

Form **8879-EO****IRS e-file Signature Authorization
for an Exempt Organization**

OMB No. 1545-1878

For calendar year 2014, or fiscal year beginning _____, 2014, and ending _____, 20____

▶ **Do not send to the IRS. Keep for your records.****2014**Department of the Treasury
Internal Revenue Service▶ **Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.**

Name of exempt organization

Employer identification number

THE MIAMI FOUNDATION, INC.**65-0350357**

Name and title of officer

PAMELA OLMO**VP OF FINANCE AND CFO****Part I Type of Return and Return Information** (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a**, **2a**, **3a**, **4a**, or **5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b**, **2b**, **3b**, **4b**, or **5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	1b 65,357,937.
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	2b
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2014 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only☒ I authorize **MORRISON, BROWN, ARGIZ & FARRA, LLC**to enter my PIN **20052**

ERO firm name

Enter five numbers, but
do not enter all zeros

as my signature on the organization's tax year 2014 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2014 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ *Pamela Olmo* Date ▶ *10/9/15***Part III Certification and Authentication**

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

65061320052

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2014 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ _____ Date ▶ _____

ERO Must Retain This Form - See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So

LHA For Paperwork Reduction Act Notice, see instructions.
423051
09-29-14

Form **8879-EO** (2014)

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014Open to Public
Inspection**A For the 2014 calendar year, or tax year beginning and ending****B** Check if applicable:

- ☒ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization**THE MIAMI FOUNDATION, INC.**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

40 NW 3RD STREET

Room/suite

305

City or town, state or province, country, and ZIP or foreign postal code

MIAMI, FL 33128**F** Name and address of principal officer: **JAVIER ALBERTO SOTO****SAME AS C ABOVE****D** Employer identification number**65-0350357****E** Telephone number**305-371-2711****G** Gross receipts \$**65,357,937.****H(a)** Is this a group returnfor subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ **WWW.MIAMIFOUNDATION.ORG****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **1967****M** State of legal domicile: **FL****Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	22	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	22	
	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	22	
	6	Total number of volunteers (estimate if necessary)	0	
		7a	Total unrelated business revenue from Part VIII, column (C), line 12	0.
7b		Net unrelated business taxable income from Form 990-T, line 34	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	41,648,980.	53,983,590.
	9	Program service revenue (Part VIII, line 2g)	2,066,340.	2,935,489.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,662,607.	8,438,858.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	50,377,927.	65,357,937.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	12,791,109.
14		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,815,263.	1,770,212.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b		Total fundraising expenses (Part IX, column (D), line 25) ▶ 702,511.		
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	10,093,797.	22,387,536.
18		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	24,700,169.	50,851,692.
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	25,677,758.	14,506,245.
	20	Total assets (Part X, line 16)	187,363,360.	207,098,213.
	21	Total liabilities (Part X, line 26)	23,888,473.	29,133,355.
	22	Net assets or fund balances. Subtract line 21 from line 20	163,474,887.	177,964,858.

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.

Sign Here	Signature of officer	Date			
	PAMELA OLMO, VP OF FINANCE AND CFO Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	RICK COVERT				P00124528
	Firm's name ▶ MORRISON, BROWN, ARGIZ & FARRA, LLC	Firm's EIN ▶ 01-0720052			
	Firm's address ▶ 1450 BRICKELL AVENUE, 18TH FLOOR MIAMI, FL 33131	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 AccomplishmentsCheck 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?
- ☐
- Yes
- ☒
- No

If "Yes," describe these new services on Schedule O.

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

If "Yes," describe these changes on Schedule O.

- 4**
- Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 44,102,795. including grants of \$ 26,693,944.) (Revenue \$ 2,935,489.)

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 **44,102,795.**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	2 X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6 X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9 X	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b X	
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a	X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Form 990 (2014)

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 X	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23 X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. 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>	25a	X
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>	25b	X
26 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>	26	X
27 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>	27	X
28 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):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c 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>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 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>	32	X
33 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>	33	X
34 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>	34 X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
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>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 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>	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38 X	

Form 990 (2014)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 473		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 22		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		X
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		X
9 Sponsoring organizations maintaining donor advised funds.			
a Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	13a		
Note. See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 990 (2014)

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

☒**Section A. Governing Body and Management**

	1a	1b	22	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year			22		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
b Enter the number of voting members included in line 1a, above, who are independent			22		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2		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?			3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
6 Did the organization have members or stockholders?			6		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?			7a		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:					
a The governing body?			8a	X	
b Each committee with authority to act on behalf of the governing body?			8b	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			9		X

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?		X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c 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?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization	X	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

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 (or 1024 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.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: **PAMELA OLMO - 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 ContractorsCheck 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) MICHAEL A. MARQUEZ CHAIR	1.00	X		X				0.	0.	0.
(2) ALEX FRASER VICE-CHAIR	1.00	X		X				0.	0.	0.
(3) JUAN MARTINEZ TREASURY & SECRETARY	1.00	X		X				0.	0.	0.
(4) MARIA C. ALONSO PROGRAM COMMITTEE CHAIR	1.00	X						0.	0.	0.
(5) MARLON A. HILL, ESQ. GOVERNANCE COMMITTEE CHAIR	1.00	X						0.	0.	0.
(6) RICHARD E. SCHATZ, ESQ. DEVELOPMENT COMMITTEE CHAIR	1.00	X						0.	0.	0.
(7) MITCHELL A. BIERMAN, ESQ. BOARD MEMBER	1.00	X						0.	0.	0.
(8) PABLO CEJAS BOARD MEMBER	1.00	X						0.	0.	0.
(9) BARRON CHANNER BOARD MEMBER	1.00	X						0.	0.	0.
(10) MANUEL DIAZ, ESQ. BOARD MEMBER	1.00	X						0.	0.	0.
(11) JOSEPH A. FERNANDEZ BOARD MEMBER	1.00	X						0.	0.	0.
(12) RICHARD GIUSTO BOARD MEMBER	1.00	X						0.	0.	0.
(13) JOHN FUMAGALLI BOARD MEMBER	1.00	X						0.	0.	0.
(14) MELISSA KRINZMAN BOARD MEMBER	1.00	X						0.	0.	0.
(15) ANA LOPEZ-BLAZQUEZ BOARD MEMBER	1.00	X						0.	0.	0.
(16) DR. MICHAEL N. ROSENBERG BOARD MEMBER	1.00	X						0.	0.	0.
(17) DAVID P. SAMSON 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) RAFAEL SALDANA BOARD MEMBER	1.00	X						0.	0.	0.
(19) PENNY SHAFFER BOARD MEMBER	1.00	X						0.	0.	0.
(20) ALLISON P. SHIPLEY BOARD MEMBER	1.00	X						0.	0.	0.
(21) BRUCE TURKEL BOARD MEMBER	1.00	X						0.	0.	0.
(22) RAUL G. VALDES-FAULI BOARD MEMBER	1.00	X						0.	0.	0.
(23) JAVIER ALBERTO SOTO PRESIDENT & CEO	50.00			X				291,134.	0.	22,315.
(24) CHARISSE L. GRANT SENIOR VICE PRESIDENT	50.00			X				154,127.	0.	15,887.
(25) PAMELA OLMO VICE PRESIDENT OF FINANCE & CFO	50.00			X				138,370.	0.	12,530.
1b Sub-total								583,631.	0.	50,732.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								583,631.	0.	50,732.

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

3

- 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
- 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
- 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

	Yes	No
3		X
4	X	
5		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
SEI INVESTMENTS P.O. BOX 945794, ATLANTA, GA 30394	INVESTMENT ADVISORY	300,443.
THE WEINBACH GROUP, INC. 7301 SW 57TH COURT, MIAMI, FL 33143	MARKETING & PRINTING	145,437.

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

2

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	53,983,590.				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f			53,983,590.			
Program Service Revenue	2 a ADMINISTRATIVE FEES	Business Code	900099	2,935,489.	2,935,489.		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			2,935,489.			
	3 Investment income (including dividends, interest, and other similar amounts)			3,367,402.			3,367,402.
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
Other Revenue	6 a Gross rents	(i) Real	(ii) Personal				
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses			0.			
	c Gain or (loss)			5,071,456.			
	d Net gain or (loss)			5,071,456.			5,071,456.
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
	b Less: direct expenses	b					
	c Net income or (loss) from fundraising events						
	9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
	10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
	Miscellaneous Revenue			Business Code			
11 a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See instructions.			65,357,937.	2,935,489.	0.	8,438,858.	

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 ☐

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	26,693,944.	26,693,944.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
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	753,543.	172,421.	312,014.	269,108.
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	643,052.	147,924.	373,805.	121,323.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	373,617.	74,813.	224,999.	73,805.
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal	3,952.		3,952.	
c Accounting	63,398.		63,398.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	461,956.		461,956.	
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	207,400.		70,480.	136,920.
13 Office expenses	144,499.	97,604.	46,895.	
14 Information technology	95,399.		95,399.	
15 Royalties				
16 Occupancy	323,043.	140,689.	116,202.	66,152.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	295,309.		295,309.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	63,961.		63,961.	
23 Insurance	12,575.	1,528.	11,047.	
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 DIRECT SUPPORT	13,700,632.	13,700,632.		
b UNRELATED BUSINESS INCOME	3,545,000.		3,545,000.	
c ADMINISTRATIVE FEES	2,629,579.	2,629,579.		
d OTHER EXPENSES	700,046.	431,728.	264,228.	4,090.
e All other expenses	140,787.	11,933.	97,741.	31,113.
25 Total functional expenses. Add lines 1 through 24e	50,851,692.	44,102,795.	6,046,386.	702,511.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	4,742,542.	2	25,741,159.
	3 Pledges and grants receivable, net	2,598,725.	3	2,974,927.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	125,532.	9	95,922.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 933,319.		
	b Less: accumulated depreciation	10b 457,967.	10c	475,352.
	11 Investments - publicly traded securities	155,437,528.	11	156,736,278.
	12 Investments - other securities. See Part IV, line 11	19,965,884.	12	21,074,575.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	4,400,000.	15	0.
16 Total assets. Add lines 1 through 15 (must equal line 34)	187,363,360.	16	207,098,213.	
Liabilities	17 Accounts payable and accrued expenses	251,682.	17	903,826.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	23,623,725.	21	24,570,640.
	22 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		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 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	13,066.	25	3,658,889.
	26 Total liabilities. Add lines 17 through 25	23,888,473.	26	29,133,355.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	160,876,162.	27	175,289,931.
	28 Temporarily restricted net assets	2,598,725.	28	2,674,927.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	163,474,887.	33	177,964,858.
	34 Total liabilities and net assets/fund balances	187,363,360.	34	207,098,213.

