - NEW YORK, NY 10004	13-3616680		100,000.	0.			PROGRAM SUPPORT
BAPTIST HOSPITAL OF MIAMI, INC. 6855 RED ROAD CORAL GABLES, FL 33143	59-0910342		100,000.	0.			PROGRAM SUPPORT
BORSCHT CORP. 115NW90THST ELPORTAL, FL 33150	27-4721945		100,000.	0.			PROGRAM SUPPORT
BOYS AND GIRLS CLUBS OF BROWARD COUNTY - 877 NORTHWEST 61 STREET - FT. LAUDERDALE, FL 33309	59-1108790		100,000.	0.			PROGRAM SUPPORT
CHALLENGED ATHLETES FOUNDATION 9591 WAPLES STREET SAN DIEGO, CA 92121	33-0739596		100,000.	0.			PROGRAM SUPPORT
ENTERPRISE COMMUNITY PARTNERS, INC. - 70 CORPORATE CENTER 11000 BROKEN LAND PARKWAY, SUITE 700 - COLUMBIA, MD 21044	52-1231931		100,000.	0.			PROGRAM SUPPORT
FRONT EXHIBITION COMPANY 1460 W 29TH STREET CLEVELAND, OH 44113	81-2956023		100,000.	0.			PROGRAM SUPPORT
JOE DIMAGGIO CHILDREN'S HOSPITAL FOUNDATION, INC. - 3329 JOHNSON STREET - HOLLYWOOD, FL 33021	65-0492343		100,000.	0.			PROGRAM SUPPORT
JULIE AND MARTIN FRANKLIN FAMILY FOUNDATION, INC. - 5200 BLUE LAGOON DRIVE SUITE 855 - MIAMI, FL 33126	81-3940545		100,000.	0.			PROGRAM SUPPORT

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MARTIN W. RICHARD CHARITABLE FOUNDATION, INC. - 1452 DORCHESTER AVENUE, 4TH FLOOR - DORCHESTER, MA 02122	35-2491896		100,000.	0.			PROGRAM SUPPORT
URBAN INSTITUTE 2100 M STREET, NW WASHINGTON, DC 20037	52-0880375		100,000.	0.			PROGRAM SUPPORT
SCHOOL OF VISUAL ARTS, INC. STUDENT ACCOUNTS, 342 EAST 24TH STREET, CONCOURSE LEVEL - NEW YORK, NY 10010	13-3060594		99,480.	0.			PROGRAM SUPPORT
GREATER AKRON MUSICAL ASSOCIATION, INC. - 92 NORTH MAIN STREET - AKRON, OH 44308	34-6003828		99,356.	0.			PROGRAM SUPPORT
STAND UP TO CANCER 10880 WILSHIRE BOULEVARD, SUITE 140 LOS ANGELES, CA 90024	95-1644609		99,345.	0.			PROGRAM SUPPORT
NEIGHBORHOOD HOUSING SERVICES OF SOUTH FLORIDA, INC. - 300 NW 12TH AVENUE - MIAMI, FL 33128	591845761		97,000.	0.			PROGRAM SUPPORT
NU DECO ENSEMBLE, INC. 2100 BISCAYNE BLVD MIAMI, FL 33137	46-2816614		95,000.	0.			PROGRAM SUPPORT
AKRON CIVIC THEATRE 182 S. MAIN AKRON, OH 44308	34-1015948		95,000.	0.			PROGRAM SUPPORT
ALYANS ATIZAY AYISYEN, INC. 225 NE 59 STREET MIAMI, FL 33137	650511150		90,000.	0.			PROGRAM SUPPORT

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REFRESH MIAMI 3339 VIRGINIA STREET, # 125 MIAMI, FL 33133	46-0918459		89,011.	0.			PROGRAM SUPPORT
CARRFOUR SUPPORTIVE HOUSING, INC. 1398 SOUTHWEST 1ST STREET, 12TH FLO MIAMI, FL 33135	65-0387766		87,000.	0.			PROGRAM SUPPORT
ANRU TRAVEL SERVICES, LLC. 717 PONCE DE LEON BLVD., STE 209 CORAL GABLES, FL 33134	27-4109212		86,418.	0.			PROGRAM SUPPORT
HABITAT FOR HUMANITY OF GREATER MIAMI, INC. - 3800 NW 22 AVENUE - MIAMI, FL 33142	65-0108974		85,225.	0.			PROGRAM SUPPORT
FORWARD CITIES, INC. 310 S HARRINGTON STREET RALEIGH, NC 27603	13-4302280		85,000.	0.			PROGRAM SUPPORT
SOUTH FLORIDA ART CENTER, INC. 924 LINCOLN ROAD, SUITE 205 MIAMI BEACH, FL 33139	59-2423867		85,000.	0.			PROGRAM SUPPORT
THE CLEO INSTITUTE 8325 NE 2ND AVENUE, SUITE 218 MIAMI, FL 33138	27-3185735		85,000.	0.			PROGRAM SUPPORT
CORNELL UNIVERSITY 377 PINE TREE ROAD ITHACA, NY 14850	15-0532082		84,357.	0.			PROGRAM SUPPORT
SOUTH MIAMI-DADE CULTURAL ARTS CENTER - 10950 SW 211TH STREET - CUTLER BAY, FL 33189	59-6000573		83,326.	0.			PROGRAM SUPPORT

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FOCUS: HOPE 1200 OAKMAN BOULEVARD DETROIT, MI 48238	38-1948285		82,375.	0.			PROGRAM SUPPORT
BARRINGTON STAGE CO 122 NORTH STREET PITTSFIELD, MA 01201	04-3263298		82,000.	0.			PROGRAM SUPPORT
CITY OF MIAMI GARDENS 18605 NW 27TH AVENUE SUITE 259 MIAMI GARDENS, FL 33056	11-3695944		80,000.	0.			PROGRAM SUPPORT
MIAMI WATERKEEPER 12568 N KENDALL DR MIAMI, FL 33186-1866	27-3627697		80,000.	0.			PROGRAM SUPPORT
MIAMI LIGHTHOUSE FOR THE BLIND AND VISUALLY IMPAIRED, INC. - 601 SOUTHWEST 8TH AVENUE - MIAMI, FL 33130	590637847		77,323.	0.			PROGRAM SUPPORT
DOWNTOWN AKRON PARTNERSHIP 103 S. HIGH STREET, 4TH FLOOR AKRON, OH 44308	34-1823835		77,000.	0.			PROGRAM SUPPORT
TREESCHARLOTTE 701 TUCKKASEEGEE RD CHARLOTTE, NC 28208	46-3867007		76,817.	0.			PROGRAM SUPPORT
FLORIDA INTERNATIONAL UNIVERSITY 11200 SW 8 STREET MARC 540 MIAMI, FL 33199	23-7047106		76,591.	0.			PROGRAM SUPPORT
NORTH ROSEDALE PARK CIVIC ASSOCIATION - 18445 SCARSDALE - DETROIT, MI 48223	38-0882424		76,000.	0.			PROGRAM SUPPORT

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WOODSIDE MANAGEMENT, LLC 538 WOODSIDE DRIVE AKRON, OH 44303	34-0694061		75,160.	0.			PROGRAM SUPPORT
SAFESPACE FOUNDATION, INC. 1435 NE 162ND STREET NORTH MIAMI BEACH, FL 33162	65-0353923		75,000.	0.			PROGRAM SUPPORT
ALL HANDS AND HEARTS - SMART RESPONSE - 6 COUNTY ROAD, SUITE #6 - MATTAPOISETT, MA 02739	20-3414952		75,000.	0.			PROGRAM SUPPORT
DIMENSIONS DANCE THEATRE OF MIAMI, INC. - 2741 SW 30TH AVENUE - MIAMI, FL 33133	81-3414271		75,000.	0.			PROGRAM SUPPORT
IFCM CORP 3J- 3 ISLAND AVENUE MIAMI BEACH, FL 33127	46-3859287		75,000.	0.			PROGRAM SUPPORT
KAREN PETERSON AND DANCERS, INC. 11760 SW 72ND AVENUE MIAMI, FL 33156	59-2767992		75,000.	0.			PROGRAM SUPPORT
NONE TOO FRAGILE, INC. 1835 MERRIMAN RD. #3 AKRON, OH 44313	47-2822553		75,000.	0.			PROGRAM SUPPORT
PROJECTART 601 WEST 26TH STREET SUITE 325 NEW YORK CITY, NY 10001	46-1518061		75,000.	0.			PROGRAM SUPPORT
RARE SPECIES CONSERVATORY FOUNDATION, INC. - 1222 E ROAD - LOXAHATCHEE, FL 33470	65-0560456		75,000.	0.			PROGRAM SUPPORT

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ST. CROIX FOUNDATION FOR COMMUNITY DEVELOPMENT - 1023 MARKET STREET - CHRISTIANSTED, VI 00820	66-0480131		75,000.	0.			PROGRAM SUPPORT
TU DANCE PO BOX 40405 ST. PAUL, MN 55104	20-2534129		75,000.	0.			PROGRAM SUPPORT
BLU JAZZ MASTER CLASS FOUNDATION 47 EAST MARKET STREET AKRON, OH 44308	81-2838423		74,500.	0.			PROGRAM SUPPORT
BAS FISHER INVITATIONAL 209 NAVAJO STREET MIAMI, FL 33166	47-3336677		74,075.	0.			PROGRAM SUPPORT
ST. CATHERINE UNIVERSITY 2004 RANDOLPH AVENUE, #F24 ST. PAUL, MN 55105	41-0695509		72,500.	0.			PROGRAM SUPPORT
CITY OF AKRON 195 S. MAIN STREET, #202 AKRON, OH 44038	34-6000020		71,500.	0.			PROGRAM SUPPORT
GREATER MIAMI JEWISH FEDERATION, INC. - 4200 BISCAYNE BOULEVARD - MIAMI, FL 33137	59-0624404		70,500.	0.			PROGRAM SUPPORT
JORGE M. PEREZ ART MUSEUM OF MIAMI DADE COUNTY, INC. - 1103 BISCAYNE BLVD. - MIAMI, FL 33130	59-2048869		70,180.	0.			PROGRAM SUPPORT
MIZNA 2446 UNIVERSITY AVE. W. #115 ST. PAUL, MN 55114	41-1913423		70,000.	0.			PROGRAM SUPPORT

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**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE FOUNTAINHEAD RESIDENCY, INC. 5600 N BAYSHORE DRIVE MIAMI, FL 33137	81-3627928		67,537.	0.			PROGRAM SUPPORT
BIG BROTHERS BIG SISTERS OF GREATER MIAMI, INC. - 701 SW 27TH AVENUE - MIAMI, FL 33135	59-6166904		66,926.	0.			PROGRAM SUPPORT
MICHAEL J. FOX FOUNDATION FOR PARKINSONS RESEARCH - GRAND CENTRAL STATION P.O. BOX 4777 - NEW YORK, NY 10163	13-4141945		65,601.	0.			PROGRAM SUPPORT
FEEDING SOUTH FLORIDA, INC. 2501 SW 32ND TERRACE PEMBROKE PARK, FL 33023	59-2097520		65,160.	0.			PROGRAM SUPPORT
COMMON THREADS, INC. C/O COMMON THREADS 222 WEST MERCHANDISE MART PLAZA, SUITE 1212 - CHICAGO, IL	20-0106847		65,000.	0.			PROGRAM SUPPORT
FOOD FOR THE POOR, INC. 6401 LYONS ROAD COCONUT CREEK, FL 33073	59-2174510		65,000.	0.			PROGRAM SUPPORT
MIAMI BOARDING SCHOOL, INC. 8004 NW 154TH STREET, #389 MIAMI LAKES, FL 33016	45-3532587		65,000.	0.			PROGRAM SUPPORT
MIDEASTERN DANCE EXCHANGE, INC. 2350 OVERBOOK STREET MIAMI, FL 33133	65-0211076		65,000.	0.			PROGRAM SUPPORT
CHILDREN'S HOPE CHEST OF DREAMS, INC. - 1611 NW 85TH AVENUE - PLANTATION, FL 33322	06-1820025		64,811.	0.			PROGRAM SUPPORT

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HISTORIC HAMPTON HOUSE COMMUNITY TRUST, INC. - 5400 NW 22 AVENUE SUITE 704 - MIAMI, FL 33142	30-0120658		63,849.	0.			PROGRAM SUPPORT
COMMUNITY FOUNDATION OF THE VIRGIN ISLANDS - P.O. BOX 11790 - ST. THOMAS, VI 00801	66-0470703		62,500.	0.			PROGRAM SUPPORT
SCISTARTER, LLC 306 DELANCEY STREET PHILADELPHIA, PA 19106	27-3049556		62,393.	0.			PROGRAM SUPPORT
JEWISH FEDERATION OF BROWARD COUNTY - 5890 SOUTH PINE ISLAND ROAD - DAVIE, FL 33328	59-0967823		61,000.	0.			PROGRAM SUPPORT
INSTITUTE FOR NONPROFIT NEWS PO BOX 8606 CALABASAS, CA 91372-8606	27-2614911		60,908.	0.			PROGRAM SUPPORT
MIAMI CHILDREN'S HEALTH SYSTEM FOUNDATION, INC. - 3100 SW 62ND AVENUE - MIAMI, FL 33155	46-1784918		60,100.	0.			PROGRAM SUPPORT
BRANCHES, INC. 11500 NW 12TH AVE MIAMI, FL 33168	650716969		60,000.	0.			PROGRAM SUPPORT
CODE FEVER MIAMI, INC. 429LENOXAVENUE MIAMIBEACH, FL 33139	47-2134965		60,000.	0.			PROGRAM SUPPORT
FAMILY ACTION NETWORK MOVEMENT, INC. - 100 NE 84TH STREET, SUITE 150 - MIAMI, FL 33138	65-0334201		60,000.	0.			PROGRAM SUPPORT

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GOOD HOPE EQUESTRIAN TRAINING CENTER, INC. - 22155 S.W. 147TH AVENUE - MIAMI, FL 33170	65-0945018		60,000.	0.			PROGRAM SUPPORT
THE SALVATION ARMY 615 SLATERS LANE ALEXANDRIA, VA 22313	58-0660607		58,991.	0.			PROGRAM SUPPORT
YOUTH EXCELLENCE PERFORMING ARTS WORKSHOP - 550 SOUTH ARLINGTON STREET - AKRON, OH 44306	34-1967561		58,917.	0.			PROGRAM SUPPORT
CHARLOTTE BALLET 701 N. TRYON STREET CHARLOTTE, NC 28202	58-1314711		58,741.	0.			PROGRAM SUPPORT
COUNCIL FOUNDATION 701 PENNSYLVANIA AVENUE, NW SUITE 7 WASHINGTON, DC 20004	52-1811691		58,717.	0.			PROGRAM SUPPORT
ADRIENNE ARSHT CENTER FOUNDATION, INC. - 1300 BISCAYNE BOULEVARD - MIAMI, FL 33132	26-2567808		58,700.	0.			PROGRAM SUPPORT
VIDA LEGAL ASSISTANCE, INC. 27112 S. DIXIE HIGHWAY NARANJA, FL 33032	27-5325859		57,500.	0.			PROGRAM SUPPORT
CIRCULO DE PUERTO RICO, INC. 121 CARTER COURT, SW VIENNA, VA 22180-0000	82-2957051		57,104.	0.			PROGRAM SUPPORT
COMMUNITY EMPOWERMENT ASS. PTA 7120 KELLY STREET PITTSBURGH, PA 15208	25-1760121		55,109.	0.			PROGRAM SUPPORT

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CHAPMAN PARTNERSHIP INC. 1550 N MIAMI AVENUE MIAMI, FL 33136	650425069		55,000.	0.			PROGRAM SUPPORT
BUSINESS & LEADERSHIP INSTITUTE FOR EARLY LEARNING, INC. - 1271 HAYES STREET - HOLLYWOOD, FL 33019	46-3455244		53,816.	0.			PROGRAM SUPPORT
KEY WEST LITERARY SEMINAR INC. 717 LOVE LANE KEY WEST, FL 33040	59-2807058		52,500.	0.			PROGRAM SUPPORT
MIAMI BRIDGE YOUTH AND FAMILY SERVICES, INC. - 2810 NW SOUTH RIVER DRIVE - MIAMI, FL 33125	59-2569847		51,700.	0.			PROGRAM SUPPORT
AMERICANS FOR IMMIGRANT JUSTICE 3000 BISCAYNE BLVD. #400 MIAMI, FL 33137-4129	65-0610872		51,000.	0.			PROGRAM SUPPORT
FLORIDA MEMORIAL UNIVERSITY 15800 NORTHWEST 42ND AVENUE MIAMI GARDENS, FL 33054	59-0668483		50,703.	0.			PROGRAM SUPPORT
NORTH MIAMI FOUNDATION FOR SENIOR CITIZENS' SERVICES, INC. - 620 NE 127TH STREET - NORTH MIAMI, FL 33161	59-1582766		50,471.	0.			PROGRAM SUPPORT
ARAB AMERICAN NATIONAL MUSEUM 13624 MICHIGAN AVENUE DEARBORN, MI 48126	23-7444497		50,350.	0.			PROGRAM SUPPORT
ASOTIN COUNTY RURAL LIBRARY DISTRICT - 417 SYCAMORE STREET - CLARKSTON, WA 99403	61-1852266		50,000.	0.			PROGRAM SUPPORT

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BEAUX ARTS OF THE LOWE ART MUSEUM OF THE UNIVERSITY OF MIAMI - 1301 STANFORD DRIVE - CORAL GABLES, FL 33146	59-6131426		50,000.	0.			PROGRAM SUPPORT
MOURNING FAMILY FOUNDATION 100 S. BISCAYNE BLVD MIAMI, FL 33131	65-1075983		50,000.	0.			PROGRAM SUPPORT
THE BATTIER TAKE CHARGE FOUNDATION, INC. - 60 SW 13TH STREET, #1115 - MIAMI, FL 33130	27-1832986		50,000.	0.			PROGRAM SUPPORT
ANGEL FRASER LOGAN DANCE COMPANY 8849 SW 132 STREET MIAMI, FL 33176	77-0632810		50,000.	0.			PROGRAM SUPPORT
ARTSNOW 175 S. MAIN STREET, SUITE 100 AKRON, OH 44308	47-5513742		50,000.	0.			PROGRAM SUPPORT
ASIAN ECONOMIC DEVELOPMENT ASSOCIATION - 377 UNIVERSITY AVE W, SUITE D - ST PAUL, MN 55114	41-1911474		50,000.	0.			PROGRAM SUPPORT
BRIDGEHAMPTON CHILD CARE & RECREATIONAL CENTER - 70 HIGHVIEW DRIVE - SAG HARBOR, NY 11963	11-6036310		50,000.	0.			PROGRAM SUPPORT
CENTRO CULTURAL ESPANOL DE COOPERACION IBEROAMERICANA, INC. - 1490 BISCAYNE BOULEVARD - MIAMI, FL 33132	65-0718459		50,000.	0.			PROGRAM SUPPORT
CHARLES H. WRIGHT MUSEUM OF AFRICAN AMERICAN HISTORY - 315 E. WARREN AVENUE - DETROIT, MI 48201	38-1882096		50,000.	0.			PROGRAM SUPPORT

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CODEART, INC. 1951 NW 7TH AVENUE, SUITE 600 MIAMI, FL 33136	81-0848567		50,000.	0.			PROGRAM SUPPORT
COMMUNITY FOUNDATION OF THE FLORIDA KEYS - 300 SOUTHWARD STREET SUITE 201 - KEY WEST, FL 33140	65-0648968		50,000.	0.			PROGRAM SUPPORT
DOWNTOWN DORAL CHARTER UPPER SCHOOL, INC. - 2020 SALZEDO STREET, 5TH FLOOR - CORAL GABLES, FL 33134	81-2931253		50,000.	0.			PROGRAM SUPPORT
EXPERIENCE CAMPS P.O. BOX 5099 WESTPORT, CT 06881	26-2513136		50,000.	0.			PROGRAM SUPPORT
FARMWORKER ASSOCIATION OF FLORIDA, INC. - 1264 APOPKA BLVD - APOPKA, FL 32703	592683978		50,000.	0.			PROGRAM SUPPORT
FRIEND, INC. 11500 NW 12TH AVENUE MIAMI, FL 33168	65-1072769		50,000.	0.			PROGRAM SUPPORT
GABLESTAGE, INC 1200 ANASTASIA AVENUE SUITE 230 CORAL GABLES, FL 33134	59-1972774		50,000.	0.			PROGRAM SUPPORT
INDIANA UNIVERSITY DEPT 78896 P.O. BOX 78000 DETROIT, MI 48278-0896	35-6001673		50,000.	0.			PROGRAM SUPPORT
INDIANA UNIVERSITY FOUNDATION, INC. - P.O. BOX 6460 - INDIANAPOLIS, IN 46206-6460	35-6018940		50,000.	0.			PROGRAM SUPPORT

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INSTITUTE FOR BEHAVIOR AND HEALTH, INC. - 6191 EXECUTIVE BOULEVARD - ROCKVILLE, MD 20852	52-1138173		50,000.	0.			PROGRAM SUPPORT
KENT SCHOOL CORPORATION 1 MACEDONIA ROAD P.O. BOX 2006 KENT, CT 06757	06-0646687		50,000.	0.			PROGRAM SUPPORT
KIPP NEW JERSEY 60 PARK PLACE, SUITE 802 NEWARK, NJ 07102	462792701		50,000.	0.			PROGRAM SUPPORT
MIAMI DADE COLLEGE 11380 NW 27TH AVENUE MIAMI, FL 33167	59-6169745		50,000.	0.			PROGRAM SUPPORT
MONROE COUNTY 490 63RD STREET, SUITE 150 MARATHON, FL 33050	59-6000749		50,000.	0.			PROGRAM SUPPORT
MY BROTHER'S WORKSHOP, INC. P.O. BOX 503205 ST. THOMAS, VI 00805	66-0718884		50,000.	0.			PROGRAM SUPPORT
OVERTOWN YOUTH CENTER, INC. 450 NW 14TH STREET MIAMI, FL 33136	651048896		50,000.	0.			PROGRAM SUPPORT
PAXY, INC. 20 ALHAMBRA CIRCLE #5 CORAL GABLES, FL 33134	46-4588106		50,000.	0.			PROGRAM SUPPORT
PINELANDS PRESBYTERIAN CHURCH 10201 BAHIA DRIVE MIAMI, FL 33189	59-0993237		50,000.	0.			PROGRAM SUPPORT

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SAINT PAUL CHAMBER ORCHESTRA SOCIETY - 408 SAINT PETER STREET THIRD FLOOR, THE HISTORIC HAMM BUILDING - SAINT PAUL, MN 55102	41-0829498		50,000.	0.			PROGRAM SUPPORT
ST. STEPHEN'S EPISCOPAL DAY SCHOOL 3439 MAIN HIGHWAY COCONUT GROVE, FL 33133	59-1301635		50,000.	0.			PROGRAM SUPPORT
STRANAHAN HOUSE, INC. LAS OLAS BOULEVARD AT 335 SE 6TH AV FORT LAUDERDALE, FL 33301	59-2164225		50,000.	0.			PROGRAM SUPPORT
THE FOUNTAINHEAD EXPERIENCE, INC. 5600 NORTH BAYSHORE DRIVE MIAMI, FL 33137	81-3627928		50,000.	0.			PROGRAM SUPPORT
THE WOLFSONIAN - FLORIDA INTERNATIONAL UNIVERSITY - 1001 WASHINGTON AVENUE - MIAMI BEACH, FL 33139	59-2741851		50,000.	0.			PROGRAM SUPPORT
VAN ALLEN INSTITUTE 30 WEST 22 STREET NEW YORK, NY 10010	13-1655152		50,000.	0.			PROGRAM SUPPORT
VENTURE CAFE MIAMI, INC. 1951 NW 7TH AVENUE, #600 MIAMI, FL 33136	81-4117606		50,000.	0.			PROGRAM SUPPORT
VOICES FOR CHILDREN FOUNDATION, INC. - 601 NW 1ST COURT 10TH FLOOR - MIAMI, FL 33136	592746076		49,500.	0.			PROGRAM SUPPORT
UNITED STATES ARTISTS 980 N. MICHIGAN AVENUE, SUITE 1300 CHICAGO, IL 60611	22-3903993		49,380.	0.			PROGRAM SUPPORT