Form 990 (2014)

Part XI Reconciliation of Net AssetsCheck 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	65,357,937.
2	Total expenses (must equal Part IX, column (A), line 25)	2	50,851,692.
3	Revenue less expenses. Subtract line 2 from line 1	3	14,506,245.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	163,474,887.
5	Net unrealized gains (losses) on investments	5	305,628.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	-321,902.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	177,964,858.

Part XII Financial Statements and ReportingCheck 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		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	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.	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? _____		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 _____		

Form 990 (2014)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Open to Public
Inspection

Name of the organization

THE MIAMI FOUNDATION, INC.

Employer identification number

65-0350357

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☒ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations _____

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see Instructions)	(vi) Amount of other support (see Instructions)
			Yes	No		
Total						

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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	7695303.	26079522.	21768342.	41648980.	53983590.	151175737
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	7695303.	26079522.	21768342.	41648980.	53983590.	151175737
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						151175737

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	7695303.	26079522.	21768342.	41648980.	53983590.	151175737
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2365195.	2879251.	3218116.	3099692.	3367402.	14929656.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						166105393
12 Gross receipts from related activities, etc. (see instructions)					12	6,396,850.
13 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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	91.01 %
15 Public support percentage from 2013 Schedule A, Part II, line 14	15	88.71 %
16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2013. 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 stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2014. 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 stop here. 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 10% -facts-and-circumstances test - 2013. 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 stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. 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"/>

Schedule A (Form 990 or 990-EZ) 2014

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

(Complete only if you checked the box on line 9 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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (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

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2014. 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 - 2013. 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 on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in 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.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in 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).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).		
9a 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))? If "Yes," provide detail in Part VI .		
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
11a		
b A family member of a person described in (a) above?		
11b		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
3		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI 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.	Yes	No
2a		
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 Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
2b		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .		
3a		
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 Part VI the role played by the organization in this regard.		
3b		

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. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(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	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(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	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
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	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			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	Distributable Amount. 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).		

Schedule A (Form 990 or 990-EZ) 2014

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

Section D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes		
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity		
3	Administrative expenses paid to accomplish exempt purposes of supported organizations		
4	Amounts paid to acquire exempt-use assets		
5	Qualified set-aside amounts (prior IRS approval required)		
6	Other distributions (describe in Part VI). See instructions.		
7	Total annual distributions. Add lines 1 through 6.		
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.		
9	Distributable amount for 2014 from Section C, line 6		
10	Line 8 amount divided by Line 9 amount		

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
a				
b				
c				
d				
e	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7	Excess distributions carryover to 2015. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a				
b				
c				
d	Excess from 2013			
e	Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2014

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.
----------------	--

Also complete this part for any additional information. (See instructions).

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.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and
its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

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 foundationCheck 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, 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. Do not 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 is not covered by the General Rule and/or the Special Rules does not 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 does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

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

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
1	JOHN S. AND JAMES L. KNIGHT FOUNDATION 200 SOUTH BISCAYNE BOULEVARD, SUITE 3300 MIAMI, FL 33131	\$ 33,283,108.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	BAYVIEW ASSET MANAGEMENT, LLC 4425 PONCE DE LEON BLVD 5TH FLOOR CORAL GABLES, FL 33146	\$ 1,787,387.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Employer identification number

65-0350357

Part II

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	<div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div>	\$ <div style="border-bottom: 1px solid black; width: 80%;"></div>	<div style="border-bottom: 1px solid black; width: 60%;"></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	<div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div>	\$ <div style="border-bottom: 1px solid black; width: 80%;"></div>	<div style="border-bottom: 1px solid black; width: 60%;"></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	<div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div>	\$ <div style="border-bottom: 1px solid black; width: 80%;"></div>	<div style="border-bottom: 1px solid black; width: 60%;"></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	<div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div>	\$ <div style="border-bottom: 1px solid black; width: 80%;"></div>	<div style="border-bottom: 1px solid black; width: 60%;"></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	<div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div>	\$ <div style="border-bottom: 1px solid black; width: 80%;"></div>	<div style="border-bottom: 1px solid black; width: 60%;"></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	<div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div>	\$ <div style="border-bottom: 1px solid black; width: 80%;"></div>	<div style="border-bottom: 1px solid black; width: 60%;"></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	<div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div>	\$ <div style="border-bottom: 1px solid black; width: 80%;"></div>	<div style="border-bottom: 1px solid black; width: 60%;"></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	<div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div> <div style="border-bottom: 1px solid black; height: 10px;"></div>	\$ <div style="border-bottom: 1px solid black; width: 80%;"></div>	<div style="border-bottom: 1px solid black; width: 60%;"></div>

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

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
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ **Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.**

OMB No. 1545-0047

2014

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" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	202	
2 Aggregate value of contributions to (during year)	18,331,397.	
3 Aggregate value of grants from (during year)	7,279,259.	
4 Aggregate value at end of year	65,975,790.	
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" to Form 990, Part IV, line 7.

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> 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 8/17/06, 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, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, 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" to 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 in 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 in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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 d ☐ Loan or exchange programs
 b ☐ Scholarly research e ☐ Other _____
 c ☐ Preservation for future generations

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" to 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	1c 23,623,725.
d Additions during the year	1d 961,915.
e Distributions during the year	1e
f Ending balance	1f 24,585,640.

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 in Part XIII ☒

Part V Endowment Funds. Complete if the organization answered "Yes" to 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 in 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:

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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" to 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		433,848.	10,988.	422,860.
d Equipment		59,948.	55,158.	4,790.
e Other		439,523.	391,821.	47,702.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				475,352.

Schedule D (Form 990) 2014

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to 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	21,074,575.	END-OF-YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ►	21,074,575.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to 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)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►		

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ►	

Part X Other Liabilities.

Complete if the organization answered "Yes" to 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	3,545,000.	
(2) UNFUNDED PROJECTED BENEFIT		
(3) OBLIGATION	113,889.	
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►	3,658,889.	

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" to Form 990, Part IV, line 12a.

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

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

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

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

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 1B:

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

PART IV, LINE 2B:

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

PART X, LINE 2:

THE FOUNDATION IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE
INTERNAL REVENUE CODE. THE FOUNDATION RECOGNIZES AND MEASURES TAX
POSITIONS BASED ON THEIR TECHNICAL MERIT AND ASSESSES THE LIKELIHOOD THAT

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" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

**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" to 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.

1 (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
5000 ROLE MODELS OF EXCELLENCE 1450 NE 2ND AVENUE, ROOM 227 MIAMI, FL 33130	650575014		5,000.	0.			DENISE MOON MEMORIAL FUND
6TH STREET DANCE STUDIO 1155 SW 6TH STREET MIAMI, FL 33130	65-7020895		9,883.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
6TH STREET DANCE STUDIO 1155 SW 6TH STREET MIAMI, FL 33130	65-7020895		11,378.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
A SAFE HAVEN FOR NEWBORNS 6801 NW 77TH AVENUE, SUITE 404 MIAMI, FL 33130			5,000.	0.			MIAMI HEAT CHARITABLE FUND
ACLU OF PENNSYLVANIA PO BOX 40008 PHILADELPHIA, PA 19162	23-1742013		15,000.	0.			THE GLBT (GAY LESBIAN BI-SEXUAL TRANSGENDER) FUND OF AMERICA
ADOPT-A-CLASSROOM, INC. 4141 NE SECOND AVENUE SUITE 203-B MIAMI, FL 33130	65-0828272		23,057.	0.			NDMF - ADOPT-A-CLASSROOM, INC.

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) (2014)

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
ADOPT-A-CLASSROOM, INC. 4141 NE SECOND AVENUE SUITE 203-B MIAMI, FL 33130	65-0828272		23,057.	0.			NDMF - ADOPT-A-CLASSROOM, INC.
ADOPT-A-CLASSROOM, INC. 4141 NE SECOND AVENUE SUITE 203-B MIAMI, FL 33130	65-0828272		23,057.	0.			NDMF - ADOPT-A-CLASSROOM, INC.
ADOPT-A-CLASSROOM, INC. 4141 NE SECOND AVENUE SUITE 203-B MIAMI, FL 33130	65-0828272		23,057.	0.			NDMF - ADOPT-A-CLASSROOM, INC.
ADRIENNE ARSHT CENTER FOUNDATION, INC. - 1300 BISCAYNE BOULEVARD - MIAMI, FL 33130	26-2567808		47,000.	0.			THE CODINA FAMILY CHARITABLE FUND
AFTER-SCHOOL ALL-STARS SOUTH FLORIDA - 6915 NW 77TH AVENUE - MIAMI, FL 33130	650715767		10,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
AFTER-SCHOOL ALL-STARS SOUTH FLORIDA - 6915 NW 77TH AVENUE - MIAMI, FL 33130	650715767		15,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
AIDS HIV SERVICES GROUP 315 TENTH STREET NE CHARLOTTESVILLE, VA 22904	52-1602516		15,000.	0.			GREENSPAN CHARITABLE FOUNDATION
AKRON CIVIC THEATRE 182 S. MAIN AKRON, OH 45236	34-1015948		50,000.	0.			THE KNIGHT AKRON THEATRE FUND
ALLIED MEDIA PROJECTS 4126 THIRD STREET DETROIT, MI 48201	01-0559608		50,000.	0.			THE KNIGHT ARTS CHALLENGE - DETROIT 2013 FUND

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
ALVIN AILEY DANCE FOUNDATION, INC. 405 W 55TH STREET NEW YORK, NY 10006	13-2584273		15,000.	0.			THE JEFFREY MILLER CHARITABLE FAMILY FUND
AMELIA EARHART ELEMENTARY SCHOOL 7400 WEST 24TH AVENUE HIALEAH, FL 33130			8,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
AMERICAN JEWISH COMMITTEE 9200 SOUTH DADELAND BOULEVARD SUITE MIAMI, FL 33130	13-5563393		10,000.	0.			RICHARD AND SUSAN LAMPEN FUND
AMERICAN JEWISH COMMITTEE 9200 SOUTH DADELAND BOULEVARD SUITE MIAMI, FL 33130	13-5563393		20,000.	0.			RICHARD AND SUSAN LAMPEN FUND
AMERICAN RED CROSS GREATER MIAMI & THE KEYS - 335 SW 27TH AVENUE - MIAMI, FL 33130			5,426.	0.			PHILIP D. MYERS FUND
AMERICANS FOR IMMIGRANT JUSTICE 3000 BISCAYNE BOULEVARD SUITE 400 MIAMI, FL 33130	650610872		15,000.	0.			DENISE MOON MEMORIAL FUND
AMERICANS FOR IMMIGRANT JUSTICE 3000 BISCAYNE BOULEVARD SUITE 400 MIAMI, FL 33130	650610872		50,000.	0.			DENISE MOON MEMORIAL FUND
AMERICANS FOR IMMIGRANT JUSTICE 3000 BISCAYNE BOULEVARD SUITE 400 MIAMI, FL 33130	650610872		50,000.	0.			DENISE MOON MEMORIAL FUND
AMERICA'S MOMS FOR SOLDIERS PO BOX 668487 POMPANO BEACH, FL 33130	26-4002442		7,356.	0.			MIAMI HEAT CHARITABLE FUND

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
ANN STORCK CENTER, INC. 1790 S.W. 43RD WAY FORT LAUDERDALE, FL 33130	59-2171081		53,522.	0.			THE MARVIN GUTTER ENDOWMENT FUND
AQUA FOUNDATION FOR WOMEN, INC. 4500 BISCAYNE BLVD., SUITE 340 MIAMI, FL 33130	200873622		6,666.	0.			GLBT COMMUNITY PROJECTS FUND
AQUA FOUNDATION FOR WOMEN, INC. 4500 BISCAYNE BLVD., SUITE 340 MIAMI, FL 33130	200873622		8,334.	0.			GLBT COMMUNITY PROJECTS FUND
ARTCENTER / SOUTH FLORIDA 924 LINCOLN ROAD, SUITE 205 MIAMI BEACH, FL 33130	592423867		7,500.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
ARTCENTER / SOUTH FLORIDA 924 LINCOLN ROAD, SUITE 205 MIAMI BEACH, FL 33130	592423867		12,993.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
ARTCENTER / SOUTH FLORIDA 924 LINCOLN ROAD, SUITE 205 MIAMI BEACH, FL 33130	592423867		37,630.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
ARTCENTER / SOUTH FLORIDA 924 LINCOLN ROAD, SUITE 205 MIAMI BEACH, FL 33130	592423867		44,816.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
ARTCENTER/SOUTH FLORIDA 800 LINCOLN RD MIAMI BEACH, FL 33130	592423867		50,000.	0.			ARTCENTER/SOUTH FLORIDA - STATE OF FLORIDA CULTURAL ENDOWMENT FUND
ARTS FOR LEARNING MIAMI, INC. 1900 BISCAYNE BOULEVARD SUITE 201 MIAMI, FL 33130	65-1141598		25,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND

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
ARTS LEAGUE OF MICHIGAN 311 EAST GRANT RIVER AVENUE DETROIT, MI 48226	38-3027410		25,576.	0.			THE KNIGHT ARTS CHALLENGE - DETROIT 2013 FUND
ARTS LEAGUE OF MICHIGAN 311 EAST GRANT RIVER AVENUE DETROIT, MI 48226	38-3027410		34,494.	0.			THE KNIGHT ARTS CHALLENGE - DETROIT 2013 FUND
ARTS LEAGUE OF MICHIGAN 311 EAST GRANT RIVER AVENUE DETROIT, MI 48226	38-3027410		39,930.	0.			THE KNIGHT ARTS CHALLENGE - DETROIT 2013 FUND
ARTSPRING, INC. PO BOX 343432 FLORIDA CITY, FL 33130	650347274		15,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
ASU FOUNDATION FOR A NEW AMERICAN UNIVERSITY - P.O. BOX 2260 - TEMPE, AZ 85287-0412	86-6051042		172,118.	0.			THE KNIGHT JOURNALISM EDUCATION INNOVATION FUND
ASU FOUNDATION FOR A NEW AMERICAN UNIVERSITY - P.O. BOX 2260 - TEMPE, AZ 85287-0412	86-6051042		190,321.	0.			THE KNIGHT JOURNALISM EDUCATION INNOVATION FUND
BABSON COLLEGE 231 FOREST STREET BABSON PARK, MA 01002-5000	04-2103544		10,000.	0.			THE JOHN S. & JAMES L. KNIGHT FOUNDATION FUND
BAKEHOUSE ART COMPLEX, INC. 561 NORTHWEST 32ND STREET MIAMI, FL 33130	592104864		7,500.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND
BAPTIST HEALTH FOUNDATION 1575 SAN IGNACIO AVENUE SUITE 406 CORAL GABLES, FL 33130	591923401		7,000.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND

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
BAPTIST HEALTH SOUTH FLORIDA FOUNDATION, INC. - 1500 MONZA AVENUE SUITE 300 - CORAL GABLES, FL 33130	591923401		9,995.	0.			THE MATTHEW S. GREER FUND
BAPTIST HEALTH SOUTH FLORIDA FOUNDATION, INC. - 1500 MONZA AVENUE SUITE 300 - CORAL GABLES, FL 33130	591923401		10,000.	0.			THE MATTHEW S. GREER FUND
BAYFRONT PARK MANAGEMENT TRUST 301 NORTH BISCAYNE BOULEVARD MIAMI, FL 33130			7,500.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND
BELAFONTE TACOLCY CENTER, INC. 6161 NORTHWEST 9TH AVENUE MIAMI, FL 33130	591376077		15,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
BEN SHEPPARD ELEMENTARY 5700 WEST 24 AVE HIALEAH, FL 33130	59-6000572		8,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
BENJAMIN PRIVATE SCHOOL, INC. 11000 ELLISON WILSON RD NORTH PALM BEACH, FL 33130	59-1536502		10,600.	0.			SABADELL UNITED BANK, N.A. FUND
BENNINGTON COLLEGE 1 COLLEGE DRIVE BENNINGTON,, VT 05753	03-0179414		15,000.	0.			THE CINDI NASH FAMILY FUND
BIG BROTHERS BIG SISTERS OF GREATER MIAMI, INC. - 701 SW 27TH AVENUE SUITE 800 - MIAMI, FL 33130	596166904		6,250.	0.			THE IRIE FOUNDATION
BIG BROTHERS BIG SISTERS OF GREATER MIAMI, INC. - 701 SW 27TH AVENUE SUITE 800 - MIAMI, FL 33130	596166904		15,000.	0.			THE IRIE FOUNDATION

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
BIG BROTHERS BIG SISTERS OF NEW YORK CITY - 223 EAST 30TH STREET - NEW YORK, NY 10006-3724	13-5600383		10,000.	0.			HELENA RUBINSTEIN PHILANTHROPIC FUND
BIKERS AGAINST CHILD ABUSE OF FLORIDA - PO BOX 432555 - SOUTH MIAMI, FL 33130	87-0568264		10,000.	0.			THE CINDI NASH FAMILY FUND
BLACK ARCHIVES, HISTORY AND RESEARCH FOUNDATION OF FLORIDA - 5400 NW 22 AVE., BLD C, STE 101 - MIAMI, FL 33130	59-1808272		50,000.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
BRANCHES, INC. 11500 NW 12TH AVE MIAMI, FL 33130	650716969		15,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
BRANDEIS UNIVERSITY 415 SOUTH ST. WALTHAM, MA 01002-5000	04-2103552		5,000.	0.			THE MIAMI HEAT SCHOLARSHIP FUND
BREAKTHROUGH MIAMI, INC. 3250 SW THIRD AVENUE SIXTH FLOOR MIAMI, FL 33130	262105534		20,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
CAMILLUS HEALTH CONCERN, INC. 336 NW 5TH STREET MIAMI, FL 33130	650063921		20,000.	0.			THE GENESIS FUND
CAMILLUS HEALTH CONCERN, INC. 336 NW 5TH STREET MIAMI, FL 33130	650063921		30,000.	0.			THE GENESIS FUND
CAMILLUS HOUSE, INC. 336 NW 5TH STREET MIAMI, FL 33130	65-0032862		5,000.	0.			HECTOR FAMILY DONOR ADVISED FUND

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
CAMILLUS HOUSE, INC. 336 NW 5TH STREET MIAMI, FL 33130	65-0032862		10,000.	0.			HECTOR FAMILY DONOR ADVISED FUND
CAMILLUS HOUSE, INC. 336 NW 5TH STREET MIAMI, FL 33130	65-0032862		40,000.	0.			HECTOR FAMILY DONOR ADVISED FUND
CASIMIRO GLOBAL FOUNDATION 10773 NW 58TH STREET DORAL, FL 33130	45-5146977		25,000.	0.			THE JOHN S. & JAMES L. KNIGHT FOUNDATION FUND
CATALYST MIAMI 1900 BISCAYNE BLVD., STE. 200 MIAMI, FL 33130	650690368		7,502.	0.			THE IMAGINE FUND
CATHOLIC CHARITIES - NEW LIFE FAMILY CENTER - 3620 NW 1ST AVENUE - MIAMI, FL 33130	65-0801319		12,500.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
CCDH, INC. 9555 NORTH KENDALL DRIVE, SUITE 206 MIAMI, FL 33130	591617964		36,429.	0.			NDMF - COMMUNITY COMMITTEE FOR DEVELOPMENTAL HANDICAPS FUND
CCDH, INC. 9555 NORTH KENDALL DRIVE, SUITE 206 MIAMI, FL 33130	591617964		36,429.	0.			NDMF - COMMUNITY COMMITTEE FOR DEVELOPMENTAL HANDICAPS FUND
CCDH, INC. 9555 NORTH KENDALL DRIVE, SUITE 206 MIAMI, FL 33130	591617964		36,429.	0.			NDMF - COMMUNITY COMMITTEE FOR DEVELOPMENTAL HANDICAPS FUND
CCDH, INC. 9555 NORTH KENDALL DRIVE, SUITE 206 MIAMI, FL 33130	591617964		36,429.	0.			NDMF - COMMUNITY COMMITTEE FOR DEVELOPMENTAL HANDICAPS FUND