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BIG PINE ELEMENTARY, INC. 30220 OVERSEAS HIGHWAY BIG PINE KEY, FL 33043	20-5732425		49,350.	0.			PROGRAM SUPPORT
BLINKHORN, LLC 23 GRANT AVENUE OLD GREENWICH, CT 06870	27-0399096		49,000.	0.			PROGRAM SUPPORT
CLEWISTON MUSEUM, INC 109 CENTRAL AVENUE CLEWISTON, FL 33440	59-2460777		48,300.	0.			PROGRAM SUPPORT
THE BRIDGE 4220 NW 7TH AVENUE MIAMI, FL 33127	46-3382854		48,000.	0.			PROGRAM SUPPORT
MUJER, INC. P.O. BOX 900685 HOMESTEAD, FL 33090	65-0534683		47,500.	0.			PROGRAM SUPPORT
FANM AYISYEN NAN MIYAMI, INC. 181 NE 82 STREET SUITE 101 MIAMI, FL 33138	65-0334201		47,000.	0.			PROGRAM SUPPORT
GUITARS OVER GUNS OPERATION INC. 169 E. FLAGLER STREET SUITE 1134 MIAMI, FL 33131	26-2644682		47,000.	0.			PROGRAM SUPPORT
BET SHIRA CONGREGATION LETTY ROTH SYNAGOGUE COMPLEX 7500 SOUTHWEST 120TH STREET - MIAMI, FL 33156	65-0526420		45,200.	0.			PROGRAM SUPPORT
CAMILLUS HEALTH CONCERN, INC. 336 NW 5 STREET MIAMI, FL 33128	650063921		45,000.	0.			PROGRAM SUPPORT

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CUBAN AMERICAN BAR ASSOCIATION'S PRO BONO PROJECT, INC. - 2400 SOUTH DIXIE HIGHWAY 2ND FLOOR - MIAMI, FL 33133	26-0221044		45,000.	0.			PROGRAM SUPPORT
MICHIGAN OPERA THEATRE 1526 BROADWAY STREET DETROIT, MI 48226	38-2052726		45,000.	0.			PROGRAM SUPPORT
RAGAMALA DANCE 711 WEST LAKE STREET, SUITE 309 MINNEAPOLIS, MN 55408	41-1747144		45,000.	0.			PROGRAM SUPPORT
WORLD CENTRAL KITCHEN, INC. 1875 CONNECTICUT AVENUE 10TH FLOOR WASHINGTON, DC 20009	273521132		45,000.	0.			PROGRAM SUPPORT
ELIJAH NETWORK FAMILY AND COMMUNITY ALLIANCE, INC. - 22400 OLD DIXIE HIGHWAY SUITE 2D - MIAMI, FL 33170	37-1445612		44,594.	0.			PROGRAM SUPPORT
BAPTIST HEALTH SOUTH FLORIDA FOUNDATION, INC. - 6855 RED ROAD SUITE 600 - CORAL GABLES, FL 33143-3632	59-1923401		42,680.	0.			PROGRAM SUPPORT
MIAMI CHILDREN'S MUSEUM, INC. 980 MACARTHUR CAUSEWAY MIAMI, FL 33132	59-2396999		42,550.	0.			PROGRAM SUPPORT
FLORIDA CENTER FOR INVESTIGATIVE REPORTING, CORP. - P.O. BOX 7129 - ST. PETERSBURG, FL 33734	27-1187698		41,309.	0.			PROGRAM SUPPORT
NEW HOPE C.O.R.P.S. 1020 N KROME AVENUE HOMESTEAD, FL 33030	65-0440678		41,151.	0.			PROGRAM SUPPORT

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THELMA GIBSON HEALTH INITIATIVE 3629 GRAND AVENUE COCONUT GROVE, FL 33133	45-2835389		41,000.	0.			PROGRAM SUPPORT
CCDH, INC. 7990 SW 117 AVENUE SUITE 135 MIAMI, FL 33183	59-1617964		40,070.	0.			PROGRAM SUPPORT
L.M. GENUINE SOLUTIONS LLC 2001 BISCAYNE BLVD., 2402 MIAMI, FL 33137	83-1052257		40,000.	0.			PROGRAM SUPPORT
BRIDGE TO HOPE 13295 SW 268TH STREET HOMESTEAD, FL 33032	59-2245357		40,000.	0.			PROGRAM SUPPORT
CHAMBER MUSIC SOCIETY OF OHIO 548 ROYAL AVENUE AKRON, OH 44303	20-1841282		40,000.	0.			PROGRAM SUPPORT
CRISTO REY MIAMI HIGH SCHOOL 2665 SOUTH BAYSHORE DRIVE, SUITE 62 MIAMI, FL 33133	82-7612380		40,000.	0.			PROGRAM SUPPORT
FOSPE, INC. 1050 4TH STREET MIAMI BEACH, FL 33139	47-2871969		40,000.	0.			PROGRAM SUPPORT
ISRAAID US 555 COLLEGE AVENUE PALO ALTO, CA 94306	46-2118225		40,000.	0.			PROGRAM SUPPORT
MIAMI CHILDREN'S INITIATIVE 2525 NW 62TH STREET, 4TH FLOOR MIAMI, FL 33147	27-5025010		40,000.	0.			PROGRAM SUPPORT

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PUERTO RICO COMMUNITY FOUNDATION P.O. BOX 70362 SAN JUAN, PR 00936-8362	66-0413230		40,000.	0.			PROGRAM SUPPORT
REVA DEVELOPMENT CORPORATION 808 EAST LAS OLAS BLVD, SUITE 101 FORT LAUDERDALE, FL 33301	36-4563315		40,000.	0.			PROGRAM SUPPORT
SOUTH FLORIDA COMPOSERS ALLIANCE P.O. BOX 015298 MIAMI, FL 33101-5298	59-2626561		40,000.	0.			PROGRAM SUPPORT
ST. JOHN RESCUE P.O. BOX 261 ST. JOHN, VI 00831	66-0549890		40,000.	0.			PROGRAM SUPPORT
UNIVERSITY OF MIAMI MEDICAL DEVELOPMENT - P.O. BOX 016960 (R-100) - MIAMI, FL 33101	59-0624458		39,914.	0.			PROGRAM SUPPORT
PUBLIC ART SAINT PAUL 381 WABASHA ST. N. ST. PAUL, MN 55102	41-1596908		38,333.	0.			PROGRAM SUPPORT
FEEDING SOUTH FLORIDA, INC. 5850 NORTHWEST 32ND AVENUE MIAMI, FL 33142	59-2097520		37,500.	0.			PROGRAM SUPPORT
AKRON AREA ARTS ALLIANCE 377 W. EXCHANGE STREET AKRON, OH 44302	34-1841587		37,500.	0.			PROGRAM SUPPORT
CENTER FOR APPLIED THEATER AND ACTIVE CULTURE - C/O CENTER FOR APPLIED DRAMA & AUTISM 220 SOUTH BALCH STREET - AKRON, OH 44302	83-0462908		37,500.	0.			PROGRAM SUPPORT

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FUNDARTE, INC. 7601 BYRON AVENUE SUITE 4C MIAMI BEACH, FL 33141	11-3711377		37,500.	0.			PROGRAM SUPPORT
GANG ALTERNATIVE, INC. 6620 NORTH MIAMI AVENUE MIAMI, FL 33150	202630595		37,400.	0.			PROGRAM SUPPORT
FOSTER CARE REVIEW, INC. 155 NW 3RD STREET, SUITE 4-338 MIAMI, FL 33128	65-0118944		37,333.	0.			PROGRAM SUPPORT
THE EDUCATION FUND, INC. 6713 MAIN STREET, SUITE 240 MIAMI LAKES, FL 33014	59-2468114		36,500.	0.			PROGRAM SUPPORT
THE NON-VIOLENCE PROJECT USA, INC. 1234 SOUTH DIXIE HIGHWAY SUITE # 34 CORAL GABLES, FL 33146	13-3812224		36,250.	0.			PROGRAM SUPPORT
TEMPLE BETH AM, INC. 5950 NORTH KENDALL DRIVE MIAMI, FL 33156	59-0855408		36,100.	0.			PROGRAM SUPPORT
STAR OF THE SEA FOUNDATION, INC. 724 TRUMAN AVENUE KEY WEST, FL 33040	30-0496670		36,000.	0.			PROGRAM SUPPORT
THE EDUCATION FUND, INC. 6713 MAIN STREET MIAMI LAKES, FL 33014	59-2468114		35,500.	0.			PROGRAM SUPPORT
HAITIAN NEIGHBORHOOD CENTER SANT LA, INC. - 13390 WEST DIXIE HIGHWAY - MIAMI, FL 33161	651080680		35,500.	0.			PROGRAM SUPPORT

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FRIENDS OF THE NORTH MIAMI PUBLIC LIBRARY, INC. - 835 NE 132ND STREET - NORTH MIAMI, FL 33161	59-2394216		35,315.	0.			PROGRAM SUPPORT
FACING CHANGE DOCUMENTING AMERICA 1301 W. LAFAYETTE BLVD DETROIT, MI 48202	27-0877214		35,169.	0.			PROGRAM SUPPORT
CENTRAL FLORIDA JOBS WITH JUSTICE CORP - 231 EAST COLONIAL DRIVE, 1ST FLOOR - ORLANDO, FL 32803	20-1449852		35,000.	0.			PROGRAM SUPPORT
COMMUNITIES UNITED, INC 6161 NW 9TH AVENUE MIAMI, FL 33127	65-0916485		35,000.	0.			PROGRAM SUPPORT
FAITH IN FLORIDA 407 E. AMELIA STREET ORLANDO, FL 32803	90-0915846		35,000.	0.			PROGRAM SUPPORT
PENUMBRA THEATRE COMPANY, INC. 270 N KENT STREET ST. PAUL, MN 55102	41-1563764		35,000.	0.			PROGRAM SUPPORT
PRIDELINES YOUTH SERVICES, INC. PO BOX 014340 MIAMI, FL 33101	650670159		35,000.	0.			PROGRAM SUPPORT
TIDES FOUNDATION 1012 TORNEY AVENUE SAN FRANCISCO, CA 94129	51-0198509		35,000.	0.			PROGRAM SUPPORT
TUESDAY MUSICAL ASSOCIATION 1041 W. MARKET STREET SUITE 200 AKRON, OH 44313	34-0786212		34,583.	0.			PROGRAM SUPPORT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VENTURE EDUCATION FOUNDATION, INC. 707 WEST AZEELE STREET TAMPA, FL 33606	81-3483485		34,450.	0.			PROGRAM SUPPORT
4WARD MIAMI, INC. 421 NE 51 STREET MIAMI, FL 33137	47-4438607		34,161.	0.			PROGRAM SUPPORT
CITY YEAR MIAMI, INC. 44 WEST FLAGLER STREET SUITE 500 MIAMI, FL 33130	22-2882549		33,700.	0.			PROGRAM SUPPORT
CENTRO DE PERIODISMO INVESTIGATIVO, INC. - AMERICAN UNIVERSITY LAW SCHOOL, OFFICE 306, PO BOX 6834 - SAN JUAN, PR	66-0705065		33,467.	0.			PROGRAM SUPPORT
INJUSTICE WATCH NFP 321 N. CLARK ST. SUITE 2501 CHICAGO, IL 60654	47-4537172		33,000.	0.			PROGRAM SUPPORT
SCALAWAG PO BOX 129 DURHAM, NC 27702	472014247		33,000.	0.			PROGRAM SUPPORT
YOUTH RADIO 1701 BROADWAY OAKLAND, CA 94612	94-3180825		33,000.	0.			PROGRAM SUPPORT
APOLLO'S FIRE BAROQUE ORCHESTRA 1 S HIGH STREET AKRON, OH 44308	34-1696842		32,500.	0.			PROGRAM SUPPORT
ECORI NEWS 10 DAVOL SQ., SUITE 100 PROVIDENCE, RI 02903	26-4267233		32,000.	0.			PROGRAM SUPPORT

Schedule I (Form 990)

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FOOD AND ENVIRONMENT REPORTING NETWORK - 576 FIFTH AVE., STE. 903 - NEW YORK, NY 10036	27-4108978		32,000.	0.			PROGRAM SUPPORT
LOST LIGHT PROJECTS, INC. 16 COURT STREET #2307 BROOKLYN, NY 11241	56-2451141		32,000.	0.			PROGRAM SUPPORT
HABITAT FOR HUMANITY OF THE MIDDLE KEYS - 8055 OVERSEAS HIGHWAY - MARATHON, FL 33050	65-0279086		32,000.	0.			PROGRAM SUPPORT
VOICE OF OC P.O. BOX 10020 SANTA ANA, CA 92711	27-0550219		31,926.	0.			PROGRAM SUPPORT
THE UNIVERSITY OF AKRON 302 BUCHEL MALL AKRON, OH 44325-1401	34-6575496		31,822.	0.			PROGRAM SUPPORT
GIVE2CUBA 201 GITTINGS AVENUE BALTIMORE, MD 21212	45-2541774		31,600.	0.			PROGRAM SUPPORT
CRAFTY MART 113 S. HUNTINGTON STREET MEDINA, OH 44256	47-1337945		31,582.	0.			PROGRAM SUPPORT
NATURAL CAPITALISM SOLUTIONS 11823 N. 75TH ST LONGMONT, CO 80303	14-1901877		31,537.	0.			PROGRAM SUPPORT
ORDWAY CENTER FOR THE PERFORMING ARTS - 345 WASHINGTON STREET - SAINT PAUL, MN 55102-1419	41-1428998		31,382.	0.			PROGRAM SUPPORT

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AMERICAN JEWISH COMMITTEE 1156 15TH STREET, NW 12TH FLOOR WASHINGTON, DC 20005	13-5563393		31,000.	0.			PROGRAM SUPPORT
THE FOUNDATION FOR NEW EDUCATION INITIATIVES, INC. - 1450 NE 2ND AVE., SUITE 931 - MIAMI, FL 33132	61-1566768		31,000.	0.			PROGRAM SUPPORT
GUITARS OVER GUNS OPERATION, INC. 1439 MILLER RD CORAL GABLES, FL 33146-2307	26-2644682		30,816.	0.			PROGRAM SUPPORT
RADICAL PARTNERS LLC 3330 NE 190TH STREET AVENTURA, FL 33180	46-2445186		30,773.	0.			PROGRAM SUPPORT
POWER URBAN THINKERS LLC 500 NE 75 STREET MIAMI, FL 33138	83-1652604		30,599.	0.			PROGRAM SUPPORT
HEALTH INFORMATION PROJECT, INC. 4601 PONCE DE LEON BLVD., SUITE 300 CORAL GABLES, FL 33146	80-0526558		30,500.	0.			PROGRAM SUPPORT
PLANNED PARENTHOOD FEDERATION OF AMERICA, INC. - 434 WEST 33RD STREET - NEW YORK, NY 10001	13-1644147		30,500.	0.			PROGRAM SUPPORT
INVESTIGATEWEST 401 MERCER STREET, SUITE 150 SEATTLE, WA 98109	27-0170663		30,197.	0.			PROGRAM SUPPORT
THE KIWANIS OF LITTLE HAVANA FOUNDATION, INC. - 1400 SW 1ST STREET - MIAMI, FL 33135	65-0093807		30,000.	0.			PROGRAM SUPPORT

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COMUNIDADES LATINAS UNIDAS EN SERVICIO, INC. - 797 E. 7TH STREET - PAUL, MN 55106	41-1386986		30,000.	0.			PROGRAM SUPPORT
HEBREW HOMES HEALTH NETWORK FOUNDATION INC. - 1800 NE 168TH STREET SUITE 200 - NORTH MIAMI BEACH, FL 33162	65-1040938		30,000.	0.			PROGRAM SUPPORT
KRISTI FAULKNER DANCE 306 W TROY FERNDAL, MI 48220	47-3333479		30,000.	0.			PROGRAM SUPPORT
LOS ANGELES OPERA COMPANY 135 NORTH GRAND AVE LOS ANGELES, CA 90012	95-2096402		30,000.	0.			PROGRAM SUPPORT
LUTHERAN SOCIAL SERVICES OF THE VIRGIN ISLANDS - 516B HOSPITAL STREET - FREDERIKSTED, VI 00840-3824	67-0250807		30,000.	0.			PROGRAM SUPPORT
MAKE THE HOMELESS SMILE MIAMI INC. 670 NW 113 STREET MIAMI, FL 33168	47-2964710		30,000.	0.			PROGRAM SUPPORT
NEO PHILANTHROPY 45 WEST 36 STREET, 6TH FLOOR NEW YORK, NY 10018	13-3191113		30,000.	0.			PROGRAM SUPPORT
RAILS-TO-TRAILS CONSERVANCY THE DUKE ELLINGTON BUILDING 2121 WARD COURT, NW 5TH FLOOR - WASHINGTON, DC 2	52-1437006		30,000.	0.			PROGRAM SUPPORT
REDLANDS CHRISTIAN MIGRANT ASSOCIATION, INC. - 402 WEST MAIN STREET - IMMOKALEE, FL 33549	59-1221966		30,000.	0.			PROGRAM SUPPORT

Schedule I (Form 990)

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RIVERSIDE CHRISTIAN MINISTRIES, INC. - P.O. BOX 2325 - MIAMI, FL 33103	592093182		30,000.	0.			PROGRAM SUPPORT
SOUTH FLORIDA COMMUNITY DEVELOPMENT COALITION, INC. - 300 NW 12TH AVENUE - MIAMI, FL 33128	450553449		30,000.	0.			PROGRAM SUPPORT
SOUTH FLORIDA PROGRESS FOUNDATION, INC. - 1601 BISCAYNE BOULEVARD BALLROOM LEVEL - MIAMI, FL 33132	59-6216592		30,000.	0.			PROGRAM SUPPORT
WHITNEY MUSEUM OF AMERICAN ART 99 GANSEVOORT STREET NEW YORK, NY 10014	13-1789318		30,000.	0.			PROGRAM SUPPORT
WOMEN OF TOMORROW MENTOR & SCHOLARSHIP PROGRAM - 111 NE 1ST STREET SUITE 912 - MIAMI, FL 33132	65-0862995		30,000.	0.			PROGRAM SUPPORT
ZOO MIAMI FOUNDATION, INC. 12400 SW 152 STREET MIAMI, FL 33177	59-6192814		30,000.	0.			PROGRAM SUPPORT
FAIRWARNING 55 SOUTH GRAND AVE. PASADENA, CA 91105	26-4615038		29,649.	0.			PROGRAM SUPPORT
FAIRCHILD TROPICAL BOTANIC GARDEN, INC. - 10901 OLD CUTLER ROAD - MIAMI, FL 33156	590668480		29,518.	0.			PROGRAM SUPPORT
THE MIAMI BEACH CHAMBER EDUCATION FOUNDATION - 1920 MERIDIAN AVENUE - MIAMI BEACH, FL 33139	31-1735967		29,434.	0.			PROGRAM SUPPORT

Schedule I (Form 990)



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DIBIA DREAM, INC. 500 NE 29TH STREET, TH1 MIAMI, FL 33137	47-1895077		29,041.	0.			PROGRAM SUPPORT
HOSANNA COMMUNITY FOUNDATION, INC. P.O. BOX 541086 OPA-LOCKA, FL 33054	650627786		28,750.	0.			PROGRAM SUPPORT
JEWISH ADOPTION AND FOSTER CARE OPTIONS, INC. - 4200 NORTH UNIVERSITY DRIVE - SUNRISE, FL 33351	65-0334267		28,600.	0.			PROGRAM SUPPORT
DIBIA DREAM, INC. 66 NE 39TH STREET, #892 MIAMI, FL 33137	47-1895077		28,500.	0.			PROGRAM SUPPORT
NORTH CAROLINA HEALTH NEWS PO BOX 2573 CHAPEL HILL, NC 27515	45-3913463		28,285.	0.			PROGRAM SUPPORT
SPECIAL OLYMPICS FLORIDA, INC. 1915 DON WICKHAM DRIVE CLERMONT, FL 34711-1905	23-7181560		28,079.	0.			PROGRAM SUPPORT
BENITOLINK, INC. 829 SAN BENITO ST. SUITE 200 HOLLISTER, CA 95023	47-3324907		28,000.	0.			PROGRAM SUPPORT
BETTER GOVERNMENT ASSOCIATION, INC. - 223 W. JACKSON BLVD., SUITE 300 - CHICAGO, IL 60606	360802950		28,000.	0.			PROGRAM SUPPORT
CALMATTERS 1017 L STREET 261 SACRAMENTO, CA 95814	47-2474086		28,000.	0.			PROGRAM SUPPORT

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CENTER FOR PUBLIC INTEGRITY 910 17TH STREET NW, 7TH FLOOR WASHINGTON, DC 20006	54-1512177		28,000.	0.			PROGRAM SUPPORT
CENTER FOR RESPONSIVE POLITICS 1300 L STREET NW 2ND FLOOR WASHINGTON, DC 20008	52-1275227		28,000.	0.			PROGRAM SUPPORT
CHALKBEAT, INC. 1250 BROADWAY, 30TH FLOOR NEW YORK, NY 10001	90-0915846		28,000.	0.			PROGRAM SUPPORT
CHARLOTTESVILLE TOMORROW PO BOX 1591 CHARLOTTESVILLE, VA 22902	20-3013557		28,000.	0.			PROGRAM SUPPORT
CIVIC STORY, INC. 18 EDMONT AVE. SOUTH ORANGE, NJ 07079	36-4740151		28,000.	0.			PROGRAM SUPPORT
COMMUNITY FOUNDATION OF NEW JERSEY P.O. BOX 338 MORRISTOWN, NJ 07963-0338	22-2281783		28,000.	0.			PROGRAM SUPPORT
CONNECTICUT NEWS PROJECT / CONNECTICUT MIRROR - 36 RUSS STREET - HARTFORD, CT 06106	27-0583046		28,000.	0.			PROGRAM SUPPORT
FIRST LOOK MEDIA WORKS, INC. 114 5TH ST AVE 18TH FLR NEW YORK, NY 10011-0000	80-0951255		28,000.	0.			PROGRAM SUPPORT
GREATER WASHINGTON COMMUNITY FOUNDATION - 1325 G STREET NW, SUITE 480--WASHINGTON, DC 20005 - WASHINGTON, DC 20005	23-7343119		28,000.	0.			PROGRAM SUPPORT

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GRIST MAGAZINE, INC. 1201 WESTERN AVE., SUITE 410 SEATTLE, WA 98101	06-1664153		28,000.	0.			PROGRAM SUPPORT
HIGHLANDS CURRENT, INC. 161 MAIN STREET COLD SPRING, NY 10516	45-4403312		28,000.	0.			PROGRAM SUPPORT
HONOLULU CIVIL BEAT 1745 J ALA AMOAMO STREET HONOLULU, HI 96816	81-2803662		28,000.	0.			PROGRAM SUPPORT
INEWSOURCE 5500 CAMPANILE DR. PSFA361C SAN DIEGO, CA 92182-4561	27-0732786		28,000.	0.			PROGRAM SUPPORT
INTERNATIONAL CONSORTIUM OF INVESTIGATIVE JOURNALISTS (ICIJ) - 910 17TH ST. NW SUITE 410 - WASHINGTON, DC 20006	81-4739107		28,000.	0.			PROGRAM SUPPORT
INVESTIGATIVE POST 487 MAIN STREET BUFFALO, NY 14203	45-3844514		28,000.	0.			PROGRAM SUPPORT
KENTUCKY PUBLIC RADIO, INC. 619 S. FOURTH ST LOUISVILLE, KY 40202	61-1259787		28,000.	0.			PROGRAM SUPPORT
MAINE CENTER FOR PUBLIC INTEREST REPORTING - PO BOX 284 - HALLOWELL, ME 04347	27-2623867		28,000.	0.			PROGRAM SUPPORT
MARSHALL PROJECT, INC. 156 WEST 56TH ST. NEW YORK, NY 10019	46-4353634		28,000.	0.			PROGRAM SUPPORT