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
CENTER FOR ADVOCACY FOR THE RIGHTS AND INTERESTS - 1500 JFK BLVD., SUITE 1500 - PHILADELPHIA, PA 19162	23-2075900		10,000.	0.			THE GLBT (GAY LESBIAN BI-SEXUAL TRANSGENDER) FUND OF AMERICA
CENTER FOR CHANGE 2817 BELCO DRIVE, SUITE 9 ORLANDO, FL 33130			7,000.	0.			BCBS EMBRACE MINI GRANTS - ORLANDO
CENTER FOR FAMILY & CHILD ENRICHMENT, INC. - 1825 NW 167TH STREET SUITE 102 - MIAMI, FL 33130	591775062		9,000.	0.			BCBS EMBRACE MINI GRANTS - MIAMI/OPA LOCKA
CENTER FOR MULTICULTURAL WELLNESS AND PREVENTION, INC. - 641 NORTH RIO GRANDE AVENUE - ORLANDO, FL 33130	59-3368679		7,000.	0.			BCBS EMBRACE MINI GRANTS - ORLANDO
CENTRO DE PERIODISMO INVESTIGATIVO CALLE FEDERICO COSTAS #170 HATO REY, PR 00914	66-0705065		12,500.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
CENTRO MATER CHILD CARE SERVICES, INC. - 800 WEST 29TH STREET - HIALEAH, FL 33130	208083301		6,400.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
CHAPMAN PARTNERSHIP 1550 NORTH MIAMI AVENUE MIAMI, FL 33130	650425069		20,000.	0.			DENISE MOON MEMORIAL FUND
CHAPMAN PARTNERSHIP 1550 NORTH MIAMI AVENUE MIAMI, FL 33130	650425069		40,000.	0.			DENISE MOON MEMORIAL FUND
CHAPMAN PARTNERSHIP 1550 NORTH MIAMI AVENUE MIAMI, FL 33130	650425069		40,000.	0.			DENISE MOON MEMORIAL FUND

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
CHARLEE OF DADE COUNTY, INC. 155 SOUTH MIAMI AVENUE SUITE 700 MIAMI, FL 33130	592302250		10,000.	0.			HECTOR FAMILY DONOR ADVISED FUND
CHARLEE OF DADE COUNTY, INC. 155 SOUTH MIAMI AVENUE SUITE 700 MIAMI, FL 33130	592302250		50,000.	0.			HECTOR FAMILY DONOR ADVISED FUND
CHARLEE OF DADE COUNTY, INC. 155 SOUTH MIAMI AVENUE SUITE 700 MIAMI, FL 33130	592302250		70,000.	0.			HECTOR FAMILY DONOR ADVISED FUND
CHARLES H. WRIGHT MUSEUM OF AFRICAN AMERICAN HISTORY - 315 E. WARREN AVENUE - DETROIT, MI 48201-3421	38-1882096		40,000.	0.			THE KNIGHT ARTS CHALLENGE - DETROIT 2013 FUND
CHARLES H. WRIGHT MUSEUM OF AFRICAN AMERICAN HISTORY - 315 E. WARREN AVENUE - DETROIT, MI 48201-3421	38-1882096		40,413.	0.			THE KNIGHT ARTS CHALLENGE - DETROIT 2013 FUND
CHARLOTTESVILLE TOMORROW PO BOX 1591 CHARLOTTESVILLE, VA 22904-4276	20-3013557		37,500.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
CHARLOTTESVILLE-ALBEMARLE SPCA 3355 BERKMAR DRICE CHARLOTTESVILLE, VA 22901			7,000.	0.			GREENSPAN CHARITABLE FOUNDATION
CHILDREN INTERNATIONAL 2000 EAST RED BRIDGE ROAD KANSAS CITY, MO 63108	44-6005794		40,000.	0.			MAX LINDEMANN PERMANENT MEMORIAL FUND
CHILDREN INTERNATIONAL 2000 EAST RED BRIDGE ROAD KANSAS CITY, MO 63108	44-6005794		60,000.	0.			MAX LINDEMANN PERMANENT MEMORIAL FUND

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
CHRISTIAN CULTURAL DEVELOPMENT FOUNDATION INC. - 1404 E. LAS OLAS BLVD #30061 - FORT LAUDERDALE, FL 33130	13-4224704		5,072.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
CHRISTIAN CULTURAL DEVELOPMENT FOUNDATION INC. - 1404 E. LAS OLAS BLVD #30061 - FORT LAUDERDALE, FL 33130	13-4224704		9,970.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
CHRISTIAN CULTURAL DEVELOPMENT FOUNDATION INC. - 1404 E. LAS OLAS BLVD #30061 - FORT LAUDERDALE, FL 33130	13-4224704		10,000.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
CITRUS HEALTH NETWORK, INC. 4175 WEST 20TH AVENUE HIALEAH, FL 33130	591865751		10,000.	0.			GLBT COMMUNITY PROJECTS FUND
CITY LIMITS C/O THE COMMUNITY SERVICE SOCIETY OF NY - 105 EAST 22ND STREET - NEW YORK, NY 10006-3724	13-5562202		50,000.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
CITY OF HIALEAH LIBRARY 190 WEST 49TH STREET HIALEAH, FL 33130	32-0119892		8,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
CITY OF HIALEAH PARKS AND RECREATION - 5601 EAST 8TH AVENUE, BUILDING #4 - HIALEAH, FL 33130	59-6000335		8,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
CITY OF HIALEAH PARKS AND RECREATION - 5601 EAST 8TH AVENUE, BUILDING #4 - HIALEAH, FL 33130	59-6000335		8,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
CITY OF HIALEAH PARKS AND RECREATION - 5601 EAST 8TH AVENUE, BUILDING #4 - HIALEAH, FL 33130	59-6000335		8,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH

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
CITY OF HIALEAH PARKS AND RECREATION - 5601 EAST 8TH AVENUE, BUILDING #4 - HIALEAH, FL 33130	59-6000335		8,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
CITY OF HIALEAH PARKS AND RECREATION - 5601 EAST 8TH AVENUE, BUILDING #4 - HIALEAH, FL 33130	59-6000335		8,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
CITY OF HIALEAH PARKS AND RECREATION - 5601 EAST 8TH AVENUE, BUILDING #4 - HIALEAH, FL 33130	59-6000335		8,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
CITY OF HIALEAH PARKS AND RECREATION - 5601 EAST 8TH AVENUE, BUILDING #4 - HIALEAH, FL 33130	59-6000335		12,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
CITY OF HIALEAH, EDUCATION AND COMMUNITY SERVICES - 7400 WEST 24TH AVENUE - HIALEAH, FL 33130			6,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
CITY OF MIAMI 3500 PAN AMERICAN DRIVE MIAMI, FL 33130			70,000.	0.			THE PLAY TO WIN FOUNDATION
CITY OF MIAMI 3500 PAN AMERICAN DRIVE MIAMI, FL 33130			1,000,000.	0.			THE PLAY TO WIN FOUNDATION
CITY THEATRE, INC. 444 BRICKELL AVE., STE. # 229 MIAMI, FL 33130	650642183		5,000.	0.			MIAMI HEAT CHARITABLE FUND
CITY THEATRE, INC. 444 BRICKELL AVE., STE. # 229 MIAMI, FL 33130	650642183		7,500.	0.			MIAMI HEAT CHARITABLE FUND

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
CLARA WHITE MISSION, INC. 613 W ASHLEY ST JACKSONVILLE, FL 33130			9,000.	0.			BCBS EMBRACE MINI GRANTS - JACKSONVILLE
CNC (CUBAN AMERICAN NATIONAL COUNCIL, INC.) - 1223 SOUTHWEST 4TH STREET - MIAMI, FL 33130	237269955		6,240.	0.			CNC CINTAS CHARITABLE FUND
COCONUT GROVE ARTS FESTIVAL 3390 MARY STREET, SUITE 128 COCONUT GROVE, FL 33130			9,800.	0.			SABADELL UNITED BANK, N.A. FUND
COLLEGE SUMMIT FLORIDA 6101 BLUE LAGOON DRIVE, SUITE 430 MIAMI, FL 33130	522007028		20,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
COLORADO NONPROFIT DEVELOPMENT CENTER - 789 SHERMAN STREET, SUITE 250 - DENVER, CO 80111	84-1493585		50,000.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
COLUMBIA LAW SCHOOL 435 WEST 116TH STREET NEW YORK, NY 10006-3724	13-6163907		5,000.	0.			RICHARD AND SUSAN LAMPEN FUND
COLUMBIA LAW SCHOOL 435 WEST 116TH STREET NEW YORK, NY 10006-3724	13-6163907		20,000.	0.			RICHARD AND SUSAN LAMPEN FUND
COMMON THREADS, INC. 500 NORTH DEARBORN STREET SUITE 605 CHICAGO, IL 60515	20-0106847		8,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
COMMUNITIES IN SCHOOLS OF MIAMI, INC. - 11965 SW 142ND TERRACE SUITE 102 - MIAMI, FL 33130	650140488		40,000.	0.			DENISE MOON MEMORIAL FUND

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
COMMUNITIES IN SCHOOLS OF MIAMI, INC. - 11965 SW 142ND TERRACE SUITE 102 - MIAMI, FL 33130	650140488		40,000.	0.			DENISE MOON MEMORIAL FUND
COMMUNITY RENEWAL SOCIETY 111 WEST JACKSON BOULEVARD, SUITE 8 CHICAGO, IL 60515	36-2000728		50,000.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
COMMUNITY SMILES 750 NORTHWEST 20TH STREET MIAMI, FL 33130	23-7372819		17,500.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
COMMUNITY TELEVISION FOUNDATION OF SOUTH FLORIDA, INC. - 14901 NE 20TH AVENUE - MIAMI, FL 33130	590737868		15,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
CONNECTICUT CENTER FOR PATIENT SAFETY - 26 WEST WOODLAND DRIVE - REDDING, CT 06106	20-1517678		25,000.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
CONNECTICUT NEWS PROJECT, INC 53 OAK STREET, SUITE 15 HARTFORD, CT 06106	27-0583046		50,000.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
CONSERVANCY OF SOUTHWEST FLORIDA 1450 MERRIHUE DRIVE NAPLES, FL 33130	59-1157084		20,000.	0.			SABADELL UNITED BANK, N.A. FUND
CUBAN AMERICAN BAR ASSOCIATION 25 WEST FLAGLER STREET MIAMI, FL 33130	26-0221044		10,500.	0.			SABADELL UNITED BANK, N.A. FUND
CUBAN AMERICAN BAR ASSOCIATION'S PRO BONO PROJECT, INC. - 2400 SOUTH DIXIE HIGHWAY SECOND FLOOR - MIAMI, FL 33130	260221044		15,000.	0.			DENISE MOON MEMORIAL FUND

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
CUBAN AMERICAN BAR ASSOCIATION'S PRO BONO PROJECT, INC. - 2400 SOUTH DIXIE HIGHWAY SECOND FLOOR - MIAMI, FL 33130	260221044		50,000.	0.			DENISE MOON MEMORIAL FUND
CUBAN AMERICAN BAR ASSOCIATION'S PRO BONO PROJECT, INC. - 2400 SOUTH DIXIE HIGHWAY SECOND FLOOR - MIAMI, FL 33130	260221044		50,000.	0.			DENISE MOON MEMORIAL FUND
CUBANK AMERICAN BAR FOUNDATION 25 WEST FLAGLER STREET, SUITE 800 MIAMI, FL 33130			7,500.	0.			SABADELL UNITED BANK, N.A. FUND
DAN MARINO FOUNDATION, INC. 400 NORTH ANDREWS AVENUE FORT LAUDERDALE, FL 33130	65-0320556		5,000.	0.			MIAMI HEAT CHARITABLE FUND
DARE TO DREAM YOUNG GIRLS NETWORK, INC. - 820 E. PARK AVENUE, BLDG. A - TALLAHASSEE, FL 33130			6,000.	0.			BCBS EMBRACE MINI GRANTS - TALLAHASSEE
DETROIT ARTISTS WORKSHOP P.O. BOX 341099 DETROIT, MI 48201-3421	14-1926570		10,000.	0.			THE KNIGHT ARTS CHALLENGE - DETROIT 2013 FUND
DEVEREUX FLORIDA-DEVEREUX KIDS 1419 WEST WATERS AVENUE SUITE 117 TAMPA, FL 33130	59-3593023		9,000.	0.			BCBS EMBRACCE MINI GRANTS - TAMPA SULPHUR SPRINGS
DIGIT ALL SYSTEMS 200 EAST LEXINGTON STREET SUITE 160 BALTIMORE, MD 21230	32-0028272		10,000.	0.			THE BME FUND OPEN SOCIETY
DISTINGUISHED YOUNG GENTLEMEN OF AMERICA, INC. - 2334 NE CAPITAL CIRCLE - TALLAHASSEE, FL 33130	27-0745257		5,000.	0.			BCBS EMBRACE MINI GRANTS - TALLAHASSEE

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
DISTINGUISHED YOUNG GENTLEMEN OF AMERICA, INC. - 2334 NE CAPITAL CIRCLE - TALLAHASSEE, FL 33130	27-0745257		6,000.	0.			BCBS EMBRACE MINI GRANTS - TALLAHASSEE
DUKE UNIVERSITY - 14BT ANGELS DUMC 3624 DURHAM, NC 27710			5,000.	0.			KEITH AND RENATA WARD FAMILY FUND
EARLY LEARNING COALITION OF ORANGE COUNTY - 1940 TRAYLOR BOULEVARD - ORLANDO, FL 33130			6,000.	0.			BCBS EMBRACE MINI GRANTS - ORLANDO
EARTH LEARNING, INC. 8201 SW 99TH COURT MIAMI, FL 33130	571170959		17,500.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
EASTER SEALS SOUTH FLORIDA 1475 NW 14TH AVENUE MIAMI, FL 33130	59-0722783		5,583.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
EASTER SEALS SOUTH FLORIDA 1475 NW 14TH AVENUE MIAMI, FL 33130	59-0722783		10,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
EASTER SEALS SOUTH FLORIDA 1475 NW 14TH AVENUE MIAMI, FL 33130	59-0722783		17,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
EMBRACE GIRLS FOUNDATION, INC. 18520 NW 67TH AVENUE SUITE 340 MIAMI, FL 33130			6,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
EMBRACE MUSIC FOUNDATION 20721 NORTHWEST 1ST STREET PEMBROKE PINES, FL 33130			6,500.	0.			THE IRIE FOUNDATION

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
EMBRY-RIDDLE AERONAUTICAL UNIVERSITY, INC. - 600 S. CLYDE MORRIS BOULEVARD - DAYTONA BEACH, FL 33130	59-0936101		6,450.	0.			JAMES W. AND ESSIE BARFIELD FUND
EQUALITY CALIFORNIA INSTITUTE 8106 SANTA MONICA BOULEVARD WEST HOLLYWOOD, CA 90046			5,000.	0.			HARVEY MILK FOUNDATION
EQUALITY FLORIDA INSTITUTE, INC. P.O.BOX 20786 TAMPA, FL 33130	59-3435235		10,000.	0.			GLBT COMMUNITY PROJECTS FUND
EXCHANGE FOR CHANGE 2103 CORAL WAY, SUITE 202 MIAMI, FL 33130			6,615.	0.			THE EXCHANGE FOR CHANGE FUND
EXPERIENCE AVIATION, INC. 15001 NORTHWEST 42ND AVENUE MIAMI, FL 33130	753200386		17,500.	0.			THE CHARLES AND EURYDICE BROYARD FUND
EXPERIENCE AVIATION, INC. 15001 NORTHWEST 42ND AVENUE MIAMI, FL 33130	753200386		28,635.	0.			THE CHARLES AND EURYDICE BROYARD FUND
FAIRCHILD TROPICAL BOTANIC GARDEN, INC. - 10901 OLD CUTLER ROAD - CORAL GABLES, FL 33130	590668480		10,000.	0.			GREER FAMILY FUND
FAMILY RESOURCE CENTER OF SOUTH FLORIDA, INC. - 155 SOUTH MIAMI AVENUE SUITE # 400 - MIAMI, FL 33130	591788265		20,000.	0.			DENISE MOON MEMORIAL FUND
FAMILY RESOURCE CENTER OF SOUTH FLORIDA, INC. - 155 SOUTH MIAMI AVENUE SUITE # 400 - MIAMI, FL 33130	591788265		50,000.	0.			DENISE MOON MEMORIAL FUND

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
FAMILY RESOURCE CENTER OF SOUTH FLORIDA, INC. - 155 SOUTH MIAMI AVENUE SUITE # 400 - MIAMI, FL 33130	591788265		50,000.	0.			DENISE MOON MEMORIAL FUND
FBI MIAMI CITIZENS ACADEMY ALUMNI ASSOCIATION - 16320 NW 2ND AVENUE - NORTH MIAMI BEACH, FL 33130	20-3282804		11,000.	0.			THE STEPHEN HAROLD SCHOTT FAMILY FOUNDATION
FEEDING AMERICA TAMPA BAY 4702 TRANSPORT DRIVE BUILDING 6 TAMPA, FL 33130	59-2116576		11,000.	0.			BCBS EMBRACE MINI GRANTS - TAMPA SULPHUR SPRINGS
FEEDING SOUTH FLORIDA 2501 SW 32ND TERRACE PEMBROKE PARK, FL 33130	592097520		7,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
FEEDING SOUTH FLORIDA 2501 SW 32ND TERRACE PEMBROKE PARK, FL 33130	592097520		25,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
FLIPANY 819 NE 26TH ST., BUILDING K FT. LAUDERDALE, FL 33130			6,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
FLORIDA BAPTIST CHILDREN'S HOMES, INC. - 7748 SW 95TH TERRACE - MIAMI, FL 33130	59-0657326		6,450.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
FLORIDA BAPTIST CHILDREN'S HOMES, INC. - 7748 SW 95TH TERRACE - MIAMI, FL 33130	59-0657326		25,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
FLORIDA CENTER FOR INVESTIGATIVE REPORTING - PO BOX 416362 - MIAMI BEACH, FL 33130	27-1187698		25,000.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND