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MARYLANDREPORTER.COM, INC. 6392 SHADOWSHAPE PLACE COLUMBIA, MD 21045	27-0853887		28,000.	0.			PROGRAM SUPPORT
METROPOLITAN INDIANAPOLIS PUBLIC MEDIA, INC. - 1630 N. MERIDIAN ST. - INDIANAPOLIS, IN 46202	35-1147600		28,000.	0.			PROGRAM SUPPORT
MINNPOST 900 6TH AVENUE SE, SUITE 220 MINNEAPOLIS, MN 55414	26-0573427		28,000.	0.			PROGRAM SUPPORT
MISSISSIPPI NEWS AND INFORMATION CORPORATION - 750 WOODLANDS PARKWAY - RIDGELAND, MS 39157	47-2158741		28,000.	0.			PROGRAM SUPPORT
MOTHER JONES 222 SUTTER ST; 6TH FLOOR SAN FRANCISCO, CA 94108	942282759		28,000.	0.			PROGRAM SUPPORT
NEXT CITY 1500 JFK BOULEVARD, SUITE 1220 PHILADELPHIA, PA 19102	22-3886361		28,000.	0.			PROGRAM SUPPORT
PHILADELPHIA PUBLIC SCHOOL NOTEBOOK - 699 RANSTEAD ST., 3RD FLOOR - PHILADELPHIA, PA 19106	462716505		28,000.	0.			PROGRAM SUPPORT
PROPUBLICA, INC. 155 AVENUE OF THE AMERICAS, 13TH FL NEW YORK, NY 10013	142007220		28,000.	0.			PROGRAM SUPPORT
PUBLICSOURCE, INC. 746 E. WARRINGTON AVE PITTSBURGH, PA 15210	47-4309256		28,000.	0.			PROGRAM SUPPORT

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PULITZER CENTER ON CRISIS REPORTING - 1779 MASSACHUSETTS AVENUE, NW # 615 - WASHINGTON, DC 20036	27-0458242		28,000.	0.			PROGRAM SUPPORT
ROCKY MOUNTAIN PUBLIC BROADCASTING NETWORK, INC. - 1089 BANNOCK STREET - DENVER, CO 80204	84-0510785		28,000.	0.			PROGRAM SUPPORT
SAN ANTONIO REPORT DBA RIVARD REPORT - 110 E HOUSTON ST, #207 - SAN ANTONIO, TX 78205	47-4820476		28,000.	0.			PROGRAM SUPPORT
SAN FRANCISCO PUBLIC PRESS 44 PAGE ST., SUITE 504 SAN FRANCISCO, CA 94102	27-1275141		28,000.	0.			PROGRAM SUPPORT
SUSTAINABLE MARKETS FOUNDATION 45 WEST 36TH ST, 6TH FLOOR NY, NY 10018	134188834		28,000.	0.			PROGRAM SUPPORT
TEXAS TRIBUNE, INC. 823 CONGRESS AVE., STE. 1400 AUSTIN, TX 78701	26-4527097		28,000.	0.			PROGRAM SUPPORT
THE CENTER FOR INVESTIGATIVE REPORTING - 1400 65TH STREET, SUITE 200 - EMERYVILLE, CA 94608	94-2434026		28,000.	0.			PROGRAM SUPPORT
THE CENTER FOR MICHIGAN 4100 N. DIXBORO RD. ANN ARBOR, MI 48105	32-0167398		28,000.	0.			PROGRAM SUPPORT
THE COLORADO INDEPENDENT 8273 EAST 29TH PLACE DENVER, CO 80238	46-2634633		28,000.	0.			PROGRAM SUPPORT

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THE CURATORS OF THE UNIVERSITY OF MISSOURI - 3651 OLIVE STREET - ST. LOUIS, MO 63108	43-6003859		28,000.	0.			PROGRAM SUPPORT
THE LENS 1025 S. JEFFERSON DAVIS PKWY NEW ORLEANS, LA 70125	27-2072772		28,000.	0.			PROGRAM SUPPORT
THE NATION INSTITUTE THE INVESTIGATIVE FUND, 116 EAST 16TH STREET, 8TH FLOOR - NEW YORK, NY 10003	13-6216903		28,000.	0.			PROGRAM SUPPORT
THE POYNTER INSTITUTE FOR MEDIA STUDIES, INC. - 801 THIRD STREET SOUTH - ST. PETERSBURG, FL 33701	59-1630423		28,000.	0.			PROGRAM SUPPORT
VOICE OF SAN DIEGO 110 WEST A. ST., #650 SAN DIEGO, CA 92101	20-1585919		28,000.	0.			PROGRAM SUPPORT
VTDIGGER 26 STATE STREET, SUITE 8 MONTPELIER, VT 05602	27-1553931		28,000.	0.			PROGRAM SUPPORT
WASHINGTON MONTHLY CORPORATION 1200 18TH STREET NW SUITE 330 WASHINGTON, DC 20036	80-0434806		28,000.	0.			PROGRAM SUPPORT
WHYY, INC. 150 N. 6TH STREET PHILADELPHIA, PA 19106	23-1438083		28,000.	0.			PROGRAM SUPPORT
WISCONSIN CENTER FOR INVESTIGATIVE JOURNALISM - 5006 VILAS COMMUNICATION HALL - MADISON, WI 53706	26-2143608		28,000.	0.			PROGRAM SUPPORT

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WYOFIELD 1740 DELL RANGE BLVD CHEYENNE, WY 82009	27-0410642		28,000.	0.			PROGRAM SUPPORT
YOUNG MEN'S CHRISTIAN ASSOCIATION OF SOUTH FLORIDA, INC. - 900 SE 3RD AVENUE 3RD FLOOR - FORT LAUDERDALE, FL 33316	59-0624464		28,000.	0.			PROGRAM SUPPORT
URGENT, INC. 1000 NW 1 AVENUE, SUITE 100 MIAMI, FL 33136	650516506		27,500.	0.			PROGRAM SUPPORT
TRUSTEES OF BOSTON UNIVERSITY OFFICE OF POST AWARD FINANCIAL OPERATIONS, 640 COMMONWEALTH AVENUE - BOSTON,	04-2103547		27,352.	0.			PROGRAM SUPPORT
ASPEN JOURNALISM 1280 UTE AVENUE, SUITE 4 ASPEN, CO 81611	35-2400162		27,171.	0.			PROGRAM SUPPORT
FRIENDS OF THE BASS MUSEUM, INC. 2121 PARK AVENUE MIAMI BEACH, FL 33139	59-2017511		26,869.	0.			PROGRAM SUPPORT
MIAMI CHILDREN'S HOSPITAL FOUNDATION, INC. - 3100 SW 62 AVENUE - MIAMI, FL 33155	59-1720704		26,340.	0.			PROGRAM SUPPORT
ZEITGEIST 275 EAST FOURTH STREET SUITE 200 SAINT PAUL, MN 55101	41-1425985		26,300.	0.			PROGRAM SUPPORT
TEACH FOR AMERICA, INC. 3100 NW 5TH AVENUE MIAMI, FL 33127	13-3541913		26,000.	0.			PROGRAM SUPPORT

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SOUTH FLORIDA SPCA SOCIETY FOR THE PREVENTION OF CRUELTY TO - P.O. BOX 924088 - HOMESTEAD, FL 33092	65-0338657		25,703.	0.			PROGRAM SUPPORT
SOUTH FLORIDA NATIONAL PARKS TRUST, INC. - 1390 SOUTH DIXIE HIGHWAY SUITE 2203 - CORAL GABLES, FL 33146	134341209		25,500.	0.			PROGRAM SUPPORT
WILLIAM H. CANON MEMORIAL 36700 NORTHLINE ROAD ROMULUS, MI 48174	45-5571545		25,467.	0.			PROGRAM SUPPORT
ADOPT-A-CLASSROOM, INC. 110 N 5TH ST 10TH FLR MINNEAPOLIS, MN 55403	65-0828272		25,211.	0.			PROGRAM SUPPORT
EXPERIMENTAL STATION 6100 S BLACKSTONE AVE CHICAGO, IL 60637	32-0017985		25,127.	0.			PROGRAM SUPPORT
TEACHERS COLLEGE COLUMBIA UNIVERSITY - 475 RIVERSIDE DRIVE, SUITE 650 - NEW YORK, NY 10115	13-1624202		25,111.	0.			PROGRAM SUPPORT
UNIVERSITY OF MIAMI SCHOOL OF ARCHITECTURE, 1223 THEODORE STREET CORAL GABLES, FL 33124	59-0624458		25,035.	0.			PROGRAM SUPPORT
PASTIME YOUTH ACADEMIES, INC. 801 NW 122ND STREET OKLAHOMA CITY, OK 73114	72-1603674		25,000.	0.			PROGRAM SUPPORT
ARCATA PRESS DBA SAINT PAUL ALMANAC - 275 EAST FOURTH STREET, SUITE 701 - SAINT PAUL, MN 55101	65-1264407		25,000.	0.			PROGRAM SUPPORT

Schedule I (Form 990)



**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BARNES FOUNDATION 2025 BENJAMIN FRANKLIN PARKWAY PHILADELPHIA, PA 19130	23-6000149		25,000.	0.			PROGRAM SUPPORT
BETTER WAY OF MIAMI, INC. 800 NORTHWEST 28TH STREET MIAMI, FL 33137	592462933		25,000.	0.			PROGRAM SUPPORT
CENTRO CAMPESINO FARMWORKER CENTER INC. - 35801 SW 186TH AVE. - HOMESTEAD, FL 33034	59-1460598		25,000.	0.			PROGRAM SUPPORT
CITY OF MIAMI FINANCE DEPARTMENT 444 SW 2ND AVENUE MIAMI, FL 33130	59-6000375		25,000.	0.			PROGRAM SUPPORT
CORNERSTONE CHRISTIAN CENTER OF HOMESTEAD FL INC. - 13295 SW 268TH STREET - HOMESTEAD, FL 33032	59-2245357		25,000.	0.			PROGRAM SUPPORT
DO GOOD INTERNATIONAL, INC. 3350 SW 148TH AVENUE, SUITE 203 MIRAMAR, FL 33027	45-2525366		25,000.	0.			PROGRAM SUPPORT
EMPOWERING YOUTH INC. 1031 IVES DAIRY ROAD SUITE 228 MIAMI, FL 33179	26-4623312		25,000.	0.			PROGRAM SUPPORT
HIGHLANDER RESEARCH & EDUCATION CENTER, INC. - 1959 HIGHLANDER WAY - NEW MARKET, TN 37820	62-0646373		25,000.	0.			PROGRAM SUPPORT
JEWISH FAMILY AND CHILDREN'S SERVICE OF MINNEAPOLIS - 5905 GOLDEN VALLEY ROAD - GOLDEN VALLEY, MN 55422	41-0693860		25,000.	0.			PROGRAM SUPPORT

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KIPP MIAMI (C/O KIPP FOUNDATION) DEPT LA 24579 PASADENA, CA 91185-4579	81-4473475		25,000.	0.			PROGRAM SUPPORT
MARTHA'S VINEYARD COMMUNITY SERVICES - 111 EDGARTOWN ROAD - VINEYARD HAVEN, MA 02568	04-2301598		25,000.	0.			PROGRAM SUPPORT
MIAMI COALITION FOR THE HOMELESS 140 W. FLAGLER STREET, SUITE 105 MIAMI, FL 33130	59-2521237		25,000.	0.			PROGRAM SUPPORT
MIAMI DADE TRANSIT ALLIANCE 169 E FLAGLER STREET, SUITE 1401 MIAMI, FL 33131	45-5160561		25,000.	0.			PROGRAM SUPPORT
MIAMI HISPANIC BALLET, CORP. 111 SW 5TH AVENUE MIAMI, FL 33130	65-0441197		25,000.	0.			PROGRAM SUPPORT
NALEO EDUCATIONAL FUND 1122 W. WASHINGTON BLVD. 3RD FLOOR LOS ANGELES, CA 90015	52-1212849		25,000.	0.			PROGRAM SUPPORT
PHILADELPHIA MUSEUM OF ART P.O. BOX 7646 PHILADELPHIA, PA 19101	23-1365388		25,000.	0.			PROGRAM SUPPORT
PRESCOTT COLLEGE, INC. 220 GROVE AVENUE PRESCOTT, AZ 86301	86-0294012		25,000.	0.			PROGRAM SUPPORT
TECHNOLOGY INNOVATION FOUNDATION OF THE AMERICAS - C/O GREENBERG TRAURIG 5100 TOWN CENTER CIRCLE, SUITE 400 - BOCA RATON, FL 33486	46-3069806		25,000.	0.			PROGRAM SUPPORT

Schedule I (Form 990)

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THE LEADERSHIP FOUNDATION 1155 15TH STREET, NW SUITE 1000 WASHINGTON, DC 20005	52-1681028		25,000.	0.			PROGRAM SUPPORT
THE PET PROJECT FOR PETS, INC 2200 NORTHWEST 9TH AVENUE WILTON MANORS, FL 33111	37-1440098		25,000.	0.			PROGRAM SUPPORT
TRANSITION, INC. 1600 NW 3RD AVENUE BUILDING C MIAMI, FL 33136	59-1440609		25,000.	0.			PROGRAM SUPPORT
TRANSSOCIAL, INC. 7930 SW 17TH STREET MIAMI, FL 33155	26-3728794		25,000.	0.			PROGRAM SUPPORT
UNIVERSITY OF MIAMI HILLEL 1100 STANFORD DRIVE CORAL GABLES, FL 33146	52-1758796		25,000.	0.			PROGRAM SUPPORT
VICTIM RESPONSE, INC. - THE LODGE P.O. BOX 470728 MIAMI, FL 33147	27-0077139		25,000.	0.			PROGRAM SUPPORT
YEAR UP, INC. 25 NE 2ND ST., BLDG. 5, ROOM 5512 MDC - WOLFSON CAMPUS - MIAMI, FL 33132	04-3534407		25,000.	0.			PROGRAM SUPPORT
HARVEY B. GANTT CENTER FOR AFRICAN AMERICAN ARTS + CULTURE - 551 SOUTH TRYON STREET - CHARLOTTE, NC 28202	56-1152286		24,956.	0.			PROGRAM SUPPORT
PIECE OF CAKE BAKERS 2100 SANS SOUCI BOULEVARD SUITE 602 MIAMI, FL 33181	47-2825428		24,925.	0.			PROGRAM SUPPORT

Schedule I (Form 990)

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COALITION OF FLORIDA FARMWORKER ORGANIZATIONS, INC. - 778 WEST PALM DRIVE - FLORIDA CITY, FL 33034	59-2149950		24,915.	0.			PROGRAM SUPPORT
TRADISYON LAKOU LAKAY, INC. 212 NORTHEAST 59TH TERRACE MIAMI, FL 33137	65-1085683		24,632.	0.			PROGRAM SUPPORT
THE SEATTLE GLOBALIST PO BOX 22806 SEATTLE, WA 98122	20-5999325		24,359.	0.			PROGRAM SUPPORT
ST. LOUIS CATHOLIC CHURCH 7270 SW 120 STREET PINECREST, FL 33156	56-1055646		24,270.	0.			PROGRAM SUPPORT
HUMANE SOCIETY OF GREATER MIAMI, INC. - 2101 NORTHWEST 95TH STREET - MIAMI, FL 33147	59-0711176		24,184.	0.			PROGRAM SUPPORT
LIVING LAB, LLC 4444 2ND AVENUE DETROIT, MI 48201	45-3831430		24,057.	0.			PROGRAM SUPPORT
A HOST OF PEOPLE, INC. 256 WEST GRAND BLVD DETROIT, MI 48216	46-3492862		23,697.	0.			PROGRAM SUPPORT
EDUCATE TOMORROW CORP. 1717 NORTH BAYSHORE DRIVE SUITE 203 MIAMI, FL 33132	51-0493526		23,425.	0.			PROGRAM SUPPORT
BEST BUDDIES INTERNATIONAL, INC. 100 SE 2ND STREET SUITE 2200 MIAMI, FL 33131	521614576		23,200.	0.			PROGRAM SUPPORT

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CATHOLIC CHARITIES LEGAL SERVICES, ARCHDIOCESE OF MIAMI, INC - 28 WEST FLAGLER STREET, 10TH FLOOR - MIAMI, FL 33130	65-0804650		23,000.	0.			PROGRAM SUPPORT
EL INGENIO, INC 6300 SW 20TH TERRACE MIAMI, FL 33155	27-4255315		23,000.	0.			PROGRAM SUPPORT
JACKSON HEALTH FOUNDATION 1501 NW NORTH RIVER DRIVE FIRST FLOOR MIAMI, FL 33125	65-0077727		22,700.	0.			PROGRAM SUPPORT
MARQUETTE UNIVERSITY 1131 W. WISCONSIN AVE MILWAUKEE, WI 53233	39-0806251		22,416.	0.			PROGRAM SUPPORT
BROWARD BULLDOG, INC. 4840 NE 13 TERRACE OAKLAND PARK, FL 33334	27-0318157		22,334.	0.			PROGRAM SUPPORT
KEEPERS OF THE ART EDUCATION 639 CRESTVIEW AVENUE AKRON, OH 44320	27-2894857		22,000.	0.			PROGRAM SUPPORT
MARINE BIOLOGICAL LABORATORY DEVELOPMENT OFFICE CANDLE HOUSE, 3RD FLOOR 7 MBL STREET - WOODS HOLE, MA 025	04-2104690		22,000.	0.			PROGRAM SUPPORT
POLICE OFFICER ASSISTANCE TRUST, INC. - 1030 NW 111TH AVENUE SUITE 232 - MIAMI, FL 33172	65-0164129		21,717.	0.			PROGRAM SUPPORT
MIAMI-DADE COUNTY LAW LIBRARY 73 WEST FLAGLER STREET, ROOM 321 MIAMI, FL 33130	59-6000573		21,604.	0.			PROGRAM SUPPORT

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CAROLINA PUBLIC PRESS, INC. 50 S. FRENCH BROAD AVE., SUITE 234 ASHEVILLE, NC 28801	46-0801080		21,532.	0.			PROGRAM SUPPORT
LETTER 16 PRESS 1447 SW 15TH STREET MIAMI, FL 33145	47-3685228		21,500.	0.			PROGRAM SUPPORT
OKLAHOMA WATCH, INC. 395 W. LINDSEY ST. SUITE 3120D NORMAN, OK 73019	273721498		21,288.	0.			PROGRAM SUPPORT
AMERICAN UNIVERSITY 4400 MASSACHUSETTS AVE NW, WASHINGTON, DC 20016	53-0196549		21,159.	0.			PROGRAM SUPPORT
BUSKERFEST MIAMI 1926 NW 17 ST MIAMI, FL 33125	47-1770606		21,058.	0.			PROGRAM SUPPORT
YVETTE ROCK 840 BLAINE STREET DETROIT, MI 48202	592-22-4896		21,025.	0.			PROGRAM SUPPORT
100REPORTERS 910 17TH ST., NW, SUITE 700 WASHINGTON, DC 20006	90-0702671		20,889.	0.			PROGRAM SUPPORT
CATHY BYRD 2395 LAKE PANCOAST DRIVE, STUDIO 13 MIAMI BEACH, FL 33140	455-98-7861		20,578.	0.			PROGRAM SUPPORT
ALABAMA INITIATIVE FOR INDEPENDENT JOURNALISM, INC. - 147 GLENVIEW DRIVE - BIRMINGHAM, AL 35213	47-3524117		20,560.	0.			PROGRAM SUPPORT

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NEAT STUFF, INC. 2624 NORTHWEST 21ST TERRACE MIAMI, FL 33142	65-0746714		20,180.	0.			PROGRAM SUPPORT
EVERETT PUBLIC LIBRARY 2702 HOYT AVENUE EVERETT, WA 98201	91-6001248		20,127.	0.			PROGRAM SUPPORT
EASTER SEALS SOUTH FLORIDA, INC. 1475 NW 14 AVENUE MIAMI, FL 33125-1692	59-0722783		20,110.	0.			PROGRAM SUPPORT
COMMUNITY HABILITATION CENTER, INC. - 11450 SW 79 STREET - MIAMI, FL 33173	237171039		20,028.	0.			PROGRAM SUPPORT
MIAMI GIRLS ROCK CAMP, INC. 5505 NE 2ND AVENUE MIAMI, FL 33137	81-2901811		20,001.	0.			PROGRAM SUPPORT
AQUA FOUNDATION FOR WOMEN, INC. 1521 ALTON ROAD MIAMI BEACH, FL 33139	20-0873622		20,000.	0.			PROGRAM SUPPORT
ROBINS HOUSE FOUNDATION, INC. 5535 MEMORIAL DRIVE HOUSTON, TX 77007	47-2515471		20,000.	0.			PROGRAM SUPPORT
50CAN, INC 980 NORTH FEDERAL HIGHWAY SUITE 110 BOCA RATON, FL 33432	27-3069592		20,000.	0.			PROGRAM SUPPORT
AQUA FOUNDATION FOR WOMEN, INC. 4500 BISCAYNE BLVD., SUITE 340 MIAMI, FL 33137	20-0873622		20,000.	0.			PROGRAM SUPPORT

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CENTER FOR SOCIAL CHANGE, INC. 2103 CORAL WAY, SUITE 202 MIAMI, FL 33145	27-2966443		20,000.	0.			PROGRAM SUPPORT
CIRCLE OF BROTHERHOOD 4055 NW 17TH AVENUE MIAMI, FL 33142	47-2382636		20,000.	0.			PROGRAM SUPPORT
CITY OF DORAL 8401 NW 53RD TERRACE DORAL, FL 33166	73-1690945		20,000.	0.			PROGRAM SUPPORT
COMMUNITY JUSTICE PROJECT, INC. 3000 BISCAYNE BOULEVARD, #106 MIAMI, FL 33137	47-2777185		20,000.	0.			PROGRAM SUPPORT
GAY MEN'S CHORUS OF SOUTH FLORIDA 2040 N DIXIE HIGHWAY, SUITE 218 WILTON MANORS, FL 33305	27-3533074		20,000.	0.			PROGRAM SUPPORT
GRAMEEN AMERICA, INC. 1460 BROADWAY, 8TH FLOOR NEW YORK, NY 10036	20-8497991		20,000.	0.			PROGRAM SUPPORT
GREATER MIAMI SERVICE CORPS 810 NW 28TH STREET MIAMI, FL 33127	650221820		20,000.	0.			PROGRAM SUPPORT
GREATER MIAMI YOUTH FOR CHRIST 9350 SOUTHWEST 79TH AVENUE MIAMI, FL 33156	596033466		20,000.	0.			PROGRAM SUPPORT
HOLY TRINITY EPISCOPAL CHURCH 501 N. DALE STREET SUITE 201 ST. PAUL, MN 55103	30-0508393		20,000.	0.			PROGRAM SUPPORT

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INTERNATIONAL HUMAN FACTOR YOUTH LEADERSHIP, INC. - 2520 CORAL WAY SUITE 2233 - MIAMI, FL 33145	47-4943992		20,000.	0.			PROGRAM SUPPORT
MIAMI COUNTRY DAY SCHOOL 601 NE 107TH STREET MIAMI, FL 33161	59-1278987		20,000.	0.			PROGRAM SUPPORT
MIAMI SCIENCE MUSEUM 1101 BISCAYNE BOULEVARD MIAMI, FL 33132	59-0854960		20,000.	0.			PROGRAM SUPPORT
MIAMI WORKERS CENTER, INC. 745 NW 54TH ST. MIAMI, FL 33127	650942224		20,000.	0.			PROGRAM SUPPORT
MILTON ACADEMY 170 CENTRE STREET MILTON, MA 02186	04-2103603		20,000.	0.			PROGRAM SUPPORT
NORTH AMERICAN ASSOCIATION FOR ENVIRONMENTAL EDUCATION - 2000 P STREET, NW SUITE 540 - WASHINGTON, DC 20036	23-7158061		20,000.	0.			PROGRAM SUPPORT
OWL CREEK CONSERVANCY P.O. BOX 291 MOUNT VERNON, OH 43050	31-1696161		20,000.	0.			PROGRAM SUPPORT
PATCHESPPEC 335 SOUTH KROME AVENUE FLORIDA CITY, FL 33034	65-1012818		20,000.	0.			PROGRAM SUPPORT
ST. PHILLIP'S EPISCOPAL CHURCH, INC. - 1121 ANDALUSIA AVENUE - CORAL GABLES, FL 33134	59-0624448		20,000.	0.			PROGRAM SUPPORT

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THE WOMEN'S BREAST & HEART INITIATIVE FLORIDA AFFILIATE, INC - 14125 NW 80TH AVENUE, SUITE 306 - MIAMI LAKES, FL 33016	562540735		20,000.	0.			PROGRAM SUPPORT
UNION OF CONCERNED SCIENTISTS 2 BRATTLE SQUARE SUITE 6 CAMBRIDGE, MA 02138	04-2535767		20,000.	0.			PROGRAM SUPPORT
UNIVERSITY OF ROCHESTER- GOLISANO CHILDREN'S HOSPITAL - P.O. BOX 278996 - ROCHESTER, NY 14627	16-0743209		20,000.	0.			PROGRAM SUPPORT
WECOUNT, INC. P.O. BOX 344116 FLORIDA CITY, FL 33034	562638368		20,000.	0.			PROGRAM SUPPORT
MIAMI RAIL PUBLISHING CORPORATION 1521 ALTON ROAD, SUITE 789 MIAMI BEACH, FL 33139	46-3188294		19,974.	0.			PROGRAM SUPPORT
IRIE FOUNDATION 1410 SUNSET HARBOUR DRIVE MIAMI BEACH, FL 33139	45-2432384		19,394.	0.			PROGRAM SUPPORT
WITTY GRITTY, LLC 1151 S. 12TH STREET PHILADELPHIA, PA 19147	47-2447602		19,336.	0.			PROGRAM SUPPORT
THE STREET PLANS COLLABORATIVE, INC. - 221 ARAGON AVENUE - CORAL GABLES, FL 33134	27-2163948		19,200.	0.			PROGRAM SUPPORT
IOWA CENTER FOR PUBLIC AFFAIRS JOURNALISM - PO BOX 2178 - IOWA CITY, IA 52244-2178	27-1942963		19,021.	0.			PROGRAM SUPPORT

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THE EAST-WEST FOUNDATION 3099 NW 44TH STREET MIAMI, FL 33199	81-4133381		19,000.	0.			PROGRAM SUPPORT
GIRL POWER ROCKS 6015 NW 7TH AVENUE MIAMI, FL 33127	65-0737649		18,552.	0.			PROGRAM SUPPORT
MIAMI CITY BALLET, INC. 2200 LIBERTY AVENUE MIAMI BEACH, FL 33139	59-2578534		18,525.	0.			PROGRAM SUPPORT
BOUND BY BEAUTY 10108 NE 1ST AVENUE MIAMI SHORES, FL 33138	81-3798028		18,500.	0.			PROGRAM SUPPORT
PELICAN HARBOR SEABIRD STATION, INC. - 1279 NE 79TH STREET CAUSEWAY - MIAMI, FL 33138	59-2137331		18,500.	0.			PROGRAM SUPPORT
PRIMARY FLIGHT, LLC 501 EAST TROPICAL WAY, PLANTATION, FL 33317	27-1280268		18,500.	0.			PROGRAM SUPPORT
CITY LIMITS NEWS, INC. 8 WEST 126TH STREET NEW YORK, NY 10027	27-0218689		18,458.	0.			PROGRAM SUPPORT
NEW MUSIC DETROIT 104 EDMUND PL #3 DETROIT, MI 48201	90-1004904		18,150.	0.			PROGRAM SUPPORT
WOODSIDE MANAGEMENT, LLC 538 WOODSIDE DRIVE AKRON, OH 44303	34-0694061		18,032.	0.			PROGRAM SUPPORT

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ILLUMINARTS, INC. P.O. BOX 45-1704 MIAMI, FL 33245	46-3424219		18,000.	0.			PROGRAM SUPPORT
INDEPENDENT FILMMAKER PROJECT MINNESOTA - 550 VANDALIA STREET, SUITE 120 - ST. PAUL, MN 55115	41-1594894		18,000.	0.			PROGRAM SUPPORT
INTERNATIONAL CENTER FOR JOURNALISTS, INC. - 2000 M STREET NW SUITE 250 - WASHINGTON, DC 20036	11-2724905		18,000.	0.			PROGRAM SUPPORT
ISLAND DOLPHIN CARE, INC. 150 LORELANE PLACE KEY LARGO, FL 33037	65-0728047		18,000.	0.			PROGRAM SUPPORT
KEY BISCAYNE COMMUNITY FOUNDATION, INC. - 88 W MCINTYRE ST #200 - KEY BISCAYNE, FL 33149	30-0239421		18,000.	0.			PROGRAM SUPPORT
THIRD WAVE VOLUNTEERS, INC 3566 VISTA COURT MIAMI, FL 33133	82-3731839		18,000.	0.			PROGRAM SUPPORT
RELIGION NEWS FOUNDATION 30 NEFF ANNEX COLUMBIA, MO 65211	31-1650883		17,847.	0.			PROGRAM SUPPORT
SAN JOSE STATE UNIVERSITY ONE WASHINGTON SQUARE SAN JOSE, CA 95192-0029	77-0414438		17,803.	0.			PROGRAM SUPPORT
CREATIVE MANY MICHIGAN 440 BURROUGHS STREET, SUITE 365 DETROIT,, MI 48202	38-2537585		17,753.	0.			PROGRAM SUPPORT

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FOSTERING MEDIA CONNECTIONS 412 W 6TH STREET, SUITE 925 LOS ANGELES, CA 90014	45-3860344		17,695.	0.			PROGRAM SUPPORT
LIGA CONTRA EL CANCER, INC. 2180 SW 12TH AVENUE MIAMI, FL 33129	59-1629554		17,500.	0.			PROGRAM SUPPORT
BREAKTHROUGH COLLABORATIVE P.O. BOX 71420 OAKLAND, CA 94612	94-3140620		17,500.	0.			PROGRAM SUPPORT
MARJORY STONEMAN DOUGLAS BISCAYNE NATURE CENTER, INC. - 6767 CRANDON BOULEVARD - KEY BISCAYNE, FL 33149	592549600		17,500.	0.			PROGRAM SUPPORT
SOUTH FLORIDA NATIONAL PARKS TRUST 1390 SOUTH DIXIE HIGHWAY SUITE 2203 CORAL GABLES, FL 33146	134341209		17,500.	0.			PROGRAM SUPPORT
SPREAD ART, INC. 1465 VINEWOOD STREET DETROIT, MI 48216	46-2170914		17,500.	0.			PROGRAM SUPPORT
SACRAMENTO PUBLIC LIBRARY AUTHORITY - 828 I STREET - SACRAMENTO, CA 95814	68-0332244		17,324.	0.			PROGRAM SUPPORT
SUNDARI FOUNDATION, INC. DBA LOTUS HOUSE WOMEN'S SHELTER - 400 SOUTH POINTE DRIVE - MIAMI BEACH, FL 33139	81-0652266		16,926.	0.			PROGRAM SUPPORT
CYNEX ENTERPRISES, INC. 17650 WEST TWELVE MILE RD SOUTHFIELD, MI 48076	38-3356114		16,887.	0.			PROGRAM SUPPORT

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WALLA WALLA COUNTY RURAL LIBRARY DISTRICT - 37 JADE STREET - WALLA WALLA, WA 99362	32-0164475		16,753.	0.			PROGRAM SUPPORT
TEO CASTELLANOS D-PROJECTS PO BOX 557845 MIAMI, FL 33255	20-4338383		16,700.	0.			PROGRAM SUPPORT
WOODGATE, LLC 9309 COLLINS AVENUE APT 8 SURFSIDE, FL 33154	37-1760666		16,189.	0.			PROGRAM SUPPORT
EAST SIDE FREEDOM LIBRARY 1105 GREENBRIER STREET SAINT PAUL, MN 55106	46-3794535		16,000.	0.			PROGRAM SUPPORT
UNIVERSITY OF WYNWOOD 9825 NE 2ND AVENUE, #530249 MIAMI SHORES, FL 33153	27-2502614		16,000.	0.			PROGRAM SUPPORT
WINDWARD FUND 1201 CONNECTICUT AVENUE NW WASHINGTON, DC 20036	47-3522162		15,978.	0.			PROGRAM SUPPORT
LOCUST PROJECTS, INC. 3852 NORTH MIAMI AVENUE MIAMI, FL 33127	65-1134780		15,750.	0.			PROGRAM SUPPORT
THE UNIVERSITY OF PUGET SOUND 1500 N WARNER STREET, #1021 TACOMA, WA 98416-1021	91-0564961		15,634.	0.			PROGRAM SUPPORT
CITY OF MIAMI SPRINGS 201 WESTWARD DRIVE MIAMI SPRINGS, FL 33166	59-6000374		15,600.	0.			PROGRAM SUPPORT

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**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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KENNESAW STATE UNIVERSITY FOUNDATION, INC. - 904 BARTON WOODS RD - ATLANTA, GA 30307	23-7034345		15,584.	0.			PROGRAM SUPPORT
GRANADA PRESBYTERIAN CHURCH 950 UNIVERSITY DRIVE CORAL GABLES, FL 33134	59-0760211		15,550.	0.			PROGRAM SUPPORT
LEGAL SERVICES OF GREATER MIAMI, INC. - 4343 WEST FLAGLER STREET, SUITE 100 - MIAMI, FL 33134	591227481		15,500.	0.			PROGRAM SUPPORT
UNIVERSITY OF VIRGINIA LAW SCHOOL FOUNDATION - 580 MASSIE ROAD - CHARLOTTESVILLE, VA 22903-1738	54-0838566		15,500.	0.			PROGRAM SUPPORT
NEW MEXICO COMMUNITY FOUNDATION 135 W. PALACE AVE. STE 301 SANTA FE, NM 87501	85-0311210		15,464.	0.			PROGRAM SUPPORT
SUMMIT ARTSPACE 140 E MARKET STREET AKRON, OH 44308	34-1841587		15,366.	0.			PROGRAM SUPPORT
TAMPA GENERAL HOSPITAL FOUNDATION, INC. - PO BOX 1289 - TAMPA, FL 33601-1289	23-7354477		15,250.	0.			PROGRAM SUPPORT
RUBBER CITY SHAKESPEARE COMPANY PO BOX 3991 AKRON, OH 44314	47-2484892		15,221.	0.			PROGRAM SUPPORT
BIG BROTHERS BIG SISTERS OF GREATER MIAMI, INC. - 550 NORTHWEST 42ND AVENUE - MIAMI, FL 33126	596166904		15,151.	0.			PROGRAM SUPPORT

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ARIZONA CENTER FOR INVESTIGATIVE REPORTING - PO BOX 3665 - PHOENIX, AZ 85030-3665	46-1209940		15,146.	0.			PROGRAM SUPPORT
THE POSSE FOUNDATION, INC. 1101 BRICKELL AVENUE SUITE 1000N MIAMI, FL 33131	133840394		15,050.	0.			PROGRAM SUPPORT
ARIZONA STATE UNIVERSITY FOR A NEW AMERICAN UNIVERSITY - P.O. BOX 2260, - TEMPE, AZ 85280	86-6051042		15,000.	0.			PROGRAM SUPPORT
BLANCHARD COMMUNITY LIBRARY 119 N 8TH STREET SANTA PAULA, CA 93060	95-2544347		15,000.	0.			PROGRAM SUPPORT
CITY OF MOUNT VERNON 315 SNOQUALMIE STREET MOUNT VERNON, WA 98273	91-6001260		15,000.	0.			PROGRAM SUPPORT
COUNTY OF BUTTE 1820 MITCHELL AVENUE OROVILLE, CA 95966	94-6000506		15,000.	0.			PROGRAM SUPPORT
UNIVERSITY OF NORTH CAROLINA AT CHARLOTTE - OFFICE OF GRANTS, 9201 UNIVERSITY CITY BOULEVARD - CHARLOTTE, NC 28223	56-0791228		15,000.	0.			PROGRAM SUPPORT
ACCION EAST INC. 80 MAIDEN LANE, SUITE 903 NEW YORK, NY 10038	11-3317234		15,000.	0.			PROGRAM SUPPORT
ACLU FOUNDATION OF PENNSYLVANIA P.O. BOX 60173 PHILADELPHIA, PA 19102	23-1742013		15,000.	0.			PROGRAM SUPPORT

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AFFIRMING YOUTH FOUNDATION, INC. 150 NW 79TH STREET SUITE 342 MIAMI, FL 33150	45-4821954		15,000.	0.			PROGRAM SUPPORT
ALLIANCE FOR YOUTH ORGANIZING 8325 NE 2ND AVE SUITE 205 MIAMI, FL 33138	46-2465621		15,000.	0.			PROGRAM SUPPORT
ART CREATES US 601 WEST 26TH STREET SUITE 325 NEW YORK CITY, NY 10001	46-1518061		15,000.	0.			PROGRAM SUPPORT
BEACHES EMERGENCY ASSISTANCE MINISTRY - 850 6TH AVENUE SOUTH SUITE 400 - JACKSONVILLE BEACH, FL 32250	59-2564222		15,000.	0.			PROGRAM SUPPORT
COMMUNITY JUSTICE PROJECT 3000 BISCAYNE BOULEVARD, #106 MIAMI, FL 33137	47-2777185		15,000.	0.			PROGRAM SUPPORT
EQUALITY FLORIDA INSTITUTE, INC. P.O. BOX 13184 ST. PETERSBURG, FL 33733	59-3435235		15,000.	0.			PROGRAM SUPPORT
EXCHANGE FOR CHANGE 2103 CORAL WAY, SUITE 202 MIAMI, FL 33145	47-1315317		15,000.	0.			PROGRAM SUPPORT
FARMWORKER SELF-HELP, INC. 37240 LOCK STREET DADE CITY, FL 33523	59-2382744		15,000.	0.			PROGRAM SUPPORT
FEATHERSTONE CENTER FOR THE ARTS, INC. - P.O. BOX 1145 - OAK BLUFFS, MA 02557	04-2725296		15,000.	0.			PROGRAM SUPPORT

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FLIPANY 819 NE 26TH ST., BUILDING K FT. LAUDERDALE, FL 33305	87-0743538		15,000.	0.			PROGRAM SUPPORT
FLORIDA IMMIGRANT COALITION, INC. 2800 BISCAYNE BLVD., SUITE 800 MIAMI, FL 33137	20-2123833		15,000.	0.			PROGRAM SUPPORT
GREAT LAKES CHAMBER MUSIC FESTIVAL OPERATING CORPORATION - 24901 NORTHWESTERN HIGHWAY SUITE 312 - SOUTHFIELD, MI 48075	20-1106153		15,000.	0.			PROGRAM SUPPORT
HOLLYWOOD ART AND CULTURE CENTER, INC. - 1650 HARRISON STREET - HOLLYWOOD, FL 33020-6806	59-1951668		15,000.	0.			PROGRAM SUPPORT
LEADERS BY EMPOWERMENT - ACTIVIST BY DEVELOPMENT - 4900 W HALLANDALE BEACH BOULEVARD - PEMBROKE PARK, FL 33023-4289	20-4996561		15,000.	0.			PROGRAM SUPPORT
MIAMI BAYSIDE FOUNDATION 25 SE 2 AVENUE, SUITE 240 MIAMI, FL 33131	59-2834504		15,000.	0.			PROGRAM SUPPORT
MS HOPE FOR A CURE, INC. 2250 BROADWAY SUITE 15D NEW YORK, NY 10024	20-8500232		15,000.	0.			PROGRAM SUPPORT
MUSIC FOR MINDS, INC. 9 DELA PARK LANE NORTH EASTON, MA 02356	81-5273498		15,000.	0.			PROGRAM SUPPORT
PIANO INTERNATIONAL ASSOCIATION OF NORTHERN OHIO - 20600 CHAGRIN BOULEVARD, SUITE 1110 - SHAKER HEIGHTS, OH 44122	34-1774615		15,000.	0.			PROGRAM SUPPORT

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SAFE SCHOOLS SOUTH FLORIDA, INC. P.O. BOX 24444 FORT LAUDERDALE, FL 33307	20-4993492		15,000.	0.			PROGRAM SUPPORT
SOUTH FLORIDA CENTER FOR PERCUSSIVE ARTS, INC. - 12600 SOUTHWEST 130TH STREET UNITS 9 & 10 - MIAMI, FL 33189	46-3517541		15,000.	0.			PROGRAM SUPPORT
SPECIAL OLYMPICS FLORIDA, INC. 155 SOUTH MIAMI AVENUE, SUITE 200 MIAMI, FL 33130	237181560		15,000.	0.			PROGRAM SUPPORT
TEMPLE ANSHE AMUNIM 26 BROAD STREET PITTSFIELD, MA 01201	04-2496149		15,000.	0.			PROGRAM SUPPORT
THE FLORIDA KEYS OUTREACH COALITION, INC - P.O. BOX 4767 - KEY WEST, FL 33041	50-0409898		15,000.	0.			PROGRAM SUPPORT
THE MIAMI COALITION FOR A SAFE AND DRUG FREE COMMUNITY, INC. - 5040 NW 7TH STREET SUITE #610 - MIAMI, FL 33126	65-0078686		15,000.	0.			PROGRAM SUPPORT
THE MOTIVATIONAL EDGE 2103 CORAL WAY, 2ND FLOOR MIAMI, FL 33145	262916391		15,000.	0.			PROGRAM SUPPORT
UNITED STATES SOCCER FEDERATION FOUNDATION INC - 1140 CONNECTICUT AVENUE NW, SUITE 1200 - WASHINGTON, DC 20036	363976313		15,000.	0.			PROGRAM SUPPORT
URBAN GREENWORKS 345 SW 32ND RD MIAMI, FL 33129	273974009		15,000.	0.			PROGRAM SUPPORT

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DOMINICAN-AMERICAN NATIONAL FOUNDATION INC. - 8501 SW 124 AVENUE - MIAMI, FL 33183	65-0167851		14,979.	0.			PROGRAM SUPPORT
SUPERHERO TRAINING ACADEMY 15086 DOLPHIN DETROIT, MI 48223	45-3619576		14,846.	0.			PROGRAM SUPPORT
FOUNDATION FOR PUERTO RICO, INC. 1511 AVENUE PONCE DE LEON SUITE K, SAN JUAN, PR 00909	66-0776227		14,690.	0.			PROGRAM SUPPORT
THE BLACK ARCHIVES HISTORY & RESEARCH FOUNDATION OF SF, INC. - 5400 NW 22 AVE., BLD C, STE 101 - MIAMI, FL 33142	59-1808272		14,596.	0.			PROGRAM SUPPORT
BOSTON SYMPHONY ORCHESTRA, INC. 301 MASSACHUSETTS AVENUE BOSTON, MA 02115	04-2103550		14,500.	0.			PROGRAM SUPPORT
CONNECTICUT HEALTH INVESTIGATIVE TEAM, INC. - 640 PROSPECT STREET - NEW HAVEN, CT 06511	46-1068891		14,065.	0.			PROGRAM SUPPORT
FORWARD WYOMING 121 E. GRAND AVENUE, SUITE 206 LARAMIE, WY 82070	47-3463195		14,000.	0.			PROGRAM SUPPORT
ESSEX COUNTY COMMUNITY FOUNDATION 175 ANDOVER STREET SUITE #101 DANVERS, MA 01923	04-3407816		13,538.	0.			PROGRAM SUPPORT
CRAIG NEWMARK GRADUATE SCHOOL OF JOURNALISM CUNY FOUNDATION - 162 WEST 56TH STREET - NEW YORK, NY 10019	46-5195587		13,500.	0.			PROGRAM SUPPORT

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GROUNDWORKS DANCETHEATER 3125 SHAKER SQUARE, SUITE 102 CLEVELAND, OH 44120	34-1856594		13,500.	0.			PROGRAM SUPPORT
THE MISSION CONTINUES 1141 SOUTH 7TH STREET ST. LOUIS, MO 63104	20-8742553		13,500.	0.			PROGRAM SUPPORT
TEMPLE BETH SHOLOM 4144 CHASE AVENUE MIAMI BEACH, FL 33140	59-0714828		13,250.	0.			PROGRAM SUPPORT
ST. JUDE CHILDREN'S RESEARCH HOSPITAL - P.O. BOX 2151 501 ST. JUDE PLACE - MEMPHIS, TN 38101	62-0646012		13,240.	0.			PROGRAM SUPPORT
HUMAN RIGHTS WATCH P.O. BOX 45-1406 MIAMI, FL 33245-1406	13-2875808		13,000.	0.			PROGRAM SUPPORT
OPA-LOCKA COMMUNITY DEVELOPMENT CORPORATION, INC. - 490 OPA-LOCKA BOULEVARD SUITE 20 - OPA-LOCKA, FL 33054	592106635		13,000.	0.			PROGRAM SUPPORT
ORB MEDIA, INC. 2609 KLINGLE ROAD NW WASHINGTON, DC 20008	45-3806445		12,982.	0.			PROGRAM SUPPORT
HIGH 10 MEDIA, LLC 62 W 45TH STREET, 4TH FLOOR NEW YORK, NY 10036	01-0974617		12,725.	0.			PROGRAM SUPPORT
UNIVERSITY OF MINNESOTA FOUNDATION 1954 BUFORD AVE. SUITE 325 ST. PAUL, MN 55108	41-6042488		12,710.	0.			PROGRAM SUPPORT

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365 MEDIA FOUNDATION, D/B/A MADISON365 - PO BOX 842 - MADISON, WI 53701	47-4608248		12,689.	0.			PROGRAM SUPPORT
A HOST OF PEOPLE, INC. 256 W GRAND BLVD DETROIT, MI 48216	46-3492862		12,602.	0.			PROGRAM SUPPORT
KENTUCKY CENTER FOR PUBLIC SERVICE JOURNALISM - 644 BRADDOCK COURT - EDGEWOOD, KY 41017	46-3464828		12,595.	0.			PROGRAM SUPPORT
INDIGENOUS MEDIA FREEDOM ALLIANCE 835 BIA ROUTE 20 HALLIDAY, N HALLIDAY, ND 58636	81-2100844		12,573.	0.			PROGRAM SUPPORT
AMPLIFYME 5808 ALTON ROAD MIAMI BEACH, FL 33140	41-2068809		12,500.	0.			PROGRAM SUPPORT
CENTER FOR HMONG ARTS AND TALENT C/O SAI CHANG 995 UNIVERSITY AVENUE, SUITE 220 - ST. PAUL, MN 55104	41-1771925		12,500.	0.			PROGRAM SUPPORT
HIGH 10 MEDIA, LLC 62 W 45TH STREET, 4TH FLOOR NEW YORK, NY 10036	01-0974617		12,500.	0.			PROGRAM SUPPORT
INFORMED FAMILIES / THE FLORIDA FAMILY PARTNERSHIP, INC. - 2490 CORAL WAY - MIAMI, FL 33145	59-2231894		12,500.	0.			PROGRAM SUPPORT
JEWISH COMMUNITY SERVICES OF SOUTH FLORIDA, INC. - 735 NE 125 STREET - NORTH MIAMI, FL 33161	590637867		12,500.	0.			PROGRAM SUPPORT