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
FLORIDA DEPARTMENT OF HEALTH IN MIAMI-DADE COUNTY - 18255 HOMESTEAD AVENUE - MIAMI, FL 33130			8,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
FLORIDA FILM INSTITUTE, INC. 640 NORTHEAST 124TH STREET NORTH MIAMI, FL 33130	65-0928165		10,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
FLORIDA HEART RESEARCH INSTITUTE 4770 BISCAYNE BLVD SUITE 500 MIAMI, FL 33130	590674260		10,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
FLORIDA HOSPITAL TAMPA BAY NETWORK 3100 EAST FLETCHER AVENUE TAMPA, FL 33130			5,000.	0.			WEISSER FAMILY FUND
FLORIDA INTERNATIONAL BANKER'S ASSOCIATION - 80 SW 8TH STREET SUITE 2505 - MIAMI, FL 33130	591921450		21,060.	0.			FIBA FELIX H. REYLER MEMORIAL SCHOLARSHIP FUND
FLORIDA INTERNATIONAL UNIVERSITY 11200 SW 8TH STREET - MARC 253 MIAMI, FL 33130			5,000.	0.			THE MIAMI HEAT SCHOLARSHIP FUND
FLORIDA INTERNATIONAL UNIVERSITY 11200 SW 8TH STREET - MARC 253 MIAMI, FL 33130			5,000.	0.			THE MIAMI HEAT SCHOLARSHIP FUND
FLORIDA INTERNATIONAL UNIVERSITY 11200 SW 8TH STREET - MARC 253 MIAMI, FL 33130			5,500.	0.			THE MIAMI HEAT SCHOLARSHIP FUND
FLORIDA INTERNATIONAL UNIVERSITY 11200 SW 8TH STREET - MARC 253 MIAMI, FL 33130			5,000.	0.			THE MIAMI HEAT SCHOLARSHIP FUND

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
FLORIDA INTERNATIONAL UNIVERSITY 11200 SW 8TH STREET - MARC 253 MIAMI, FL 33130			5,000.	0.			THE MIAMI HEAT SCHOLARSHIP FUND
FLORIDA INTERNATIONAL UNIVERSITY 11200 SW 8TH STREET - MARC 253 MIAMI, FL 33130			17,000.	0.			THE MIAMI HEAT SCHOLARSHIP FUND
FLORIDA INTERNATIONAL UNIVERSITY 11200 SW 8TH STREET - MARC 253 MIAMI, FL 33130			25,000.	0.			THE MIAMI HEAT SCHOLARSHIP FUND
FLORIDA INTERNATIONAL UNIVERSITY 11200 SW 8TH STREET - MARC 253 MIAMI, FL 33130			44,000.	0.			THE MIAMI HEAT SCHOLARSHIP FUND
FLORIDA INTERNATIONAL UNIVERSITY FOUNDATION - 1600 NW 163RD STREET - MIAMI, FL 33130	237047106		68,815.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
FLORIDA INTERNATIONAL UNIVERSITY FOUNDATION, INC - 11200 SOUTHWEST 8TH STREET MARC 540 - MIAMI, FL 33130	237047106		5,000.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND
FLORIDA INTERNATIONAL UNIVERSITY FOUNDATION, INC - 11200 SOUTHWEST 8TH STREET MARC 540 - MIAMI, FL 33130	237047106		50,000.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND
FLORIDA INTERNATIONAL UNIVERSITY FOUNDATION, INC. - 11200 SW 8TH STREET, MARC 540 - MIAMI, FL 33130	237047106		25,000.	0.			THE ANDREA CASTILLO FOUNDATION
FLORIDA ORGANIC GROWERS AND CONSUMERS, INC. - PO BOX 12311 - GAINSVILLE, FL 33130	59-3006664		9,000.	0.			BCBS EMBRACE MINI GRANTS - JACKSONVILLE

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
FLORIDA STATE UNIVERSITY 600 WEST COLLEGE AVENUE TALLAHASSEE, FL 33130	59-1961248		5,000.	0.			MICHAEL HEATTER MEMORIAL FUND
FLORIDA STATE UNIVERSITY 600 WEST COLLEGE AVENUE TALLAHASSEE, FL 33130	59-1961248		13,000.	0.			MICHAEL HEATTER MEMORIAL FUND
FLORIDA STATE UNIVERSITY 600 WEST COLLEGE AVENUE TALLAHASSEE, FL 33130	59-1961248		20,000.	0.			MICHAEL HEATTER MEMORIAL FUND
FLORIDA STATE UNIVERSITY CENTER FOR PREVENTION - 874 TRADITIONS WAY, 3RD FLOOR - TALLAHASSEE, FL 33130	59-1961248		15,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
FOSTER CARE REVIEW, INC. 4500 BISCAYNE BLVD., STE. 100 MIAMI, FL 33130	650118944		10,000.	0.			NDMF - FOSTER CARE REVIEW, INC.
FOSTER CARE REVIEW, INC. 4500 BISCAYNE BLVD., STE. 100 MIAMI, FL 33130	650118944		20,000.	0.			NDMF - FOSTER CARE REVIEW, INC.
FOSTER CARE REVIEW, INC. 4500 BISCAYNE BLVD., STE. 100 MIAMI, FL 33130	650118944		34,143.	0.			NDMF - FOSTER CARE REVIEW, INC.
FOSTER CARE REVIEW, INC. 4500 BISCAYNE BLVD., STE. 100 MIAMI, FL 33130	650118944		34,143.	0.			NDMF - FOSTER CARE REVIEW, INC.
FOSTER CARE REVIEW, INC. 4500 BISCAYNE BLVD., STE. 100 MIAMI, FL 33130	650118944		34,143.	0.			NDMF - FOSTER CARE REVIEW, INC.

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
FOSTER CARE REVIEW, INC. 4500 BISCAYNE BLVD., STE. 100 MIAMI, FL 33130	650118944		34,143.	0.			NDMF - FOSTER CARE REVIEW, INC.
FRENCHTOWN NEIGHBORHOOD IMPROVEMENT ASSOCIATION - 532 WEST GEORGIA STREET - TALLAHASSEE, FL 33130			5,000.	0.			BCBS EMBRACE MINI GRANTS - TALLAHASSEE
FRESH START FAMILY SERVICES, INC. 969 N. KROME AVE HOMESTEAD, FL 33130	800557233		17,500.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
FRIENDS OF BATAHOLA PO BOX 36159 CINCINNATI, OH 45236-0159			7,773.	0.			THE GENESIS FUND
FRIENDS OF THE BASS MUSEUM, INC. 2121 PARK AVENUE MIAMI BEACH, FL 33130	592017511		37,500.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
FRIENDS OF THE NORTH MIAMI PUBLIC LIBRARY, INC. - 835 NE 132ND STREET - NORTH MIAMI, FL 33130	592394216		32,297.	0.			NDMF - FRIENDS OF THE NORTH MIAMI PUBLIC LIBRARY, INC.
FRIENDS OF THE NORTH MIAMI PUBLIC LIBRARY, INC. - 835 NE 132ND STREET - NORTH MIAMI, FL 33130	592394216		32,297.	0.			NDMF - FRIENDS OF THE NORTH MIAMI PUBLIC LIBRARY, INC.
FRIENDS OF THE NORTH MIAMI PUBLIC LIBRARY, INC. - 835 NE 132ND STREET - NORTH MIAMI, FL 33130	592394216		32,297.	0.			NDMF - FRIENDS OF THE NORTH MIAMI PUBLIC LIBRARY, INC.
FRIENDS OF THE NORTH MIAMI PUBLIC LIBRARY, INC. - 835 NE 132ND STREET - NORTH MIAMI, FL 33130	592394216		32,297.	0.			NDMF - FRIENDS OF THE NORTH MIAMI PUBLIC LIBRARY, INC.

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
FUNDARTE, INC. 7601 BYRON AVENUE SUITE 4C MIAMI BEACH, FL 33130	11-3711377		25,170.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
FUSION PARTNERSHIPS, INC. 1601 GUILFORD AVENUE 2 SOUTH BALTIMORE, MD 21230	52-2148413		10,000.	0.			THE BME FUND OPEN SOCIETY
FUSION PARTNERSHIPS, INC. 1601 GUILFORD AVENUE 2 SOUTH BALTIMORE, MD 21230	52-2148413		10,000.	0.			THE BME FUND OPEN SOCIETY
GANG ALTERNATIVE, INC. 6620 NORTH MIAMI AVENUE MIAMI, FL 33130	202630595		28,127.	0.			DENISE MOON MEMORIAL FUND
GANG ALTERNATIVE, INC. 6620 NORTH MIAMI AVENUE MIAMI, FL 33130	202630595		28,127.	0.			DENISE MOON MEMORIAL FUND
GATEWAY PACIFIC FOUNDATION DBA EARTH TRAIN - 1223 SOLANO AVENUE, SUITE 1 - ALBANY, CA 90046	94-3107635		10,000.	0.			WEISSER FAMILY FUND
GEORGETOWN UNIVERSITY 37TH AND O STREETS, N.W., SUITE 400 WASHINGTON, DC 20006			5,250.	0.			ENGAGED LEADERS GRANTS FUND
GLSEN BALTIMORE 1902 GREENHAVEN DRIVE BALTIMORE, MD 21209	90-0781420		10,000.	0.			THE BME FUND OPEN SOCIETY
GOOD HOPE EQUESTRIAN TRAINING CENTER, INC. - PO BOX 700016 - MIAMI, FL 33130	650945018		10,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND

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
GOOD HOPE EQUESTRIAN TRAINING CENTER, INC. - PO BOX 700016 - MIAMI, FL 33130	650945018		17,500.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
GRAND RAPIDS COMMUNITY MEDIA CENTER - 711 BRIDGE ST. NW - GRAND RAPIDS, MI 48201-3421	38-2386140		12,500.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
GRANDMONT ROSEDALE DEVELOPMENT CORPORATION - 19800 GRAND RIVER - DETROIT, MI 48201-3421	38-2885952		15,000.	0.			THE KNIGHT ARTS CHALLENGE - DETROIT 2013 FUND
GREATER AKRON MUSICAL ASSOCIATION 92 NORTH MAIN STREET AKRON, OH 45236-0159	34-6003828		99,600.	0.			THE KNIGHT GREATER AKRON COMMUNITY MUSIC FUND
GREATER HOMEWOOD COMMUNITY COOPERATION DBA BALTIMORE CO - 3500 N. CHARLES STREET - BALTIMORE, MD 21230	52-0897806		10,000.	0.			THE BME FUND OPEN SOCIETY
GREATER MIAMI CONVENTION & VISITORS BUREAU - 701 BRICKELL AVENUE SUITE 2700 - MIAMI, FL 33130			5,000.	0.			SABADELL UNITED BANK, N.A. FUND
GREATER MIAMI JEWISH FEDERATION, INC. - 4200 BISCAYNE BOULEVARD - MIAMI, FL 33130	590624404		25,000.	0.			SABADELL UNITED BANK, N.A. FUND
GREATER MIAMI YOUTH SYMPHONY 5805 BLUE LAGOON DRIVE SUITE 132 MIAMI, FL 33130	591743582		15,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
HABITAT FOR HUMANITY OF GREATER MIAMI, INC. - 3800 NW 22ND AVENUE - MIAMI, FL 33130	650108974		15,000.	0.			NDMF - HABITAT FOR HUMANITY OF GREATER MIAMI, INC.