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LAWYERS FOR CHILDREN AMERICA, INC. 701 BRICKELL AVENUE SUITE 3300 MIAMI, FL 33131	06-1412355		12,500.	0.			PROGRAM SUPPORT
VILLAGE OF PINECREST 11000 RED ROAD PINECREST, FL 33156	65-0683228		12,500.	0.			PROGRAM SUPPORT
AIDS HEALTHCARE FOUNDATION 700 SE 3RD AVENUE, 4TH FLOOR FORT LAUDERDALE, FL 33316	95-4112121		12,470.	0.			PROGRAM SUPPORT
AKRON TOY & MARBLE COMPANY, LLC 577 MEGGLEN AVENUE AKRON, OH 44303	26-3721605		12,442.	0.			PROGRAM SUPPORT
FLORIDA KEYS COUNCIL OF THE ARTS 1100 SIMONTON STREET, SUITE 2-263 KEY WEST, FL 33040	65-0737532		12,254.	0.			PROGRAM SUPPORT
EDSOURCE, INC. 436 14TH STREET, SUITE #1005 OAKLAND, CA 94805	94-2434900		12,175.	0.			PROGRAM SUPPORT
INTERACTIVE INITIATIVE, INC. 945 SW 1 STREET, UNIT 209 FORT LAUDERDALE, FL 33312	81-2355503		12,175.	0.			PROGRAM SUPPORT
NEW WORLD SCHOOL OF THE ARTS / MDC FOUNDATION - 25 N.E. 2ND STREET - MIAMI, FL 33132	59-6169745		12,144.	0.			PROGRAM SUPPORT
4WARD MIAMI, INC. 421 NE 51 STREET MIAMI, FL 33137	47-4438607		12,119.	0.			PROGRAM SUPPORT

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FLORIDA STATE LEAGUE OF PROFESSIONAL BASEBALL CLUBS, INC. - 3000 GULF TO BAY BOULEVARD, - CLEARWATER, FL 33759	59-0248215		12,000.	0.			PROGRAM SUPPORT
FLORIDA PHILANTHROPIC NETWORK, INC. - 1211 NORTH WESTSHORE BOULEVARD SUITE 314 - TAMPA, FL 33607	20-1328734		11,900.	0.			PROGRAM SUPPORT
AMERICAN FRIENDS OF CONTEMPORARY ART - 1133 AVENUE OF THE AMERICAS - NEW YORK, NY 10036	47-1608241		11,727.	0.			PROGRAM SUPPORT
BLACK LABEL MOVEMENT 528 HENNEPIN AVENUE, SUITE 401 MINNEAPOLIS, MN 55403	20-8637269		11,685.	0.			PROGRAM SUPPORT
KIWANIS OF LITTLE HAVANA FOUNDATION, INC. - 1400 SW 1ST STREET - MIAMI, FL 33135	65-0093807		11,650.	0.			PROGRAM SUPPORT
DETROIT SYMPHONY ORCHESTRA 3711 WOODWARD AVE DETROIT, MI 48201	38-1385132		11,500.	0.			PROGRAM SUPPORT
THE SCREENING ROOM 2626 NW 2ND AVE MIAMI, FL 33127	65-0306598		11,409.	0.			PROGRAM SUPPORT
AMERICAN NICARAGUAN FOUNDATION 848 BRICKELL AVENUE MIAMI, FL 33131	65-0326517		11,400.	0.			PROGRAM SUPPORT
UPSTATEMENT, LLC 133 PORTLAND STREET, 4TH FLOOR BOSTON, MA 02114-1707	26-2311755		11,316.	0.			PROGRAM SUPPORT

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YOUNG NATION 9232 FALCON STREET DETROIT, MI 48209	26-2296175		11,305.	0.			PROGRAM SUPPORT
NEW HAMPSHIRE CENTER FOR PUBLIC INTEREST JOURNALISM - 38 EDGEWATER DRIVE - BARRINGTON, NH 03825	81-2266973		11,235.	0.			PROGRAM SUPPORT
CINEMA LAMONT 24010 ITHACA STREET OAK PARK, MI 48237	82-0824909		11,024.	0.			PROGRAM SUPPORT
ASSOCIATION OF EXCHANGE AND DEVELOPMENT OF ACTIVITIES AND PA - P.O. BOX 566235 - MIAMI, FL 33256	22-3965455		11,000.	0.			PROGRAM SUPPORT
FAMILY & CHILDREN FAITH COALITION, INC. D/B/A HOPE FOR MIAMI - 550 NW 42ND AVENUE - MIAMI, FL 33126	651003163		11,000.	0.			PROGRAM SUPPORT
NATIONAL TROPICAL BOTANICAL GARDEN 4013 SOUTH DOUGLAS ROAD COCONUT GROVE, FL 33133	52-6057064		11,000.	0.			PROGRAM SUPPORT
NOTRE DAME D'HAITI CATHOLIC CHURCH 110 NE 62ND STREET MIAMI, FL 33138	65-0909504		11,000.	0.			PROGRAM SUPPORT
WHAT PIPELINE LLC 3525 W. VERNOR HIGHWAY DETROIT, MI 48216	46-2623321		10,997.	0.			PROGRAM SUPPORT
THE HUMMEL REPORT P.O. BOX 2412 PROVIDENCE, RI 02906	27-1082213		10,415.	0.			PROGRAM SUPPORT

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CAMPUS CRUSADE FOR CHRIST, INC. ATTN: CONTRIBUTIONS P.O. BOX 628222 ORLANDO, FL 32862-8222	95-6006173		10,369.	0.			PROGRAM SUPPORT
MIAMI COUNCIL FOR INTERNATIONAL VISITORS DBA GLOBAL TIES MIA - 2850 DOUGLAS ROAD, SUITE 305 - CORAL GABLES, FL 33134	59-6153212		10,350.	0.			PROGRAM SUPPORT
UNITED STATES FUND FOR UNICEF 125 MAIDEN LANE NEW YORK, NY 10038	13-1760110		10,191.	0.			PROGRAM SUPPORT
AMIKIDS MIAMI-DADE, INC. 1820 ARTHUR LAMB JUNIOR ROAD MIAMI, FL 33149	23-7440836		10,187.	0.			PROGRAM SUPPORT
TRACE MEDIA, INC. 195 MONTAGUE STREET BROOKLYN, NY 11201	47-4175513		10,177.	0.			PROGRAM SUPPORT
THE ASCAP FOUNDATION, INC. 1900 BROADWAY NEW YORK, NY 10023	51-0181769		10,133.	0.			PROGRAM SUPPORT
CHAPMAN PARTNERSHIP INC. 1550 NORTH MIAMI AVENUE MIAMI, FL 33136	65-0425069		10,082.	0.			PROGRAM SUPPORT
AMIGOS TOGETHER FOR KIDS, INC. 801 S.W. 3RD AVENUE MIAMI, FL 33130	65-0361629		10,000.	0.			PROGRAM SUPPORT
BEST BUDDIES INTERNATIONAL, INC. 100 SOUTHEAST 2ND STREET MIAMI, FL 33131	52-1614576		10,000.	0.			PROGRAM SUPPORT

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BROWARD EDUCATION FOUNDATION, INC. 600 SOUTHEAST THIRD AVENUE FORT LAUDERDALE, FL 33301	59-2359433		10,000.	0.			PROGRAM SUPPORT
CAMILLUS HOUSE, INC. 336 NW 5TH STREET MIAMI, FL 33128	65-0032862		10,000.	0.			PROGRAM SUPPORT
DAN MARINO FOUNDATION, INC. 1063 SHOTGUN ROAD SUNRISE, FL 33326	65-0320556		10,000.	0.			PROGRAM SUPPORT
GLORIA M SILVERIO FOUNDATION 6801 NW 77TH AVENUE, SUITE 404 MIAMI, FL 33166-2851	65-1075409		10,000.	0.			PROGRAM SUPPORT
HONOR FLIGHT SOUTH FLORIDA, INC 3000 NE 30TH PLACE FORT LAUDERDALE, FL 33306	46-2939611		10,000.	0.			PROGRAM SUPPORT
HOUSE AQUEMINI 20001 STRATFORD DETROIT, MI 48221	82-1801086		10,000.	0.			PROGRAM SUPPORT
JOHANNE RAHAMAN PHOTOGRAPHY, LLC 1255 COLLINS AVENUE MIAMI BEACH, FL 33139	82-4823152		10,000.	0.			PROGRAM SUPPORT
LAUREN'S KIDS 18851 NE 29TH AVE., STE. # 1010 AVENTURA, FL 33180	26-1252588		10,000.	0.			PROGRAM SUPPORT
MIAMI CHILDREN'S MUSEUM, INC. 980 MACARTHUR CAUSEWAY MIAMI, FL 33132	59-2396999		10,000.	0.			PROGRAM SUPPORT

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**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MIAMI LIGHTHOUSE FOR THE BLIND & VISUALLY IMPAIRED, INC. - 601 SW 8TH AVENUE - MIAMI, FL 33130	59-0637847		10,000.	0.			PROGRAM SUPPORT
NAISMITH MEMORIAL BASKETBALL HALL OF FAME - 1000 HALL OF FAME AVENUE - SPRINGFIELD, MA 01105	04-6128892		10,000.	0.			PROGRAM SUPPORT
THE WOMENS BREAST & HEART INITIATIVE, FLORIDA AFFILIATE, INC - 14125 NW 80TH AVENUE - MIAMI LAKES, FL 33016	56-2540735		10,000.	0.			PROGRAM SUPPORT
UDONIS HASLEM CHILDREN FOUNDATION, INC. - 6637 BOXWOOD DRIVE - MIRAMAR, FL 33023	20-3303133		10,000.	0.			PROGRAM SUPPORT
UNITED WAY OF MIAMI-DADE, INC. 3250 SW 3RD AVENUE MIAMI, FL 33129	59-0830840		10,000.	0.			PROGRAM SUPPORT
UNIVERSITY OF MIAMI SYLVESTER COMPREHENSIVE CANCER CENTER - PO BOX 016960 (M867) - MIAMI, FL 33101	59-0624458		10,000.	0.			PROGRAM SUPPORT
URBAN HEALTH PARTNERSHIPS, INC. 425 NE 22 STREET MIAMI, FL 33137	45-3332540		10,000.	0.			PROGRAM SUPPORT
VOICES FOR CHILDREN FOUNDATION, INC. - 1500 NORTHWEST 12TH AVENUE - MIAMI, FL 33136	59-2746076		10,000.	0.			PROGRAM SUPPORT
WE THE BEST FOUNDATION, INC. 3000 MARCUS AVENUE LAKE SUCCESS, NY 11042	82-4131208		10,000.	0.			PROGRAM SUPPORT

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YOUNG AT ART OF BROWARD, INC. 751 SW 121ST AVENUE DAVIE, FL 33325	59-2832971		10,000.	0.			PROGRAM SUPPORT
AMERICAN CIVIL LIBERTIES UNION FOUNDATION OF FLORIDA, INC. - 4343 WEST FLAGLER STREET SUITE 400 - MIAMI, FL 33134	23-7137529		10,000.	0.			PROGRAM SUPPORT
AMERICAN FRIENDS OF THE LUDWIG FOUNDATION OF CUBA - 4 WEST 43RD STREET, SUITE 304 - NEW YORK, NY 10036	13-4100310		10,000.	0.			PROGRAM SUPPORT
AMERICAN FRIENDS SERVICE COMMITTEE 1175 NE 125TH STREET, SUITE 417 NORTH MIAMI, FL 33161	23-1352010		10,000.	0.			PROGRAM SUPPORT
AMERICAN HUMANE 1400 16TH STREET NW, SUITE 360 WASHINGTON, DC 20036	84-0432950		10,000.	0.			PROGRAM SUPPORT
ARTURO SANDOVAL INSTITUTE 1049 HAVENHURST DRIVE SUITE 274 WEST HOLLYWOOD, CA 90046	45-2666718		10,000.	0.			PROGRAM SUPPORT
BERWICK ACADEMY TRUSTEES 31 ACADEMY STREET SOUTH BERWICK, ME 03908	01-0223755		10,000.	0.			PROGRAM SUPPORT
BLACK PROFESSIONALS NETWORK 3926 SW 52ND AVE #3 PEMBROKE PARK, FL 33023	81-5018035		10,000.	0.			PROGRAM SUPPORT
BOYS AND GIRLS CLUBS OF MIAMI-DADE, INC. - PO BOX 330219 - MIAMI, FL 33233-0219	590879227		10,000.	0.			PROGRAM SUPPORT

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CAREYES FOUNDATION 10850 WILSHIRE BOULEVARD, 1ST FLOOR LOS ANGELES, CA 90024	46-0759245		10,000.	0.			PROGRAM SUPPORT
CHARLOTTESVILLE FREE CLINIC 1138 ROSE HILL DRIVE CHARLOTTESVILLE, VA 22903	54-1610405		10,000.	0.			PROGRAM SUPPORT
COALITION OF IMMOKALEE WORKERS P.O. BOX 603 IMMOKALEE, FL 34143	65-0641010		10,000.	0.			PROGRAM SUPPORT
CONGREGATION ETZ CHAIM, INC. 1190 INDIAN HILLS PARKWAY MARIETTA, GA 30068	58-1245765		10,000.	0.			PROGRAM SUPPORT
COUNCIL ON FOUNDATIONS 1828 L STREET NW SUITE 300 WASHINGTON, DC 20036	13-6068327		10,000.	0.			PROGRAM SUPPORT
DUKE UNIVERSITY BOX 90581 DURHAM, NC 27708	56-0532129		10,000.	0.			PROGRAM SUPPORT
EDUCATE TOMORROW 1717 NORTH BAYSHORE DRIVE SUITE 203 MIAMI, FL 33132	51-0493526		10,000.	0.			PROGRAM SUPPORT
FAIRCHILD PALMS CORP 2841 SW 117TH AVENUE MIAMI, FL 33175	26-3178682		10,000.	0.			PROGRAM SUPPORT
FARM SHARE, INC. 14125 SW 320TH STREET HOMESTEAD, FL 33033-5539	65-0342192		10,000.	0.			PROGRAM SUPPORT

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FLORIDA LITERACY COALITION 235 S. MAITLAND AVENUE, SUITE 102 MAITLAND, FL 32751	59-2588924		10,000.	0.			PROGRAM SUPPORT
FLORIDA STATE UNIVERSITY FOUNDATION, INC. - P.O. BOX 2062739 - TALLAHASSEE, FL 32306-2739	59-6152180		10,000.	0.			PROGRAM SUPPORT
FREEDOM FUND NETWORK, INC. 3000 RIOMAR STREET SUITE 707 FORT LAUDERDALE, FL 33304	82-2069282		10,000.	0.			PROGRAM SUPPORT
FRIENDS OF CARITAS CUBANA CORPORATION - 81 WASHINGTON AVENUE - CAMBRIDGE, MA 02140	20-3023256		10,000.	0.			PROGRAM SUPPORT
GIRL SCOUT COUNCIL OF TROPICAL FLORIDA, INC. - 11347 SW 160TH STREET - MIAMI, FL 33157	59-0651087		10,000.	0.			PROGRAM SUPPORT
HISPANIC FEDERATION 55 EXCHANGE PLACE, 5TH FLOOR NEW YORK, NY 10005	13-3573852		10,000.	0.			PROGRAM SUPPORT
HOPE COMMUNITY CENTER, INC. 800 SOUTH HAWTHORNE AVENUE APOPKA, FL 32703	56-2551312		10,000.	0.			PROGRAM SUPPORT
JAMES MUSEUM OF WESTERN ART 150 CENTRAL AVENUE ST. PETERSBURG, FL 33701	47-4364053		10,000.	0.			PROGRAM SUPPORT
JEWISH NATIONAL FUND INC. 42 EAST 69TH STREET NEW YORK, NY 10021	13-1659627		10,000.	0.			PROGRAM SUPPORT

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JUNIOR ACHIEVEMENT OF SOUTH FLORIDA, INC. - 1130 COCONUT CREEK BOULEVARD - COCONUT CREEK, FL 33066	59-0871446		10,000.	0.			PROGRAM SUPPORT
KIKI'S PLACE OF CARE AND KINDNESS P.O. BOX 560584 MIAMI, FL 33256	82-2384471		10,000.	0.			PROGRAM SUPPORT
MAHOGANY YOUTH CORPORATION 1060 NW 85TH STREET MIAMI, FL 33150	65-0775388		10,000.	0.			PROGRAM SUPPORT
MAVEN LEADERSHIP COLLECTIVE 1951 NW 7TH AVENUE SUITE 600 MIAMI, FL 33136	81-3828531		10,000.	0.			PROGRAM SUPPORT
MEGAN COTTLE 6855 RED ROAD SUITE 600 CORAL GABLES, FL 33143-3632	59-1923401		10,000.	0.			PROGRAM SUPPORT
MIAMI DADE URBAN DEBATE LEAGUE (MDUDL) - 200 S. MICHIGAN AVE, SUITE 1040 - CHICAGO, IL 60604	20-4323096		10,000.	0.			PROGRAM SUPPORT
MIAMI FINANCE FORUM, INC. PO BOX 398627 MIAMI BEACH, FL 33239	39-2075094		10,000.	0.			PROGRAM SUPPORT
MIAMI VETERINARY FOUNDATION 751 NE 168TH STREET NORTH MIAMI BEACH, FL 33162	59-1911775		10,000.	0.			PROGRAM SUPPORT
MONTESSORI DEVELOPMENT PARTNERSHIPS - 975 EAST BOULEVARD - CLEVELAND, OH 44108	34-1658439		10,000.	0.			PROGRAM SUPPORT

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MUSEUM OF CONTEMPORARY ART, INC. 770 NE 125TH STREET NORTH MIAMI, FL 33161	59-2085261		10,000.	0.			PROGRAM SUPPORT
OPERATION PAW INC. 929 NW 49 STREET MIAMI, FL 33127	465405193		10,000.	0.			PROGRAM SUPPORT
OUTDOOR ALLIANCE 1602 L STREET, NW SUITE 600 WASHINGTON, DC 20036	46-3272914		10,000.	0.			PROGRAM SUPPORT
OVERTOWN OPTIMIST CLUB, INC P.O. BOX 12895 MIAMI, FL 33101	81-0990745		10,000.	0.			PROGRAM SUPPORT
PACE CENTER FOR GIRLS, INC. 1400 NW 36 STREET SUITE #200 MIAMI, FL 33142	59-2414492		10,000.	0.			PROGRAM SUPPORT
RANSOM EVERGLADES MIDDLE SCHOOL 2045 SOUTH BAYSHORE DRIVE COCONUT GROVE, FL 33133	59-0659070		10,000.	0.			PROGRAM SUPPORT
REBUILDING TOGETHER MIAMI-DADE, INC. - 1390 SOUTH DIXIE HIGHWAY SUITE 2123 - MIAMI, FL 33146	65-0424304		10,000.	0.			PROGRAM SUPPORT
RECTOR & VISITORS AT THE UNIVERSITY OF VIRGINIA - MAXINE PLATZER LYNN WOMEN'S CENTER P.O. BOX 800588 - CHARLOTTESVILLE, VA	54-6001796		10,000.	0.			PROGRAM SUPPORT
SAVE FOUNDATION, INC. 1951 NW 7TH AVENUE, SUITE 600 MIAMI, FL 33136	650836881		10,000.	0.			PROGRAM SUPPORT

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SEATTLE PARKS FOUNDATION 105 S. MAIN STREET, SUITE 235 SEATTLE, WA 98104	91-1998597		10,000.	0.			PROGRAM SUPPORT
SHERIFF'S MEADOW FOUNDATION P.O. BOX 1088 VINEYARD HAVEN, MA 02568	04-6111529		10,000.	0.			PROGRAM SUPPORT
STARS AUTISM SCHOOLS FOUNDATION, INC. - 10870 SW 113 PLACE - MIAMI, FL 33176	47-3343728		10,000.	0.			PROGRAM SUPPORT
STEVEN SCHWARTZBERG FOUNDATION, INC. - 4 W. RED OAK LANE, SUITE 201 - WHITE PLAINS, NY 10604	26-2415050		10,000.	0.			PROGRAM SUPPORT
STRUGGLE FOR MIAMIS AFFORDABLE AND SUSTAINABLE HOUSING, INC. - 2103 CORAL WAY 2ND FLOOR - MIAMI, FL 33145	81-0878478		10,000.	0.			PROGRAM SUPPORT
SURVIVORS PATHWAY CORPORATION 1801 CORAL WAY, SUITE 328 MIAMI, FL 33134	80-0796422		10,000.	0.			PROGRAM SUPPORT
THE CHILDREN'S VOICE CHORUS, INC. 14401 OLD CUTLER ROAD PALMETTO BAY, FL 33158	45-3116753		10,000.	0.			PROGRAM SUPPORT
THE WARMING HOUSE 4001 BRYANT AVENUE SOUTH MINNEAPOLIS, MN 55409	32-0473172		10,000.	0.			PROGRAM SUPPORT
THOMAS ARMOUR YOUTH BALLET, INC. 5818 SW 73RD STREET MIAMI, FL 33143	596163957		10,000.	0.			PROGRAM SUPPORT

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UNIVERSITY SCHOOL OF MILWAUKEE CORPORATION - 2100 WEST FAIRY CHASM ROAD - MILWAUKEE, WI 53217	39-6076442		10,000.	0.			PROGRAM SUPPORT
WELLSPRING COUNSELING, INC. 14401 OLD CUTLER RD. PALMETTO BAY, FL 33158	27-0979279		10,000.	0.			PROGRAM SUPPORT
WOMEN OF TOMORROW MENTOR AND SCHOLARSHIP PROGRAM, INC. - 8400 NW 39TH STREET SUITE 450 - DORAL, FL 33166	65-0862995		10,000.	0.			PROGRAM SUPPORT
YES INSTITUTE 5275 SUNSET DRIVE SOUTH MIAMI, FL 33143-5919	65-0646667		10,000.	0.			PROGRAM SUPPORT
JOHANNE RAHAMAN PHOTOGRAPHY 1255 COLLINS AVE APT 606 MIAMI BEACH, FL 33139	82-4823152		9,973.	0.			PROGRAM SUPPORT
CARNIVAL FULL OF FITNESS, INC. 17130 NW 10TH COURT MIAMI, FL 33169	46-0790942		9,960.	0.			PROGRAM SUPPORT
UNIVERSITY PRESS OF FLORIDA 15 NW 15TH STREET GAINESVILLE, FL 32606	59-6002052		9,900.	0.			PROGRAM SUPPORT
LEASON ELLIS, LLP ONE BARKER AVENUE, 5TH FLOOR WHITE PLAINS, NY 10601	26-2324626		9,572.	0.			PROGRAM SUPPORT
MIAMI GAY AND LESBIAN FILM FESTIVAL, INC. - P.O. BOX 530280 - MIAMI, FL 33153-0280	65-0830266		9,500.	0.			PROGRAM SUPPORT

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GRASSROOTS GRANTMAKERS P.O. BOX 88871 INDIANAPOLIS, IN 46208	27-1380459		9,471.	0.			PROGRAM SUPPORT
BRANDEIS UNIVERSITY 415 SOUTH ST. WALTHAM, MA 02454	04-2103552		9,440.	0.			PROGRAM SUPPORT
GLADES COMMUNITY MEDIA PARTNERSHIP LLC - 1511B W. 10TH STREET - AUSTIN, TX 78723	81-3611526		9,400.	0.			PROGRAM SUPPORT
AUTISM SPEAKS, INC. 2 PARK AVENUE NEW YORK, NY 10016	20-2329938		9,237.	0.			PROGRAM SUPPORT
JACKIE ROBINSON FOUNDATION, INC. 75 VARICK STREET, 2ND FLOOR NEW YORK, NY 10013	13-2896345		9,200.	0.			PROGRAM SUPPORT
MIAMI BEACH GAY PRIDE, INC. 1130 WASHINGTON AVENUE, FIRST FLOOR NORTH - MIAMI BEACH, FL 33139	45-4757086		9,100.	0.			PROGRAM SUPPORT
FLORIDA HEALTH JUSTICE PROJECT, INC. - 3793 IRVINGTON AVENUE - MIAMI, FL 33133	82-3397515		9,036.	0.			PROGRAM SUPPORT
NATIONAL LGBTQ TASK FORCE FOUNDATION - 801 ARTHUR GODFREY ROAD SUITE 402 - MIAMI BEACH, FL 33140	52-1624852		9,000.	0.			PROGRAM SUPPORT
GEORGETOWN UNIVERSITY 305 P ICC 37TH AND O STREET WASHINGTON, DC 20057	53-0196603		8,900.	0.			PROGRAM SUPPORT

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MIAMI RESCUE MISSION, INC. 3553 NW 50TH STREET MIAMI, FL 33124	591743865		8,842.	0.			PROGRAM SUPPORT
SHRINERS HOSPITAL FOR CHILDREN 2900 NORTH ROCKY POINT DRIVE TAMPA, FL 33607	36-2193608		8,788.	0.			PROGRAM SUPPORT
ANCHOR ARTS MANAGEMENT, INC. 2159 NE 122ND STREET NOTH MIAMI, FL 33181	20-0116582		8,725.	0.			PROGRAM SUPPORT
MILITARY ORDER OF THE WORLD WARS 435 NORTH LEE STREET ALEXANDRIA, VA 22314	53-0109990		8,691.	0.			PROGRAM SUPPORT
AMERICAN RED CROSS GREATER MIAMI & THE KEYS - 335 SW 27TH AVENUE - MIAMI, FL 33135	53-0196605		8,691.	0.			PROGRAM SUPPORT
WAUSAU PILOT AND REVIEW CORPORATION - 602 RUDER ST. - WAUSAU, WI 54403	81-4399324		8,590.	0.			PROGRAM SUPPORT
TRUSTEES OF COLUMBIA UNIVERSITY IN THE CITY OF NEW YORK - 622 WEST 113 STREET MAIL CODE: 4524 - NEW YORK, NY 10025	13-5598093		8,500.	0.			PROGRAM SUPPORT
THE AUSTIN BULLDOG PO BOX 4400 AUSTIN, TX 78765	27-0231463		8,422.	0.			PROGRAM SUPPORT
INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS FOUNDATION - 1750 NEW YORK AVENUE, NW - WASHINGTON, DC 20006	61-1629460		8,333.	0.			PROGRAM SUPPORT

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CHILDREN'S HOSPITAL CORPORATION D/B/A - 401 PARK DRIVE, SUITE 602 - BOSTON, MA 02215	04-2774441		8,330.	0.			PROGRAM SUPPORT
CORPUS ART, INC. 3703 CICOTTE STREET DETROIT, MI 48210	47-1275896		8,222.	0.			PROGRAM SUPPORT
NOWCASTSA 600 SOLEDAD STREET, 6TH FLOOR SAN ANTONIO, TX 78205	90-0585154		8,145.	0.			PROGRAM SUPPORT
BACK TO BASICS, INC. 2494 N.W. 25TH STREET BOCA RATON, FL 33431	20-2880950		8,063.	0.			PROGRAM SUPPORT
BOCA RATON MUSEUM OF ART, INC. 501 PLAZA REAL MIZNER PARK BOCA RATON, FL 33432	59-6019851		8,000.	0.			PROGRAM SUPPORT
JAR OF HEARTS, INC. 13040 SW 6TH STREET MIAMI, FL 33184	82-0698264		8,000.	0.			PROGRAM SUPPORT
JEWISH AGENCY FOR ISRAEL - NORTH AMERICAN COUNCIL - 633 3RD AVENUE, 21ST FLOOR - NEW YORK, NY 10017	23-0053483		8,000.	0.			PROGRAM SUPPORT
JEWISH FEDERATION OF THE BERKSHIRES, INC. - 196 SOUTH STREET - PITTSFIELD, MA 01201	04-2131409		8,000.	0.			PROGRAM SUPPORT
WLRN 172 NE 15 STREET MIAMI, FL 33132	23-7365001		8,000.	0.			PROGRAM SUPPORT

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TESTA ENTERPRISES, INC. 2335 SECOND STREET CUYAHOGA FALLS, OH 44221	34-1264756		7,824.	0.			PROGRAM SUPPORT
DYNAMIC COMMUNITY DEVELOPMENT CORPORATION - 3550 BISCAYNE BOULEVARD - MIAMI, FL 33137	65-0984762		7,770.	0.			PROGRAM SUPPORT
MOUNTAIN INDEPENDENT P.O. BOX 1289 TELLURIDE, CO 81435	47-2546984		7,565.	0.			PROGRAM SUPPORT
CITY THEATRE, INC. P.O. BOX 490083 MIAMI, FL 33149	65-0642183		7,500.	0.			PROGRAM SUPPORT
NATIONAL PUBLIC RADIO, INC. 635 MASSACHUSETTS AVE NW WASHINGTON, DC 20001	52-0907625		7,500.	0.			PROGRAM SUPPORT
REVASAN, LLC 9480 NE 2ND AVENUE #28 MIAMI, FL 33138	81-2489801		7,500.	0.			PROGRAM SUPPORT
ROMANTICAL, LLC 9226 CHELSEA DRIVE NORTH PLANTATION, FL 33324	46-0733343		7,500.	0.			PROGRAM SUPPORT
THIRD HORIZON MEDIA, LLC 2839 FUNSTON STREET HOLLYWOOD, FL 33020	41-2214660		7,500.	0.			PROGRAM SUPPORT
UNIVERSITY OF MIAMI - SCHOOL OF EDUCATION - DEPARTMENT OF TEACHING & LEARNING P. O. BOX 248065 - CORAL GABLES, FL 33124	59-0624458		7,500.	0.			PROGRAM SUPPORT

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CITRUS HEALTH NETWORK, INC. 4175 WEST 20TH AVENUE HIALEAH, FL 33012-5875	591865751		7,500.	0.			PROGRAM SUPPORT
CLEVELAND ORCHESTRA MIAMI 11001 EUCLID AVENUE CLEVELAND, OH 41006	20-5196415		7,500.	0.			PROGRAM SUPPORT
OLEK NYC, LLC 581 3RD AVENUE BROOKLYN, NY 11215	46-5161488		7,500.	0.			PROGRAM SUPPORT
CEDRIC TAI 604 BRITTANIA STREET LOS ANGELES, CA 90007	82-4813982		7,464.	0.			PROGRAM SUPPORT
5000 ROLE MODELS OF EXCELLENCE PROJECT INC. - SCHOOL BOARD ADMINISTRATION BUILDING 1450 NE 2ND AVENUE, ROOM 227 - MIAMI, FL	650575014		7,250.	0.			PROGRAM SUPPORT
NEW MEXICO IN DEPTH, INC. 6397 MERLOT DRIVE NE RIO RANCHO, NM 87144	454011138		7,213.	0.			PROGRAM SUPPORT
DETROIT RECORDINGS COMPANY 71 E. GARFIELD STREET SUITE 140A DETROIT, MI 48201	45-3478962		7,014.	0.			PROGRAM SUPPORT
THE LEUKEMIA & LYMPHOMA SOCIETY, INC. - 2859 PACES FERRY ROAD SE SUITE 725 - ATLANTA, GA 30339	13-5644916		7,000.	0.			PROGRAM SUPPORT
CNC (CUBAN AMERICAN NATIONAL COUNCIL, INC.) - 1223 SW 4 STREET - MIAMI, FL 33135	237269955		6,956.	0.			PROGRAM SUPPORT

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GLOW GIRLS LEADING OUR WORLD, INC. 6300 PIERCE STREET HOLLYWOOD, FL 33024	82-1158756		6,929.	0.			PROGRAM SUPPORT
WAYNE STATE UNIVERSITY 5401 CASS AVENUE DETROIT, MI 48202	38-6028429		6,900.	0.			PROGRAM SUPPORT
TRU RUTS, LLC PO BOX 21305 MINNEAPOLIS, MN 55421	47-5411254		6,900.	0.			PROGRAM SUPPORT
ENERGY NEWS NETWORK / FRESH ENERGY 408 SAINT PETER STREET, SUITE 220 SAINT PAUL, MN 55102	41-1735501		6,809.	0.			PROGRAM SUPPORT
BATON ROUGE AREA FOUNDATION 100 NORTH STREET SUITE 900 BATON ROUGE, LA 70802	72-6030391		6,600.	0.			PROGRAM SUPPORT
HOMEMADE MEDIA, LLC 1515 FORT STREET UNIT #731 LINCOLN PARK, MI 48146	81-0719690		6,532.	0.			PROGRAM SUPPORT
CENTER FOR MAINE CONTEMPORARY ART PO BOX 1767 21 WINTER STREET ROCKLAND, ME 04841	01-0282701		6,500.	0.			PROGRAM SUPPORT
SEEK FOUNDATION 515 EAST LAS OLAS BOULEVARD, SUITE FORT LAUDERDALE, FL 33301	46-1652355		6,466.	0.			PROGRAM SUPPORT
R STARS PROJECT, INC. 6538 COLLINS AVENUE, SUITE 354 MIAMI BEACH, FL 33141	46-5288448		6,408.	0.			PROGRAM SUPPORT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SCHECK HILLEL COMMUNITY SCHOOL, INC. - 19000 NE 25TH AVENUE - N. MIAMI BEACH, FL 33180	59-1296635		6,315.	0.			PROGRAM SUPPORT
SOS CHILDREN'S VILLAGE - FLORIDA, INC. - 3681 NW 59TH PLACE - COCONUT CREEK, FL 33073	65-0080301		6,188.	0.			PROGRAM SUPPORT
VIRTUAL COLLABORATION RESEARCH INC. - 273 WASHINGTON ST #2 - SOMERVILLE, MA 02143	81-5193338		6,150.	0.			PROGRAM SUPPORT
THE KEY CLUBHOUSE OF SOUTH FLORIDA 1400 NORTHWEST 54TH STREET SUITE 10 MIAMI, FL 33142	26-3727540		6,048.	0.			PROGRAM SUPPORT
BOYS AND GIRLS CLUBS OF BROWARD COUNTY - 877 NW 61 STREET - FT. LAUDERDALE, FL 33309	59-1108790		6,000.	0.			PROGRAM SUPPORT
BOYS AND GIRLS CLUBS OF MIAMI-DADE, INC. - 2805 SW 32ND AVENUE - MIAMI, FL 33133	59-0879227		6,000.	0.			PROGRAM SUPPORT
BREAKTHROUGH MIAMI, INC. 3250 SW THIRD AVENUE MIAMI, FL 33129	26-2105534		6,000.	0.			PROGRAM SUPPORT
CARE ELEMENTARY SCHOOL 2025 NW 1ST AVENUE MIAMI, FL 33127	46-5269625		6,000.	0.			PROGRAM SUPPORT
EXTRA VIRGIN PRESS, LLC 3415 FRANKLIN AVENUE, APT B COCONUT GROVE, FL 33133	81-1202454		6,000.	0.			PROGRAM SUPPORT

Schedule I (Form 990)

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DON'T TAKE MY LIFE LET ME LIVE MOVEMENT - 15332 NW 7TH AVENUE - MIAMI, FL 33169	82-4522759		6,000.	0.			PROGRAM SUPPORT
FLORIDA BAPTIST CHILDREN'S HOMES, INC. - PO BOX 8190 - LAKELAND, FL 33802	59-0657326		5,957.	0.			PROGRAM SUPPORT
CAPITAL OF TEXAS MEDIA FOUNDATION PO BOX 867 AUSTIN, TX 78767	46-3398438		5,955.	0.			PROGRAM SUPPORT
BORSCHT CORP 1932 NW MIAMI COURT MIAMI, FL 33155	27-4721945		5,941.	0.			PROGRAM SUPPORT
SHUL OF DOWNTOWN, INC. 48 EAST FLAGLER STREET MIAMI, FL 33131	20-2253547		5,848.	0.			PROGRAM SUPPORT
JOHN S. AND JAMES L. KNIGHT FOUNDATION - 200 S BISCAYNE BLVD., SUITE 3300 - MIAMI, FL 33131	65-0464177		5,797.	0.			PROGRAM SUPPORT
PINEY GROVE BOYS ACADEMY 4699 WEST OAKLAND PARK BLVD LAUDERDALE LAKES, FL 33313	46-0645965		5,788.	0.			PROGRAM SUPPORT
EAT BETTER LIVE BETTER 7029 DAVIT CIR LAKE WORTH, FL 33467	81-0994119		5,781.	0.			PROGRAM SUPPORT
TEMPLE JUDEA 5500 GRANADA BOULEVARD CORAL GABLES, FL 33146	59-0791048		5,745.	0.			PROGRAM SUPPORT

Schedule I (Form 990)

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SPECIAL SPACES 20590 CAROUSEL CIR., W BOCA RATON, FL 33434	42-1641574		5,702.	0.			PROGRAM SUPPORT
GREEN CITY CONSTRUCTION SERVICES 14471 LIVERNOIS DETROIT, MI 48238	08-0671531		5,700.	0.			PROGRAM SUPPORT
MIAMI DADE COLLEGE 401 NE 2ND AVENUE, SUITE 4102 MIAMI, FL 33132	59-1210485		5,685.	0.			PROGRAM SUPPORT
FLORIDA INTERNATIONAL UNIVERSITY FOUNDATION, INC. - 11200 SW 8TH STREET, MARC 514-C - MIAMI, FL 33199	23-7047106		5,610.	0.			PROGRAM SUPPORT
TEATRO DEL PUEBLO 209 W. PAGE STREET, SUITE 213 ST. PAUL, MN 55127	85-1762769		5,599.	0.			PROGRAM SUPPORT
PARAGON PARTNERSHIP 10045 SW 213TH TERRACE CUTLER BAY, FL 33189	46-0672510		5,525.	0.			PROGRAM SUPPORT
TEAM KAREEM MEMORIAL FOUNDATION P.O. BOX 9771 CORAL SPRINGS, FL 33075	46-5568131		5,500.	0.			PROGRAM SUPPORT
BELAFONTE TACOLCY CENTER, INC. 6161 NORTHWEST 9TH AVENUE MIAMI, FL 33127-1013	591376077		5,473.	0.			PROGRAM SUPPORT
MIAMI-DADE COUNTY STEPHEN P. CLARK CENTER 111 NW 1ST MIAMI, FL 33128	59-6000573		5,461.	0.			PROGRAM SUPPORT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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THE BAKEHOUSE ART COMPLEX, INC. 561 NW 32ND STREET MIAMI, FL 33127	59-2104864		5,400.	0.			PROGRAM SUPPORT
GLOBAL CHILDREN'S RESCUE, INC. 600 NW 76TH TERRACE PLANTATION, FL 33324	82-2372710		5,353.	0.			PROGRAM SUPPORT
SCENTSABILITY MIRCO-ENTERPRISE, INC. - 11480 W. SAMPLE ROAD - CORAL SPRINGS, FL 33065	45-4940297		5,353.	0.			PROGRAM SUPPORT
JESS CARE MOORE FOUNDATION 1401 W. FORT STREET #442488 DETROIT, MI 48244	46-5118714		5,337.	0.			PROGRAM SUPPORT
VOICES FOR CHILDREN OF BROWARD COUNTY - 401 E. LAS OLAS BOULEVARD, SUITE 130-301 - FORT LAUDERDALE, FL 33301	45-1964037		5,301.	0.			PROGRAM SUPPORT
A.GEN.CY DETROIT, LLC 2565 SHERIDAN STREET DETROIT, MI 48214	82-4074640		5,254.	0.			PROGRAM SUPPORT
MIAMI BEACH CHAMBER EDUCATION FOUNDATION - 1920 MERIDIAN AVE., FLOOR 3 - MIAMI BEACH, FL 33139	31-1735967		5,200.	0.			PROGRAM SUPPORT
PHANTOM RESCUE 1041 NE 27TH WAY POMPANO BEACH, FL 33062	46-4138550		5,200.	0.			PROGRAM SUPPORT
GOODWILL INDUSTRIES OF SOUTH FLORIDA, INC. - 2121 NW 21ST STREET - MIAMI, FL 33142	59-0866126		5,151.	0.			PROGRAM SUPPORT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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DOLPHINS CYCLING CHALLENGE INC. 347 DON SHULA DRIVE MIAMI GARDENS, FL 33056	45-4808311		5,150.	0.			PROGRAM SUPPORT
UNIVERSITY OF WISCONSIN FOUNDATION 1848 UNIVERSITY AVENUE MADISON, WI 53726-4090	39-0743975		5,065.	0.			PROGRAM SUPPORT
LBV FILMS, LLC 4300 SHERIDAN STREET APARTMENT 317 HOLLYWOOD, FL 33021	47-1771385		5,060.	0.			PROGRAM SUPPORT
JACKSONVILLE UNIVERSITY 2800 UNIVERSITY BOULEVARD NORTH JACKSONVILLE, FL 32211	59-0624412		5,041.	0.			PROGRAM SUPPORT
DADE SCHOOLS ATHLETIC FOUNDATION, INC. - 6619 SOUTH DIXIE HIGHWAY - MIAMI, FL 33143	65-0440175		5,000.	0.			PROGRAM SUPPORT
FLORIDA INTERNATIONAL UNIVERSITY UNIVERSITY PARK CAMPUS MARC 531 MIAMI, FL 33199	23-7047106		5,000.	0.			PROGRAM SUPPORT
MEMORIAL FOUNDATION, INC. 3501 JOHNSON STREET HOLLYWOOD, FL 33021	59-2082218		5,000.	0.			PROGRAM SUPPORT
MIAMI SHORES PEOPLE OF COLOR, INC. 10518 NE 3RD AVENUE MIAMI SHORES, FL 33138	81-3928615		5,000.	0.			PROGRAM SUPPORT
NEW YORK WOMEN IN FILM AND TELEVISION - 6861 SW 44TH STREET, UNIT 205 - MIAMI, FL 33155	13-2983705		5,000.	0.			PROGRAM SUPPORT

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RAY OF HOPE FOUNDATION, INC. 7984 ESTA LANE ORLANDO, FL 32827	06-1460978		5,000.	0.			PROGRAM SUPPORT
THE MURRAY DRANOFF FOUNDATION, INC. - 180 NE 39TH STREET - MIAMI, FL 33137	59-2726057		5,000.	0.			PROGRAM SUPPORT
TRUSTEES OF HAMILTON COLLEGE OFFICE OF FINANCIAL AID, 198 COLLEGE HILL ROAD - CLINTON, NY 13323	15-0532200		5,000.	0.			PROGRAM SUPPORT
UNIVERSITY OF MIAMI - SCHOOL OF COMMUNICATION - P.O. BOX 248127 - CORAL GABLES, FL 33124-2030	59-0624458		5,000.	0.			PROGRAM SUPPORT
UNIVERSITY OF NEW ORLEANS FOUNDATION - HOMER L. HITT ALUMNI AND VISITORS CENTER, 2000 LAKESHORE DR - NEW ORLEANS, LA	72-1051326		5,000.	0.			PROGRAM SUPPORT
WHISPERING MANES THERAPEUTIC RIDING CENTER - 6255 SW 125TH AVE - MIAMI, FL 33183	27-3697303		5,000.	0.			PROGRAM SUPPORT
YOUNG MUSICIANS ORGANIZATION, INC. PO BOX 371021 MIAMI, FL 33137	45-2610764		5,000.	0.			PROGRAM SUPPORT
ACTORS' PLAYHOUSE PRODUCTIONS, INC. - 280 MIRACLE MILE - CORAL GABLES, FL 33134	65-0060167		5,000.	0.			PROGRAM SUPPORT
AMERICAN CANCER SOCIETY - FLORIDA DIVISION - 3709 WEST JETTON AVENUE - TAMPA, FL 33629	13-1788491		5,000.	0.			PROGRAM SUPPORT

Schedule I (Form 990)

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ARI J. ARTEAGA FOUNDATION 6001 SW 85TH AVENUE MIAMI, FL 33143.	83-1519367		5,000.	0.			PROGRAM SUPPORT
BIG BROTHERS BIG SISTERS OF NEW YORK CITY - 40 RECTOR STREET - NEW YORK, NY 10006	13-5600383		5,000.	0.			PROGRAM SUPPORT
BIRTHRIGHT ISRAEL FOUNDATION P.O. BOX 5892 HICKSVILLE, NY 11802	13-4092050		5,000.	0.			PROGRAM SUPPORT
BROWARD COLLEGE FOUNDATION 111 EAST LAS OLAS BOULEVARD, 12TH F FORT LAUDERDALE, FL 33301	23-7181959		5,000.	0.			PROGRAM SUPPORT
CENTER FOR JACKSON HOLE P.O. BOX 350 JACKSON, WY 83001	47-3826546		5,000.	0.			PROGRAM SUPPORT
CHRISTIAN COMMUNITY FOUNDATION OF SOUTH FLORIDA, INC. - 5110 NORTH FEDERAL HIGHWAY, SECOND FLOOR - FORT LAUDERDALE, FL 33308	86-1088673		5,000.	0.			PROGRAM SUPPORT
CITY KIDS TO WILDERNESS PROJECT, INC. - 2437 15TH STREET, NW - WASHINGTON, DC 20009	52-1976304		5,000.	0.			PROGRAM SUPPORT
CITY OF MIRAMAR 2300 CIVIC CENTER LANE MIRAMAR, FL 33025	59-6019762		5,000.	0.			PROGRAM SUPPORT
CONCERNED AFRICAN WOMEN 1505 NW 167TH STREET SUITE 101 MIAMI GARDENS, FL 33169	65-0126665		5,000.	0.			PROGRAM SUPPORT

Schedule I (Form 990)



**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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CONGREGATION BNAI AMOONA 324 SOUTH MASON ROAD CREVE COEUR, MO 63141	43-0706846		5,000.	0.			PROGRAM SUPPORT
CONGREGATION BNAI ZION OF KEY WEST FLORIDA, INC. - 750 UNITED STREET - KEY WEST, FL 33040	65-0023035		5,000.	0.			PROGRAM SUPPORT
CONGRESSIONAL HISPANIC LEADERSHIP INSTITUTE - 734 15TH STREET, NW, #620 - WASHINGTON, DC 20005	20-0392012		5,000.	0.			PROGRAM SUPPORT
FLORIDA FILM HOUSE, INC. 570 NORTHWEST 26TH STREET MIAMI, FL 33127	82-2399488		5,000.	0.			PROGRAM SUPPORT
FOUNDATION FOR THE CAROLINAS 220 NORTH TRYON STREET CHARLOTTE, NC 28202	56-6047886		5,000.	0.			PROGRAM SUPPORT
FRIENDS OF PATHWAYS P.O. BOX 2062 JACKSON, WY 83001	83-0309897		5,000.	0.			PROGRAM SUPPORT
GLORY HOUSE OF MIAMI INC. 3606 SW 60TH COURT MIAMI, FL 33155	45-2947872		5,000.	0.			PROGRAM SUPPORT
HEALTH EDUCATION PREVENTION & PROMOTION, INC. - 2103 CORAL WAY 2ND FLOOR - MIAMI, FL 33145	46-1240368		5,000.	0.			PROGRAM SUPPORT
HOLE FOOD RESCUE CORP P.O. BOX 2955 JACKSON, WY 83001	46-5258661		5,000.	0.			PROGRAM SUPPORT