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
HABITAT FOR HUMANITY OF GREATER MIAMI, INC. - 3800 NW 22ND AVENUE - MIAMI, FL 33130	650108974		20,000.	0.			NDMF - HABITAT FOR HUMANITY OF GREATER MIAMI, INC.
HABITAT FOR HUMANITY OF GREATER MIAMI, INC. - 3800 NW 22ND AVENUE - MIAMI, FL 33130	650108974		23,070.	0.			NDMF - HABITAT FOR HUMANITY OF GREATER MIAMI, INC.
HABITAT FOR HUMANITY OF GREATER MIAMI, INC. - 3800 NW 22ND AVENUE - MIAMI, FL 33130	650108974		23,070.	0.			NDMF - HABITAT FOR HUMANITY OF GREATER MIAMI, INC.
HABITAT FOR HUMANITY OF GREATER MIAMI, INC. - 3800 NW 22ND AVENUE - MIAMI, FL 33130	650108974		23,070.	0.			NDMF - HABITAT FOR HUMANITY OF GREATER MIAMI, INC.
HABITAT FOR HUMANITY OF GREATER MIAMI, INC. - 3800 NW 22ND AVENUE - MIAMI, FL 33130	650108974		23,070.	0.			NDMF - HABITAT FOR HUMANITY OF GREATER MIAMI, INC.
HATCH: A HAMTRAMCK ART COLLECTIVE 3456 EVALINE STREET HAMTRAMCK, MI 48201-3421	20-5458992		20,000.	0.			THE KNIGHT ARTS CHALLENGE - DETROIT 2013 FUND
HEALTH INFORMATION PROJECT 4601 PONCE DE LEON BLVD., SUITE 300 CORAL GABLES, FL 33130	80-0526558		10,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
HEALTH INFORMATION PROJECT, INC. 4601 PONCE DE LEON BLVD. SUITE 300 CORAL GABLES, FL 33130	80-0526558		10,000.	0.			THE MATTHEW S. GREER FUND
HEBNI NUTRITION CONSULTANTS, INC. 2009 W CENTRAL BLVD. ORLANDO, FL 33130	59-3258397		8,000.	0.			BCBS EMBRACE MINI GRANTS - ORLANDO

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
HERE'S HELP, INC. 15100 N.W. 27TH AVENUE OPA LOCKA, FL 33130	59-1298067		5,000.	0.			OLGA MARIA MARTINEZ FUND
HERITAGE WORKS 1927 ROSA PARKS BOULEVARD, SUITE 13 DETROIT, MI 48201-3421	38-3581720		50,000.	0.			THE KNIGHT ARTS CHALLENGE - DETROIT 2013 FUND
HIALEAH ELEMENTARY SCHOOL 550 EAST 8TH STREET HIALEAH, FL 33130			6,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
HIP HOP BASKETBALL FOUNDATION 5053 DECIDELY COURT WESLEY CHAPEL, FL 33130			7,659.	0.			BCBS EMBRACE MINI GRANTS - TAMPA SULPHUR SPRINGS
HIS HOUSE CHILDREN'S HOME 20000 NW 47 AVENUE HECTOR BUILDING MIAMI GARDENS, FL 33130	650145994		10,000.	0.			HECTOR FAMILY DONOR ADVISED FUND
HIS HOUSE CHILDREN'S HOME 20000 NW 47 AVENUE HECTOR BUILDING MIAMI GARDENS, FL 33130	650145994		150,000.	0.			HECTOR FAMILY DONOR ADVISED FUND
HISPANIC COALITION 5659 WEST FLAGLER STREET MIAMI, FL 33130	65-0026407		9,000.	0.			BCBS EMBRACE MINI GRANTS - MIAMI/OPA LOCKA
HOPE FOR VISION, INC. 21050 NE 38TH AVENUE, SUITE 2401 AVENTURA, FL 33130	20-2818701		5,000.	0.			THE CODINA FAMILY CHARITABLE FUND
HOUSTON BAPTIST UNIVERSITY 7502 FONDREN ROAD HOUSTON, TX 77074			5,000.	0.			THE MIAMI HEAT SCHOLARSHIP FUND

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
HOWARD DRIVE ELEMENTARY SCHOOL 7750 SW 136TH STREET MIAMI, FL 33130			5,000.	0.			MIAMI HEAT CHARITABLE FUND
HOWARD PARK CIVIC ASSOCIATION PO BOX 26593 BALTIMORE, MD 21230	52-1639171		10,000.	0.			THE BME FUND OPEN SOCIETY
HUMANE SOCIETY OF GREATER MIAMI, INC. - 16101 WEST DIXIE HIGHWAY - NORTH MIAMI BEACH, FL 33130	590711176		15,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
I HAVE A DREAM FOUNDATION 7900 ISLAND BOULEVARD WILLIAMS ISLAND, FL 33130	65-0570404		7,500.	0.			SABADELL UNITED BANK, N.A. FUND
I.M. SULZBACHER CENTER FOR THE HOMELESS - 611 EAST ADAMS STREET - JACKSONVILLE, FL 33130	59-3229898		9,000.	0.			BCBS EMBRACE MINI GRANTS - JACKSONVILLE
I'M A STAR FOUNDATION 3909 SOUTEL DRIVE JACKSONVILLE, FL 33130			9,000.	0.			BCBS EMBRACE MINI GRANTS - JACKSONVILLE
IN OUR BACKYARDS, INC. 540 PRESIDENT STREET, 3 FLOOR BROOKLYN, NY 10006-3724	263283639		5,000.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND
IN OUR BACKYARDS, INC. 540 PRESIDENT STREET, 3 FLOOR BROOKLYN, NY 10006-3724	263283639		5,000.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND
IN OUR BACKYARDS, INC. 540 PRESIDENT STREET, 3 FLOOR BROOKLYN, NY 10006-3724	263283639		5,400.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND

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
IN OUR BACKYARDS, INC. 540 PRESIDENT STREET, 3 FLOOR BROOKLYN, NY 10006-3724	263283639		5,500.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND
IN OUR BACKYARDS, INC. 540 PRESIDENT STREET, 3 FLOOR BROOKLYN, NY 10006-3724	263283639		6,000.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND
IN OUR BACKYARDS, INC. 540 PRESIDENT STREET, 3 FLOOR BROOKLYN, NY 10006-3724	263283639		8,500.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND
IN OUR BACKYARDS, INC. 540 PRESIDENT STREET, 3 FLOOR BROOKLYN, NY 10006-3724	263283639		8,500.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND
IN OUR BACKYARDS, INC. 540 PRESIDENT STREET, 3 FLOOR BROOKLYN, NY 10006-3724	263283639		8,500.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND
IN OUR BACKYARDS, INC. 540 PRESIDENT STREET, 3 FLOOR BROOKLYN, NY 10006-3724	263283639		8,500.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND
IN OUR BACKYARDS, INC. 540 PRESIDENT STREET, 3 FLOOR BROOKLYN, NY 10006-3724	263283639		8,500.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND
IN OUR BACKYARDS, INC. 540 PRESIDENT STREET, 3 FLOOR BROOKLYN, NY 10006-3724	263283639		9,000.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND
IN OUR BACKYARDS, INC. 540 PRESIDENT STREET, 3 FLOOR BROOKLYN, NY 10006-3724	263283639		10,000.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND
IN OUR BACKYARDS, INC. 540 PRESIDENT STREET, 3 FLOOR BROOKLYN, NY 10006-3724	263283639		12,000.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND

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
IN OUR BACKYARDS, INC. 540 PRESIDENT STREET, 3 FLOOR BROOKLYN, NY 10006-3724	263283639		12,000.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND
INSIDEOUT LITERARY ARTS PROJECT 2111 WOODWARD AVENUE, SUITE 1010 DETROIT, MI 48201-3421			25,000.	0.			THE KNIGHT ARTS CHALLENGE - DETROIT 2013 FUND
INSPIRE GROUP, INC. 2720 BLAIR STONE, UNIT H TALLAHASSEE, FL 33130			13,500.	0.			BCBS EMBRACE MINI GRANTS - TALLAHASSEE
INSTITUTE OF CONTEMPORARY ART MIAMI, INC. - 4040 NE 2ND AVENUE - MIAMI, FL 33130			100,000.	0.			THE KNIGHT MIAMI CONTEMPORARY ART FUND
INSTITUTE OF CONTEMPORARY ART MIAMI, INC. - 4040 NE 2ND AVENUE - MIAMI, FL 33130			175,000.	0.			THE KNIGHT MIAMI CONTEMPORARY ART FUND
INVESTIGATEWEST 401 MERCER STREET, SUITE 150 SEATTLE, WA 98109			25,000.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
INVESTIGATIVE NEWS NETWORK 17514 VENTURA BLVD., #103 ENCINO, CA 90046			50,000.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
INVESTIGATIVE NEWSOURCE 5500 CAMPANILE DRIVE, PSFA 361C SAN DIEGO, CA 90046			37,500.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
IOWA CENTER FOR PUBLIC AFFAIRS JOURNALISM - PO BOX 2178 - IOWA CITY, IA 52244-2178			12,500.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND