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INTERNATIONAL MOUNTAIN BICYCLING ASSOCIATION - COLORADO - P.O. BOX 20280 - BOULDER, CO 80308	47-1254119		5,000.	0.			PROGRAM SUPPORT
JACKSON HOLE COMMUNITY HOUSING P.O. BOX 4498 JACKSON, WY 83001	83-0297131		5,000.	0.			PROGRAM SUPPORT
JACKSON HOLE UNITED P.O. BOX 2131 JACKSON, WY 83001	46-4233773		5,000.	0.			PROGRAM SUPPORT
KALEIDOSCOPE CHILD FOUNDATION P.O. BOX 13866 ATLANTA, GA 30324	27-3328796		5,000.	0.			PROGRAM SUPPORT
KENYON COLLEGE EATON CENTER 209 CHASE AVENUE GAMBIER, OH 43022	31-4379507		5,000.	0.			PROGRAM SUPPORT
LAWRENCE TECHNOLOGICAL UNIVERSITY 21000 WEST TEN MILE ROAD SOUTHFIELD, MI 48075	38-1369604		5,000.	0.			PROGRAM SUPPORT
LITTLE HAITI OPTIMIST FOUNDATION, INC. - 1835 NE MIAMI GARDENS DRIVE STE 112 - MAIMI, FL 33179	275029021		5,000.	0.			PROGRAM SUPPORT
LITTLE LIGHTHOUSE FOUNDATION INC. 100 NORTH BISCAYNE BOULEVARD SUITE MIAMI, FL 33132	271773499		5,000.	0.			PROGRAM SUPPORT
MENTORING PEACE THROUGH ART, INC. 5267 NOLAN PARKWAY STILWATER, MN 55082	20-4476611		5,000.	0.			PROGRAM SUPPORT

Schedule I (Form 990)

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MIAMI BOOK FAIR INTERNATIONAL, INC. - 300 NE 2ND AVENUE, FREEDOM TOWER 7TH FLOOR - MIAMI, FL 33132	592415165		5,000.	0.			PROGRAM SUPPORT
MIAMI CHILDREN'S CHORUS, INC. 1533 SUNSET DRIVE SUITE 215 MIAMI, FL 33143	237250811		5,000.	0.			PROGRAM SUPPORT
MIAMI COALITION OF CHRISTIANS AND JEWS, INC. - 150 SE 2 AVENUE SUITE 914 - MIAMI, FL 33131	20-3534284		5,000.	0.			PROGRAM SUPPORT
MIAMI LIGHT PROJECT, INC. PO BOX 531385 MIAMI SHORES, FL 33153	650107810		5,000.	0.			PROGRAM SUPPORT
MIAMI MIGHT, INC. 3075 SW 28TH STREET MIAMI, FL 33133	47-5416783		5,000.	0.			PROGRAM SUPPORT
MIAMI-DADE CHAMBER OF COMMERCE 11380 NW 27TH AVENUE SUITE 1328 MIAMI, FL 33167-3418	59-6560023		5,000.	0.			PROGRAM SUPPORT
NUFRONTIER, LLC 4029 SW 13TH STREET CORAL GABLES, FL 33134	26-4129156		5,000.	0.			PROGRAM SUPPORT
PREVENTION ACCESS CAMPAIGN, INC. DBA PREVENTION305 - 400 ALTON ROAD, APT. 3007 - MIAMI BEACH, FL 33139	81-4738905		5,000.	0.			PROGRAM SUPPORT
RJT FOUNDATION, INC. 13850 NW 26TH AVENUE, SUITE 207 OPA LOCKA, FL 33054	45-5603019		5,000.	0.			PROGRAM SUPPORT

Schedule I (Form 990)

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TEMPLE BETH EL 2815 NORTH FLAGLER DRIVE WEST PALM BEACH, FL 33407	59-2568825		5,000.	0.			PROGRAM SUPPORT
TETON YOUTH & FAMILY SERVICES, INC. - P.O. BOX 2631 - JACKSON, WY 83001	83-0235044		5,000.	0.			PROGRAM SUPPORT
THE ALEX LOWE CHARITABLE FOUNDATION, INC. - P.O. BOX 6666 - BOZEMAN, MT 59771	81-0530042		5,000.	0.			PROGRAM SUPPORT
THE BATTIER TAKE CHARGE FOUNDATION, INC. - 2829 BIRD AVENUE, SUITE 5, - MIAMI, FL 33133	27-1832986		5,000.	0.			PROGRAM SUPPORT
THE BEACON COUNCIL ECONOMIC DEVELOPMENT FOUNDATION, INC. - 80 SW EIGHTH STREET SUITE 2400 - MIAMI, FL 33130	59-2738676		5,000.	0.			PROGRAM SUPPORT
THE DALTON SCHOOLS, INC. 108 EAST 89TH STREET NEW YORK, NY 10128	13-2751872		5,000.	0.			PROGRAM SUPPORT
THE DRANOFF INTERNATIONAL TWO PIANO FOUNDATION - 3550 BISCAYNE BLVD SUITE 702 - MIAMI, FL 33137	59-2726057		5,000.	0.			PROGRAM SUPPORT
THE NATURE CONSERVANCY 4245 N. FAIRFAX DRIVE, SUITE 100 ARLINGTON, VA 22203	53-0242652		5,000.	0.			PROGRAM SUPPORT
UNIVERSITY COMMUNITY HOSPITAL FOUNDATION, INC. - 3100 E. FLETCHER AVENUE - TAMPA, FL 33613	59-2554889		5,000.	0.			PROGRAM SUPPORT

Schedule I (Form 990)

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UNIVERSITY OF VIRGINIA FOUNDATION 400 WORRELL DRIVE CHARLOTTESVILLE, VA 22911	54-1682176		5,000.	0.			PROGRAM SUPPORT
URBAN ECOLOGY CENTER, INC. RIVERSIDE PARK 1500 E. PARK PLACE MILWAUKEE, WI 53211	39-1712663		5,000.	0.			PROGRAM SUPPORT
VETERANS TRUST 200 S. BISCAYNE BOULEVARD, 6TH FLOOR MIAMI, FL 33131	46-4677773		5,000.	0.			PROGRAM SUPPORT
VIDA VERDE NATURE EDUCATION 3540 LA HONDA ROAD SAN GREGORIO, CA 94074	36-4471996		5,000.	0.			PROGRAM SUPPORT
VISIONARIES 748 PAGE STREET STOUGHTON, MA 02072	04-3282172		5,000.	0.			PROGRAM SUPPORT
WINTER WILDLANDS ALLIANCE, INC. 910 W. MAIN STREET, SUITE 235 BOISE, ID 83702	82-0523471		5,000.	0.			PROGRAM SUPPORT

**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	152	2,107,036.	0.		

**Part IV Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

WHEN THE FOUNDATION AWARDS GRANTS FOR A SPECIFIC PROJECT THROUGH A GRANT PROGRAM, ALL GRANTEEES SIGN AN AGREEMENT THAT DOCUMENTS THE PURPOSE, TERMS AND CONDITIONS OF THE AWARD AND REPORTING REQUIREMENTS. FOR GENERAL SUPPORT GRANTS, THERE ARE NO REPORTING REQUIREMENTS. HOWEVER, PRE-GRANT DUE DILIGENCE FOR ALL SUCH GRANTS INCLUDES VERIFYING THE CHARITABLE PURPOSE OF THE GRANT, AND TAX STATUS AND PUBLIC CHARITY CLASSIFICATION OF EACH RECIPIENT. IF ADVERSE INFORMATION ABOUT POSSIBLE MISUSE OF FUNDS BY A GRANTEE IS OBTAINED, E.G., THROUGH REPORT IN THE MEDIA OR OTHER RELIABLE

**Part IV** Supplemental Information

SOURCES, GRANTS TO THAT ORGANIZATION ARE SUBJECT TO FURTHER SCRUTINY AND  
ADDITIONAL INFORMATION MAY BE REQUIRED.

Multiple horizontal lines for supplemental information.

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**2018**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization

**THE MIAMI FOUNDATION, INC.**

Employer identification number

**65-0350357**

**Part I Questions Regarding Compensation**

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- |                                                                    |                                                                            |
|--------------------------------------------------------------------|----------------------------------------------------------------------------|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use   |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence   |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees     |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |
- b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain .....
- 2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? .....
- 3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.
- |                                                                         |                                                                                     |
|-------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input type="checkbox"/> Compensation committee                         | <input type="checkbox"/> Written employment contract                                |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations                | <input checked="" type="checkbox"/> Approval by the board or compensation committee |
- 4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:
- a** Receive a severance payment or change-of-control payment? .....
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....
- c** Participate in, or receive payment from, an equity-based compensation arrangement? .....
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.
- Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**
- 5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:
- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 5a or 5b, describe in Part III.
- 6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:
- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 6a or 6b, describe in Part III.
- 7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III .....
- 8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....
- 9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>	X	
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2018



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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

**Note:** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JAVIER ALBERTO SOTO PRESIDENT & CEO	(i)	277,990.	45,000.	0.	13,500.	0.	336,490.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) CHARISSE L. GRANT SENIOR VICE PRESIDENT	(i)	161,672.	1,000.	0.	7,346.	0.	170,018.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) CARLOS ABAUNZA FORMER VICE PRESIDENT OF FINANCE	(i)	88,451.	0.	39,138.	5,419.	0.	133,008.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							



**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2018**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization **THE MIAMI FOUNDATION, INC.** Employer identification number **65-0350357**

Part 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 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art .....				
2	Art - Historical treasures .....				
3	Art - Fractional interests .....				
4	Books and publications .....				
5	Clothing and household goods .....				
6	Cars and other vehicles .....				
7	Boats and planes .....				
8	Intellectual property .....				
9	Securities - Publicly traded .....	X	49	5,028,034.	FAIR MARKET VALUE
10	Securities - Closely held stock .....				
11	Securities - Partnership, LLC, or trust interests .....				
12	Securities - Miscellaneous .....				
13	Qualified conservation contribution - Historic structures .....				
14	Qualified conservation contribution - Other .....				
15	Real estate - Residential .....				
16	Real estate - Commercial .....				
17	Real estate - Other .....				
18	Collectibles .....				
19	Food inventory .....				
20	Drugs and medical supplies .....				
21	Taxidermy .....				
22	Historical artifacts .....				
23	Scientific specimens .....				
24	Archeological artifacts .....				
25	Other ▶ ( _____ )				
26	Other ▶ ( _____ )				
27	Other ▶ ( _____ )				
28	Other ▶ ( _____ )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement ..... **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? .....		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? .....		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? .....		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2018

**Part II** **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Multiple horizontal lines for supplemental information.

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2018**

Open to Public  
Inspection

Name of the organization

THE MIAMI FOUNDATION, INC.

Employer identification number

65-0350357

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE MIAMI FOUNDATION PROVIDES CIVIC LEADERSHIP, BRINGING STAKEHOLDERS TOGETHER TO TACKLE ISSUES OF CONCERN IN OUR COMMUNITY. WORKING TOGETHER WITH OUR FUNDHOLDERS AND COMMUNITY PARTNERS, WE LEVERAGE COLLECTIVE KNOWLEDGE, CREATIVITY AND RESOURCES FOR A GREATER IMPACT THAN ANY ONE OF US COULD MAKE ALONE. BY CONNECTING PHILANTHROPY WITH COMMUNITY NEEDS AND OPPORTUNITIES, WE MAKE MIAMI A GREATER PLACE TO LIVE, WORK AND PLAY. ESTABLISHED IN 1967, THE MIAMI FOUNDATION, FORMERLY THE DADE COMMUNITY FOUNDATION, HAS HELPED HUNDREDS OF PEOPLE CREATE PERSONAL, PERMANENT AND POWERFUL LEGACIES BY ESTABLISHING CUSTOM CHARITABLE FUNDS. WITH OUR EXPERTISE, FUNDHOLDERS HAVE FOSTERED THE ARTS, AWARDED SCHOLARSHIPS, CHAMPIONED DIVERSITY, TAUGHT KIDS TO READ, PROVIDED FOOD AND SHELTER FOR HUNGRY AND HOMELESS, AND MORE. MORE THAN \$310 MILLION IN GRANTS AND SCHOLARSHIPS HAS BEEN AWARDED IN OUR RICH 50 YEAR HISTORY. TODAY, WE CAREFULLY STEWARD OVER \$300 MILLION IN CHARITABLE ASSETS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS MADE AVAILABLE TO THE BOARD MEMBERS PRIOR TO FILING. STAFF OF THE MIAMI FOUNDATION ALSO REVIEW THE FORM 990.

FORM 990, PART VI, SECTION B, LINE 12C:

ANNUALLY ALL BOARD MEMBERS ARE ASKED TO SIGN A CONFLICT OF INTEREST POLICY. THE POLICY REQUIRES THAT IN THE EVENT THERE IS ANY MATERIAL CHANGE IN THE INFORMATION CONTAINED IN ANY DISCLOSURE STATEMENT, THE PERSON WHO SUBMITTED IT SHALL PROMPTLY SUBMIT WRITTEN NOTIFICATION OF THE CHANGE.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2018)

832211 10-10-18

Name of the organization

THE MIAMI FOUNDATION, INC.

Employer identification number

65-0350357

FORM 990, PART VI, SECTION B, LINE 15:

THE EXECUTIVE COMMITTEE DETERMINES THE PRESIDENT'S SALARY BASED ON MARKET CONSIDERATIONS, SURVEYS OF OTHER FOUNDATIONS AND CONSULTATIONS WITH RECRUITING FIRMS.

FORM 990, PART VI, SECTION C, LINE 18:

THE FOUNDATION MAKES ITS FORM 1023, 990, 990-T AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST AND/OR ONLINE AT WWW.MIAMIFOUNDATION.ORG.

FORM 990, PART VI, SECTION C, LINE 19:

THE FOUNDATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. THE FOUNDATION'S CONSOLIDATED AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ONLINE AT WWW.MIAMIFOUNDATION.ORG.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

ANNUITY PROGRAM	7,823,961.
OTHER INTERCOMPANY ADJUSTMENTS	56,981.
TOTAL TO FORM 990, PART XI, LINE 9	7,880,942.

FORM 990, PART XII, LINE 2C: FINANCIAL STATEMENTS AND REPORTING

THE FOUNDATION'S AUDIT COMMITTEE IS RESPONSIBLE FOR THE SELECTION OF THE INDEPENDENT AUDITORS AND OVERSIGHT OF THE ANNUAL AUDIT. THIS PROCESS HAS NOT CHANGED FROM THE PREVIOUS YEAR.







**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
<b>1</b> 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?		
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity .....		X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....		X
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....		X
<b>d</b> Loans or loan guarantees to or for related organization(s) .....		X
<b>e</b> Loans or loan guarantees by related organization(s) .....		X
<b>f</b> Dividends from related organization(s) .....		X
<b>g</b> Sale of assets to related organization(s) .....		X
<b>h</b> Purchase of assets from related organization(s) .....		X
<b>i</b> Exchange of assets with related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....	X	
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....	X	
<b>o</b> Sharing of paid employees with related organization(s) .....	X	
<b>p</b> Reimbursement paid to related organization(s) for expenses .....		X
<b>q</b> Reimbursement paid by related organization(s) for expenses .....		X
<b>r</b> Other transfer of cash or property to related organization(s) .....		X
<b>s</b> Other transfer of cash or property from related organization(s) .....		X

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) DADEFUND, INC. COLLEGE ASSISTANCE PROGRAM (CAP) OF MIAMI	L	130,334.	CASH AMOUNT
(2) DADE COUNTY, INC.	L	59,948.	CASH AMOUNT
(3)			
(4)			
(5)			
(6)			



**Part VII** Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

Multiple horizontal lines for supplemental information.

**Estimated Tax on Unrelated Business Taxable  
Income for Tax-Exempt Organizations**

(and on Investment Income for Private Foundations) FORM 990-T

**2019**

Department of the Treasury  
Internal Revenue Service

▶ Go to [www.irs.gov/Form990W](http://www.irs.gov/Form990W) for instructions and the latest information.  
▶ Keep for your records. Do not send to the Internal Revenue Service.

1	Unrelated business taxable income expected in the tax year .....	1	
2	Tax on the amount on line 1. See instructions for tax computation .....	2	
3	Alternative minimum tax for trusts. See instructions .....	3	
4	Total. Add lines 2 and 3 .....	4	
5	Estimated tax credits. See instructions .....	5	
6	Subtract line 5 from line 4 .....	6	
7	Other taxes. See instructions .....	7	
8	Total. Add lines 6 and 7 .....	8	
9	Credit for federal tax paid on fuels. See instructions .....	9	
10a	Subtract line 9 from line 8. <b>Note:</b> If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions .....	10a	
b	Enter the tax shown on the 2018 return. See instructions. <b>Caution:</b> If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c .....	10b	7,244.
c	<b>2019 Estimated Tax.</b> Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c .....	10c	7,244.

		(a)	(b)	(c)	(d)
11	Installment due dates. See instructions .....	11			12/16/19
12	Required installments. Enter 25% of line 10c in columns (a) through (d). But see instructions if the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization." .....	12			7,244.
13	2018 Overpayment. See instructions .....	13			
14	Payment due (Subtract line 13 from line 12) .....	14			7,244.

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2019)

# Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

# 2018

For calendar year 2018 or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

▶ Go to [www.irs.gov/Form990T](http://www.irs.gov/Form990T) for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Department of the Treasury  
Internal Revenue Service

Open to Public Inspection for  
501(c)(3) Organizations Only

<p><b>A</b> <input type="checkbox"/> Check box if address changed</p> <p><b>B</b> Exempt under section  <input checked="" type="checkbox"/> 501(c)(3)  <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e)  <input type="checkbox"/> 408A <input type="checkbox"/> 530(a)  <input type="checkbox"/> 529(a)</p>	<p><b>Print or Type</b></p>	<p>Name of organization ( <input type="checkbox"/> Check box if name changed and see instructions.)  <b>THE MIAMI FOUNDATION, INC.</b></p> <p>Number, street, and room or suite no. If a P.O. box, see instructions.  <b>40 NW 3RD STREET, NO. 305</b></p> <p>City or town, state or province, country, and ZIP or foreign postal code  <b>MIAMI, FL 33128</b></p>	<p><b>D</b> Employer identification number (Employees' trust, see instructions.)  <b>65-0350357</b></p> <p><b>E</b> Unrelated business activity code (See instructions.)  <b>812930</b></p>
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

**C** Book value of all assets at end of year **323,872,937.**

**F** Group exemption number (See instructions.) ▶ \_\_\_\_\_

**G** Check organization type ▶  501(c) corporation  501(c) trust  401(a) trust  Other trust

**H** Enter the number of the organization's unrelated trades or businesses. ▶ **1** Describe the only (or first) unrelated trade or business here ▶ **TRANSPORTATION FRINGE BENEFITS**. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

**I** During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?  Yes  No  
 If "Yes," enter the name and identifying number of the parent corporation. ▶ \_\_\_\_\_

**J** The books are in care of ▶ **GLORIA ORTEGA REX** Telephone number ▶ **305-371-2711**

Part I Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
<b>1 a</b> Gross receipts or sales			
<b>b</b> Less returns and allowances			
<b>c</b> Balance	<b>1c</b>		
<b>2</b> Cost of goods sold (Schedule A, line 7)	<b>2</b>		
<b>3</b> Gross profit. Subtract line 2 from line 1c	<b>3</b>		
<b>4 a</b> Capital gain net income (attach Schedule D)	<b>4a</b>		
<b>b</b> Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	<b>4b</b>		
<b>c</b> Capital loss deduction for trusts	<b>4c</b>		
<b>5</b> Income (loss) from a partnership or an S corporation (attach statement)	<b>5</b>		
<b>6</b> Rent income (Schedule C)	<b>6</b>		
<b>7</b> Unrelated debt-financed income (Schedule E)	<b>7</b>		
<b>8</b> Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	<b>8</b>		
<b>9</b> Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	<b>9</b>		
<b>10</b> Exploited exempt activity income (Schedule I)	<b>10</b>		
<b>11</b> Advertising income (Schedule J)	<b>11</b>		
<b>12</b> Other income (See instructions; attach schedule) <b>STATEMENT 1</b>	<b>12</b> 35,495.		35,495.
<b>13 Total.</b> Combine lines 3 through 12	<b>13</b> 35,495.		35,495.

**Part II Deductions Not Taken Elsewhere** (See instructions for limitations on deductions.)  
 (Except for contributions, deductions must be directly connected with the unrelated business income.)

<b>14</b> Compensation of officers, directors, and trustees (Schedule K)	<b>14</b>	
<b>15</b> Salaries and wages	<b>15</b>	
<b>16</b> Repairs and maintenance	<b>16</b>	
<b>17</b> Bad debts	<b>17</b>	
<b>18</b> Interest (attach schedule) (see instructions)	<b>18</b>	
<b>19</b> Taxes and licenses	<b>19</b>	
<b>20</b> Charitable contributions (See instructions for limitation rules)	<b>20</b>	
<b>21</b> Depreciation (attach Form 4562)	<b>21</b>	
<b>22</b> Less depreciation claimed on Schedule A and elsewhere on return	<b>22a</b>	<b>22b</b>
<b>23</b> Depletion	<b>23</b>	
<b>24</b> Contributions to deferred compensation plans	<b>24</b>	
<b>25</b> Employee benefit programs	<b>25</b>	
<b>26</b> Excess exempt expenses (Schedule I)	<b>26</b>	
<b>27</b> Excess readership costs (Schedule J)	<b>27</b>	
<b>28</b> Other deductions (attach schedule)	<b>28</b>	
<b>29 Total deductions.</b> Add lines 14 through 28	<b>29</b>	0.
<b>30</b> Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	<b>30</b>	35,495.
<b>31</b> Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	<b>31</b>	
<b>32</b> Unrelated business taxable income. Subtract line 31 from line 30	<b>32</b>	35,495.

**Part III Total Unrelated Business Taxable Income**

33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	35,495.
34	Amounts paid for disallowed fringes	34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of lines 33 and 34	36	35,495.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	1,000.
38	<b>Unrelated business taxable income.</b> Subtract line 37 from line 36. If line 37 is greater than line 36, enter the smaller of zero or line 36	38	34,495.

**Part IV Tax Computation**

39	<b>Organizations Taxable as Corporations.</b> Multiply line 38 by 21% (0.21)	39	7,244.
40	<b>Trusts Taxable at Trust Rates.</b> See instructions for tax computation. Income tax on the amount on line 38 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	40	
41	<b>Proxy tax.</b> See instructions	41	
42	Alternative minimum tax (trusts only)	42	
43	<b>Tax on Noncompliant Facility Income.</b> See instructions	43	
44	<b>Total.</b> Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	7,244.

**Part V Tax and Payments**

45a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a	
b	Other credits (see instructions)	45b	
c	General business credit. Attach Form 3800	45c	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d	
e	<b>Total credits.</b> Add lines 45a through 45d	45e	
46	Subtract line 45e from line 44	46	7,244.
47	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	47	
48	<b>Total tax.</b> Add lines 46 and 47 (see instructions)	48	7,244.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	0.
50a	Payments: A 2017 overpayment credited to 2018	50a	
b	2018 estimated tax payments	50b	
c	Tax deposited with Form 8868	50c	
d	Foreign organizations: Tax paid or withheld at source (see instructions)	50d	
e	Backup withholding (see instructions)	50e	
f	Credit for small employer health insurance premiums (attach Form 8941)	50f	
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total	50g	
51	<b>Total payments.</b> Add lines 50a through 50g	51	
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	52	306.
53	<b>Tax due.</b> If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53	7,550.
54	<b>Overpayment.</b> If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54	
55	Enter the amount of line 54 you want: <b>Credited to 2019 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/>	55	

**Part VI Statements Regarding Certain Activities and Other Information** (see instructions)

56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here	Yes	No
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
58	Enter the amount of tax-exempt interest received or accrued during the tax year \$		

**Sign Here** Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer: \_\_\_\_\_ Date: \_\_\_\_\_ Title: **INTERIM PRESIDENT AND CEO**

May the IRS discuss this return with the preparer shown below (see instructions)?  Yes  No

**Paid Preparer Use Only**

Print/Type preparer's name: **LISETTE RODRIGUEZ, CPA** Preparer's signature: \_\_\_\_\_ Date: \_\_\_\_\_ Check  if self-employed PTIN: **P01404398**

Firm's name: **MORRISON, BROWN, ARGIZ & FARRA, LLC** Firm's EIN: \_\_\_\_\_  
 1450 BRICKELL AVENUE, 18TH FLOOR  
 Firm's address: **MIAMI, FL 33131** Phone no. **(305) 373-5500**

**Schedule A - Cost of Goods Sold.** Enter method of inventory valuation ► **N/A**

1	Inventory at beginning of year .....	1		6	Inventory at end of year .....	6	
2	Purchases .....	2		7	<b>Cost of goods sold.</b> Subtract line 6 from line 5. Enter here and in Part I, line 2 .....	7	
3	Cost of labor .....	3		8	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? .....		Yes No
4a	Additional section 263A costs (attach schedule) .....	4a					
b	Other costs (attach schedule) .....	4b					
5	<b>Total.</b> Add lines 1 through 4b .....	5					

**Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)**

(see instructions)

1. Description of property

(1)	
(2)	
(3)	
(4)	

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	0.	Total 0.

(c) **Total income.** Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) .....

(b) **Total deductions.** Enter here and on page 1, Part I, line 6, column (B) ... 0.

**Schedule E - Unrelated Debt-Financed Income** (see instructions)

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
<b>Totals</b> .....			Enter here and on page 1, Part I, line 7, column (A). 0.	Enter here and on page 1, Part I, line 7, column (B). 0.
<b>Total dividends-received deductions</b> included in column 8 .....				0.

**Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations** (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

**Nonexempt Controlled Organizations**

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
<b>Totals</b> .....			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A). 0.	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B). 0.

**Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
<b>Totals</b> .....		Enter here and on page 1, Part I, line 9, column (A). 0.		Enter here and on page 1, Part I, line 9, column (B). 0.

**Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>Totals</b> .....		Enter here and on page 1, Part I, line 10, col. (A). 0.	Enter here and on page 1, Part I, line 10, col. (B). 0.			Enter here and on page 1, Part II, line 26. 0.

**Schedule J - Advertising Income** (see instructions)

**Part I Income From Periodicals Reported on a Consolidated Basis**

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>Totals</b> (carry to Part II, line (5)) .....		0.	0.			0.



**Part II** **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
<b>Totals from Part I</b> .....	<b>0.</b>	<b>0.</b>				<b>0.</b>
<b>Totals, Part II (lines 1-5)</b> .....	Enter here and on page 1, Part I, line 11, col. (A). <b>0.</b>	Enter here and on page 1, Part I, line 11, col. (B). <b>0.</b>				Enter here and on page 1, Part II, line 27. <b>0.</b>

**Schedule K - Compensation of Officers, Directors, and Trustees** (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
<b>Total.</b> Enter here and on page 1, Part II, line 14 .....			<b>0.</b>

FORM 990-T	OTHER INCOME	STATEMENT	1
DESCRIPTION		AMOUNT	
TRANSPORTATION BENEFIT PROVIDED TO EMPLOYEES		35,495.	
TOTAL TO FORM 990-T, PAGE 1, LINE 12		35,495.	

# Underpayment of Estimated Tax by Corporations

Department of the Treasury  
Internal Revenue Service

▶ Attach to the corporation's tax return. **FORM 990-T**

▶ Go to [www.irs.gov/Form2220](http://www.irs.gov/Form2220) for instructions and the latest information.

**2018**

Name **THE MIAMI FOUNDATION, INC.** Employer identification number **65-0350357**

**Note:** Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

<b>Part I Required Annual Payment</b>			
1	Total tax (see instructions) .....	1	7,244.
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 .....	2a	
2b	Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method .....	2b	
2c	Credit for federal tax paid on fuels (see instructions) .....	2c	
2d	<b>Total.</b> Add lines 2a through 2c .....	2d	
3	Subtract line 2d from line 1. If the result is less than \$500, <b>do not</b> complete or file this form. The corporation does not owe the penalty .....	3	7,244.
4	Enter the tax shown on the corporation's 2017 income tax return. See instructions. <b>Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5</b> .....	4	
5	<b>Required annual payment.</b> Enter the <b>smaller</b> of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 .....	5	7,244.

**Part II Reasons for Filing** - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

6  The corporation is using the adjusted seasonal installment method.

7  The corporation is using the annualized income installment method.

8  The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

**Part III Figuring the Underpayment**

	(a)	(b)	(c)	(d)
9 <b>Installment due dates.</b> Enter in columns (a) through (d) the 15th day of the 4th ( <b>Form 990-PF filers:</b> Use 5th month), 6th, 9th, and 12th months of the corporation's tax year .....	04/15/18	06/15/18	09/15/18	12/15/18
10 <b>Required installments.</b> If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column .....	1,811.	1,811.	1,811.	1,811.
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions .....				
<b>Complete lines 12 through 18 of one column before going to the next column.</b>				
12 Enter amount, if any, from line 18 of the preceding column .....				
13 Add lines 11 and 12 .....				
14 Add amounts on lines 16 and 17 of the preceding column .....		1,811.	3,622.	5,433.
15 Subtract line 14 from line 13. If zero or less, enter -0- .....	0.	0.	0.	0.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- .....		1,811.	3,622.	
17 <b>Underpayment.</b> If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18 .....	1,811.	1,811.	1,811.	1,811.
18 <b>Overpayment.</b> If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column .....				

**Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.**

LHA For Paperwork Reduction Act Notice, see separate instructions. Form 2220 (2018)

**Part IV Figuring the Penalty**

	(a)	(b)	(c)	(d)
<b>19</b> Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. <b>(C corporations with tax years ending June 30 and S corporations:</b> Use 3rd month instead of 4th month. <b>Form 990-PF and Form 990-T filers:</b> Use 5th month instead of 4th month.) See instructions .....	<b>19</b>			
<b>20</b> Number of days from due date of installment on line 9 to the date shown on line 19 .....	<b>20</b>			
<b>21</b> Number of days on line 20 after 4/15/2018 and before 7/1/2018 .....	<b>21</b>			
<b>22</b> Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 5\% (0.05)}{365}$ ...	<b>22</b> \$	\$	\$	\$
<b>23</b> Number of days on line 20 after 06/30/2018 and before 10/1/2018 .....	<b>23</b>			
<b>24</b> Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 5\% (0.05)}{365}$ ...	<b>24</b> \$	\$	\$	\$
<b>25</b> Number of days on line 20 after 9/30/2018 and before 1/1/2019 .....	<b>25</b>			
<b>26</b> Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 5\% (0.05)}{365}$ ...	<b>26</b> \$	\$	\$	\$
<b>27</b> Number of days on line 20 after 12/31/2018 and before 4/1/2019 .....	<b>27</b>	<b>SEE ATTACHED WORKSHEET</b>		
<b>28</b> Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 6\% (0.06)}{365}$ ...	<b>28</b> \$	\$	\$	\$
<b>29</b> Number of days on line 20 after 3/31/2019 and before 7/1/2019 .....	<b>29</b>			
<b>30</b> Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{365}$ .....	<b>30</b> \$	\$	\$	\$
<b>31</b> Number of days on line 20 after 6/30/2019 and before 10/1/2019 .....	<b>31</b>			
<b>32</b> Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{365}$ .....	<b>32</b> \$	\$	\$	\$
<b>33</b> Number of days on line 20 after 9/30/2019 and before 1/1/2020 .....	<b>33</b>			
<b>34</b> Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{365}$ .....	<b>34</b> \$	\$	\$	\$
<b>35</b> Number of days on line 20 after 12/31/2019 and before 3/16/2020 .....	<b>35</b>			
<b>36</b> Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{366}$ .....	<b>36</b> \$	\$	\$	\$
<b>37</b> Add lines 22, 24, 26, 28, 30, 32, 34, and 36 .....	<b>37</b> \$	\$	\$	\$
<b>38 Penalty.</b> Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns .....	<b>38</b>			\$ <b>306.</b>

\* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at [www.irs.gov](http://www.irs.gov). You can also call 1-800-829-4933 to get interest rate information.



MORRISON, BROWN, ARGIZ, & FARRA, LLC.  
1450 BRICKELL AVENUE, 18TH FLOOR  
MIAMI, FL 33131

(305) 373-5500

NOVEMBER 18, 2019

THE MIAMI FOUNDATION, INC.  
40 NW 3RD STREET NO. 305  
MIAMI, FL 33128

THE MIAMI FOUNDATION, INC.:

WE HAVE PREPARED AND ENCLOSED YOUR 2018 FLORIDA RETURN.

FLORIDA FORM F-1120 RETURN:

THE FLORIDA FORM F-1120 RETURN HAS QUALIFIED FOR ELECTRONIC FILING. PLEASE REVIEW YOUR RETURN FOR COMPLETENESS AND ACCURACY. WE WILL THEN TRANSMIT YOUR RETURN ELECTRONICALLY TO THE FLORIDA DOR. DO NOT MAIL THE PAPER COPY OF THE RETURN TO FLORIDA DOR.

NO PAYMENT IS REQUIRED.

A COPY OF THE RETURN IS ENCLOSED FOR YOUR FILES. WE SUGGEST THAT YOU RETAIN THIS COPY INDEFINITELY.

VERY TRULY YOURS,

LISETTE RODRIGUEZ,  
CPA





THE MIAMI FOUNDATION, INC.

FEIN 65-0350357

1019
F-1120
R. 01/19
Page 2 of 6
12/31/18

This return is considered incomplete unless a copy of the federal return is attached.
If your return is not signed, or improperly signed and verified, it will be subject to a penalty. The statute of limitations will not start until your return is properly signed and verified. Your return must be completed in its entirety.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.
Sign here: Signature of officer (must be an original signature), Date, Title: INTERIM PRESIDENT AN
Paid preparers only: Preparer's signature, Date, Preparer check if self-employed, Preparer's PTIN: P01404398
Firm's name (or yours if self-employed) and address: MORRISON, BROWN, ARGIZ & FARRA, LLC, 1450 BRICKELL AVENUE, 18TH FLOOR, MIAMI, FL
FEIN: 65-0350357, ZIP: 33131

All Taxpayers Must Answer Questions A through M Below - See Instructions

- A. State of incorporation:
B. Florida Secretary of State document number:
C. Florida consolidated return? YES [ ] NO [X]
D. [ ] Initial return [ ] Final return (final federal return filed)
E. Principal Business Activity Code (as pertains to Florida): 812930
F. A Florida extension of time was timely filed? YES [ ] NO [X]
G-1. Corporation is a member of a controlled group? YES [ ] NO [X] If yes, attach list.
G-2. Part of a federal consolidated return? YES [ ] NO [X] If yes, provide: FEIN from federal consolidated return: Name of corporation:
G-3. The federal common parent has sales, property, or payroll in Florida? YES [ ] NO [X]
H. Location of corporate books: 40 NW 3RD STREET SUITE 305, MIAMI, FL 33128
I. Taxpayer is a member of a Florida partnership or joint venture? YES [ ] NO [X]
J. Enter date of latest IRS audit:
a) List years examined:
K. Contact person concerning this return: JOSEPH A. FERNANDEZ
a) Contact person telephone number:
b) Contact person e-mail address: GREX@MIAMIFOUNDATION
L. Type of federal return filed [ ] 1120 [ ] 1120S or 990-T

L

T

Where to Send Payments and Returns

Make check payable to and mail with return to:
Florida Department of Revenue
5050 W Tennessee Street
Tallahassee FL 32399-0135

If you are requesting a refund (Line 19), send your return to:
Florida Department of Revenue
PO Box 6440
Tallahassee FL 32314-6440

Remember:

- Make your check payable to the Florida Department of Revenue.
Write your FEIN on your check.
Sign your check and return.
Attach a copy of your federal return.
Attach a copy of your Florida Form F-7004 (extension of time) if applicable.





NAME THE MIAMI FOUNDATION, INC.

FEIN 65-0350357

TAXABLE YEAR ENDING 12/31/18

<b>Schedule I - Additions and/or Adjustments to Federal Taxable Income</b>	
1. Interest excluded from federal taxable income (see instructions)	1.
2. Undistributed net long-term capital gains (see instructions)	2.
3. Net operating loss deduction (attach schedule)	3.
4. Net capital loss carryover (attach schedule)	4.
5. Excess charitable contribution carryover (attach schedule)	5.
6. Employee benefit plan contribution carryover (attach schedule)	6.
7. Enterprise zone jobs credit (Florida Form F-1156Z)	7.
8. Ad valorem taxes allowable as enterprise zone property tax credit (Florida Form F-1158Z)	8.
9. Guaranty association assessment(s) credit	9.
10. Rural and/or urban high crime area job tax credits	10.
11. State housing tax credit	11.
12. Florida Tax Credit Scholarship Program Credits	12.
13. Renewable energy tax credits	13.
14. New markets tax credit	14.
15. Entertainment industry tax credit	15.
16. Research and Development tax credit	16.
17. Energy Economic Zone tax credit	17.
18. s. 168(k) IRC special bonus depreciation	18.
19. Other additions (attach schedule)	19.
20. Total Lines 1 through 19. Enter total on Line 20 and on Page 1, Line 3.	20.

<b>Schedule II - Subtractions from Federal Taxable Income</b>	
1. Gross foreign source income less attributable expenses (a) Enter s. 78, IRC income \$ _____ (b) plus s. 862, IRC dividends \$ _____ (c) less direct and indirect expenses \$ _____ Total ▶	1.
2. Gross subpart F income less attributable expenses (a) Enter s. 951, IRC subpart F income \$ _____ (b) less direct and indirect expenses \$ _____ Total ▶	2.
Note: Taxpayers doing business outside Florida enter zero on Lines 3 through 6, and complete Schedule IV.	
3. Florida net operating loss carryover deduction (see instructions)	3.
4. Florida net capital loss carryover deduction (see instructions)	4.
5. Florida excess charitable contribution carryover (see instructions)	5.
6. Florida employee benefit plan contribution carryover (see instructions)	6.
7. Nonbusiness income (from Schedule R, Line 3)	7.
8. Eligible net income of an international banking facility (see instructions)	8.
9. s. 179, IRC expense (see instructions)	9.
10. s. 168(k), IRC special bonus depreciation (see instructions)	10.
11. Other subtractions (attach statement)	11.
12. Total Lines 1 through 11. Enter total on Line 12 and on Page 1, Line 5.	12.



NAME THE MIAMI FOUNDATION, INC.

FEIN 65-0350357

TAXABLE YEAR ENDING 12/31/18

<b>Schedule III - Apportionment of Adjusted Federal Income</b>					
<b>III-A For use by taxpayers doing business outside Florida, except those providing insurance or transportation services.</b>					
	(a) WITHIN FLORIDA (Numerator)	(b) TOTAL EVERYWHERE (Denominator)	(c) Col. (a) ÷ Col. (b) Rounded to Six Decimal Places	(d) Weight <small>If any factor in Column (b) is zero, see note on Pg 9 of the instructions.</small>	(e) Weighted Factors Rounded to Six Decimal Places
1. Property (Schedule III-B below)				X 25% or	
2. Payroll				X 25% or	
3. Sales (Schedule III-C below)				X 50% or	
4. Apportionment fraction (Sum of Lines 1, 2, and 3, Column (e). Enter here and on Schedule IV, Line 2.					<b>1.000000</b>
<b>III-B For use in computing average value of property (use original cost).</b>	WITHIN FLORIDA		TOTAL EVERYWHERE		
	a. Beginning of year	b. End of year	c. Beginning of year	d. End of year	
1. Inventories of raw material, work in process, finished goods					
2. Buildings and other depreciable assets					
3. Land owned					
4. Other tangible and intangible (financial org. only) assets (attach schedule)					
5. Total (Lines 1 through 4)					
6. Average value of property					
a. Add Line 5, Columns (a) and (b) and divide by 2 (for within Florida) ..... 6a.	_____				
b. Add Line 5, Columns (c) and (d) and divide by 2 (for total everywhere) ..... 6b.	_____				
7. Rented property (8 times net annual rent)					
a. Rented property in Florida ..... 7a.	_____				
b. Rented property Everywhere ..... 7b.	_____				
8. Total (Lines 6 and 7). Enter on Line 1, Schedule III-A, Columns (a) and (b).					
a. Enter Lines 6 a. plus 7 a. and also enter on Schedule III-A, Line 1, Column (a) for total average property in Florida ..... 8a.	_____				
b. Enter Lines 6 b. plus 7 b. and also enter on Schedule III-A, Line 1, Column (b) for total average property Everywhere ..... 8b.	_____				
<b>III-C Sales Factor</b>	(a) TOTAL WITHIN FLORIDA (Numerator)	(b) TOTAL EVERYWHERE (Denominator)			
1. Sales (gross receipts)	<b>N/A</b>				
2. Sales delivered or shipped to Florida purchasers		<b>N/A</b>			
3. Other gross receipts (rents, royalties, interest, etc. when applicable)					
4. TOTAL SALES (Enter on Schedule III-A, Line 3, Columns (a) and (b))					
<b>III-D Special Apportionment Fractions (see instructions)</b>	(a) WITHIN FLORIDA	(b) TOTAL EVERYWHERE	(c) FLORIDA Fraction ((a) ÷ (b)) Rounded to Six Decimal Places		
1. Insurance companies (attach copy of Schedule T - Annual Report)					
2. Transportation services					

<b>Schedule IV - Computation of Florida Portion of Adjusted Federal Income</b>	
1. Apportionable adjusted federal income from Page 1, Line 6	1.
2. Florida apportionment fraction (Schedule III-A, Line 4)	2.
3. Tentative apportioned adjusted federal income (multiply Line 1 by Line 2)	3.
4. Net operating loss carryover apportioned to Florida (attach schedule; see instructions)	4.
5. Net capital loss carryover apportioned to Florida (attach schedule; see instructions)	5.
6. Excess charitable contribution carryover apportioned to Florida (attach schedule; see instructions)	6.
7. Employee benefit plan contribution carryover apportioned to Florida (attach schedule; see instructions)	7.
8. Total carryovers apportioned to Florida (add Lines 4 through 7)	8.
9. Adjusted federal income apportioned to Florida (Line 3 less Line 8; see instructions)	9.



NAME THE MIAMI FOUNDATION, INC. FEIN 65-0350357 TAXABLE YEAR ENDING 12/31/18

<b>Schedule V - Credits Against the Corporate Income/Franchise Tax</b>	
1. Florida health maintenance organization credit (attach assessment notice)	1.
2. Capital investment tax credit (attach certification letter)	2.
3. Enterprise zone jobs credit (from Florida Form F-1156Z attached)	3.
4. Community contribution tax credit (attach certification letter)	4.
5. Enterprise zone property tax credit (from Florida Form F-1158Z attached)	5.
6. Rural job tax credit (attach certification letter)	6.
7. Urban high crime area job tax credit (attach certification letter)	7.
8. Hazardous waste facility tax credit	8.
9. Florida alternative minimum tax (AMT) credit	9.
10. Contaminated site rehabilitation tax credit (attach tax credit certificate)	10.
11. State housing tax credit (attach certification letter)	11.
12. Florida Tax Credit: Scholarship Program Credits. (attach certificate)	12.
13. Florida renewable energy technologies investment tax credit	13.
14. Florida renewable energy production tax credit	14.
15. New markets tax credit	15.
16. Entertainment industry tax credit	16.
17. Research and Development tax credit	17.
18. Energy Economic Zone tax credit	18.
19. Other credits (attach schedule)	19.
20. Total credits against the tax (sum of Lines 1 through 19 not to exceed the amount on Page 1, Line 11). Enter total credits on Page 1, Line 12	20.

**Schedule R - Nonbusiness Income**

**Line 1. Nonbusiness income (loss) allocated to Florida**

<u>Type</u>	<u>Amount</u>
_____	_____
_____	_____
_____	_____
Total allocated to Florida .....	1. _____
(Enter here and on Page 1, Line 8)	

**Line 2. Nonbusiness income (loss) allocated elsewhere**

<u>Type</u>	<u>State/country allocated to</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
Total allocated elsewhere .....		2. _____

**Line 3. Total nonbusiness income**

Grand total. Total of Lines 1 and 2 ..... 3. \_\_\_\_\_  
(Enter here and on Schedule II, Line 7)



NAME THE MIAMI FOUNDATION, INC. FEIN 65-0350357 TAXABLE YEAR ENDING 12/31/18

**Estimated Tax Worksheet  
For Taxable Years Beginning On or After January 1, 2018**

1. Florida income expected in taxable year .....	1.	\$	<u>34,495.00</u>
2. Florida exemption \$50,000 (Members of a controlled group, see instructions on Page 14 of Florida Form F-1120N) .....	2.	\$	<u>34,495.00</u>
3. Estimated Florida net income (Line 1 less Line 2) .....	3.	\$	_____
4. Total Estimated Florida tax (5.5% of Line 3) .....		\$	_____
Less: Credits against the tax .....	4.	\$	_____
5. Computation of installments:			
Payment due dates and			
payment amounts:			
If 6/30 year end, last day of 4th month,			
otherwise last day of 5th month - Enter 0.25 of Line 4 .....	5a.		_____
Last day of 6th month - Enter 0.25 of Line 4 .....	5b.		_____
Last day of 9th month - Enter 0.25 of Line 4 .....	5c.		_____
Last day of fiscal year - Enter 0.25 of Line 4 .....	5d.		_____

NOTE: If your estimated tax should change during the year, you may use the amended computation below to determine the amended amounts to be entered on the declaration (Florida Form F-1120ES).

1. Amended estimated tax .....	1.	\$	_____
2. Less:			
(a) Amount of overpayment from last year elected for credit			
to estimated tax and applied to date .....	2a.	\$	_____
(b) Payments made on estimated tax declaration (Florida Form F-1120ES) .....	2b.	\$	_____
(c) Total of Lines 2(a) and 2(b) .....	2c.	\$	_____
3. Unpaid balance (Line 1 less Line 2(c)) .....	3.	\$	_____
4. Amount to be paid (Line 3 divided by number of remaining installments) .....	4.	\$	_____

**References**

*The following documents were mentioned in this form and are incorporated by reference in the rules indicated below. The forms are available online at [floridarevenue.com/forms](http://floridarevenue.com/forms).*

Form F-2220	Underpayment of Estimated Tax on Florida Corporate Income/Franchise Tax	Rule 12C-1.051, F.A.C.
Form F-7004	Florida Tentative Income/Franchise Tax Return and Application for Extension of Time to File Return	Rule 12C-1.051, F.A.C.
Form F-1156Z	Florida Enterprise Zone Jobs Credit Certificate of Eligibility for Corporate Income Tax	Rule 12C-1.051, F.A.C.
Form F-1158Z	Enterprise Zone Property Tax Credit	Rule 12C-1.051, F.A.C.
Form F-1120N	Instructions for Corporate Income/Franchise Tax Return	Rule 12C-1.051, F.A.C.
Form F-1120ES	Declaration/Installment of Florida Estimated	Rule 12C-1.051, F.A.C.



THE MIAMI FOUNDATION, INC.

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FEIN 65-0350357  
DATA Page 1 of 2

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