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
ISLAND DOLPHIN CARE, INC. 150 LORELANE PLACE KEY LARGO, FL 33130	65-0728047		10,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
IT PRO CAMP, INC 1666 79TH STREET CAUSEWAY, SUITE 60 NORTH BAY VILLAGE, FL 33130			8,000.	0.			THE JOHN S. & JAMES L. KNIGHT FOUNDATION FUND
JA WORLD HUIZIENGA CENTER AT BROWARD COUNTY - 1130 COCONUT CREEK BLVD - COCONUT CREEK, FL 33130			5,000.	0.			SABADELL UNITED BANK, N.A. FUND
JACKSON MEMORIAL FOUNDATION, INC. 901 NORTHWEST 17TH STREET, SUITE G MIAMI, FL 33130			20,000.	0.			VANESSA AND MICHAEL MARQUEZ FAMILY FOUNDATION
JACKSONVILLE WOLFSON CHILDREN'S HOSPITAL - 800 PRUDENTIAL DRIVE - JACKSONVILLE, FL 33130			9,000.	0.			BCBS EMBRACE MINI GRANTS - JACKSONVILLE
JAMIE'S RESCUE INC. 13715 NW 2ND AVENUE MIAMI, FL 33130			5,000.	0.			THE JEFFREY MILLER CHARITABLE FAMILY FUND
JUICE FOUNDATION 5335 WISCONSIN AVENUE NW SUITE 720 WASHINGTON, DC 20006			5,000.	0.			MIAMI HEAT CHARITABLE FUND
KEYS DEVELOPMENT INC. 904 WASHINGTON BLVD BALTIMORE, MD 21230			10,000.	0.			THE BME FUND OPEN SOCIETY
KIVA MICROFUNDS 875 HOWARD STREET SUITE 340 SAN FRANCISCO, CA 90046			490,000.	0.			THE KNIGHT FUND FOR KIVA DETROIT

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
KOZYAK MINORITY MENTORING FOUNDATION - 2525 PONCE DE LEON, 9TH FLOOR - CORAL GABLES, FL 33130	421713041		5,000.	0.			SABADELL UNITED BANK, N.A. FUND
KOZYAK MINORITY MENTORING FOUNDATION - 2525 PONCE DE LEON, 9TH FLOOR - CORAL GABLES, FL 33130	421713041		7,500.	0.			SABADELL UNITED BANK, N.A. FUND
KRISTI HOUSE, INC. 1265 NW 12TH AVENUE MIAMI, FL 33130	650576650		20,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
LAUREN'S KIDS 18851 NE 29TH AVENUE., SUITE. # 101 AVENTURA, FL 33130	261252588		10,000.	0.			MIAMI HEAT CHARITABLE FUND
LEADERSHIP FLORIDA 201 E. PARK AVENUE TALLAHASSEE, FL 33130			10,000.	0.			SABADELL UNITED BANK, N.A. FUND
LEGAL AID SOCIETY OF PALM BEACH COUNTY, INC. - 423 FERN STREET SUITE # 200 - WEST PALM BEACH, FL 33130	59-6046994		6,500.	0.			SABADELL UNITED BANK, N.A. FUND
LEGAL SERVICES OF GREATER MIAMI, INC. - 3000 BISCAYNE BOULEVARD SUITE 500 - MIAMI, FL 33130	591227481		15,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
LIFE IS ART, INC. 1334 EUCLID AVENUE #10 MIAMI BEACH, FL 33130	264204680		5,000.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND
LIFE IS ART, INC. 1334 EUCLID AVENUE #10 MIAMI BEACH, FL 33130	264204680		10,000.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND

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
LIVING ARTS 8701 WEST VERNOR HIGHWAY, SUITE 301 DETROIT, MI 48201-3421			12,000.	0.			THE KNIGHT ARTS CHALLENGE - DETROIT 2013 FUND
LIVING ARTS TRUST, INC. DBA O CINEMA - 2401 SWANSON AVE. - MIAMI, FL 33130	442277899		45,000.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
LOCUST PROJECTS, INC. 3852 NORTH MIAMI AVENUE MIAMI, FL 33130	651134780		10,000.	0.			THE JOHN S. & JAMES L. KNIGHT FOUNDATION FUND
LOS ANGELES OPERA 135 NORTH GRAND AVE LOS ANGELES, CA 90046			30,000.	0.			THE PAUL AND MARIE-FRANCE BLOCH FUND
MADONNA UNIVERSITY 36600 SCHOOLCRAFT ROAD LIVONIA, MI 48201-3421			10,000.	0.			THE BME FUND
MAILMAN CENTER, DEPT. OF PEDIATRICS AT JACKSON - 1400 NW 10TH AVENUE, ROOM 1001 - MIAMI, FL 33130			8,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
MALIVAI WASHINGTON YOUTH FOUNDATION - 1096 WEST 6TH STREET - JACKSONVILLE, FL 33130			9,000.	0.			BCBS EMBRACE MINI GRANTS - JACKSONVILLE
MARJORY STONEMAN DOUGLAS BISCAYNE NATURE CENTER - 6767 CRANDON BOULEVARD - KEY BISCAYNE, FL 33130	592549600		17,500.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
MARYLANDREPORTER.COM, INC. 6392 SHADOWSHAPE PLACE COLUMBIA, MD 21230			25,000.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND

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
MASON G. SMOAK FOUNDATION, INC. 1025 COUNTY ROAD 17 N. LAKE PLACID, FL 33130	26-4287497		5,000.	0.			WEISSER FAMILY FUND
METRO NORTH COMMUNITY DEVELOPMENT CORPORATION - 3103 N. MAIN STREET - JACKSONVILLE, FL 33130			9,000.	0.			BCBS EMBRACE MINI GRANTS - JACKSONVILLE
MIAMI BEACH ARTS TRUST, INC. 1775 WASHINGTON AVENUE PH 2 MIAMI BEACH, FL 33130	65-0944084		7,500.	0.			GLBT COMMUNITY PROJECTS FUND
MIAMI BOOK FAIR INTERNATIONAL INC. 300 NE 2ND AVENUE SUITE 4102 MIAMI, FL 33130			30,000.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
MIAMI BOOK FAIR INTERNATIONAL INC. 300 NE 2ND AVENUE SUITE 4102 MIAMI, FL 33130			60,000.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
MIAMI BRIDGE YOUTH AND FAMILY SERVICES, INC. - 2810 NW SOUTH RIVER DRIVE - MIAMI, FL 33130	592569847		12,500.	0.			DENISE MOON MEMORIAL FUND
MIAMI BRIDGE YOUTH AND FAMILY SERVICES, INC. - 2810 NW SOUTH RIVER DRIVE - MIAMI, FL 33130	592569847		13,000.	0.			DENISE MOON MEMORIAL FUND
MIAMI BRIDGE YOUTH AND FAMILY SERVICES, INC. - 2810 NW SOUTH RIVER DRIVE - MIAMI, FL 33130	592569847		13,000.	0.			DENISE MOON MEMORIAL FUND
MIAMI BRIDGE YOUTH AND FAMILY SERVICES, INC. - 2810 NW SOUTH RIVER DRIVE - MIAMI, FL 33130	592569847		40,000.	0.			DENISE MOON MEMORIAL FUND

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
MIAMI BRIDGE YOUTH AND FAMILY SERVICES, INC. - 2810 NW SOUTH RIVER DRIVE - MIAMI, FL 33130	592569847		40,000.	0.			DENISE MOON MEMORIAL FUND
MIAMI CENTER FOR ARCHITECTURE & DESIGN, INC. - 100 NE 1ST AVENUE - MIAMI, FL 33130			10,000.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND
MIAMI CHILDREN'S HEALTH FOUNDATION 3100 SW 62ND AVENUE MIAMI, FL 33130			30,796.	0.			MAX LINDEMANN PERMANENT MEMORIAL FUND
MIAMI CHILDREN'S HEALTH FOUNDATION 3100 SW 62ND AVENUE MIAMI, FL 33130			50,000.	0.			MAX LINDEMANN PERMANENT MEMORIAL FUND
MIAMI CHILDREN'S HEALTH FOUNDATION 3100 SW 62ND AVENUE MIAMI, FL 33130			50,000.	0.			MAX LINDEMANN PERMANENT MEMORIAL FUND
MIAMI CHILDREN'S HOSPITAL 3100 SW 62ND AVE. NW WING #121 MIAMI, FL 33130			14,309.	0.			THE CINDI NASH FAMILY FUND
MIAMI CHILDREN'S HOSPITAL 3100 SW 62ND AVE. NW WING #121 MIAMI, FL 33130			25,000.	0.			THE CINDI NASH FAMILY FUND
MIAMI CHILDREN'S HOSPITAL FOUNDATION - 3000 SW 62ND AVENUE - MIAMI, FL 33130	591720704		6,450.	0.			SABADELL UNITED BANK, N.A. FUND
MIAMI CHILDREN'S HOSPITAL FOUNDATION - 3000 SW 62ND AVENUE - MIAMI, FL 33130	591720704		7,500.	0.			SABADELL UNITED BANK, N.A. FUND

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
MIAMI CHILDREN'S HOSPITAL FOUNDATION - 3000 SW 62ND AVENUE - MIAMI, FL 33130	591720704		20,000.	0.			SABADELL UNITED BANK, N.A. FUND
MIAMI CHILDREN'S INITIATIVE 5400 NW 22ND AVENUE 4TH FLOOR MIAMI, FL 33130	275025010		30,000.	0.			DENISE MOON MEMORIAL FUND
MIAMI CHILDREN'S INITIATIVE 5400 NW 22ND AVENUE 4TH FLOOR MIAMI, FL 33130	275025010		40,000.	0.			DENISE MOON MEMORIAL FUND
MIAMI CHILDREN'S INITIATIVE 5400 NW 22ND AVENUE 4TH FLOOR MIAMI, FL 33130	275025010		40,000.	0.			DENISE MOON MEMORIAL FUND
MIAMI CHILDREN'S MUSEUM, INC. 980 MACARTHUR CAUSEWAY MIAMI, FL 33130	592396999		10,000.	0.			HECTOR FAMILY DONOR ADVISED FUND
MIAMI CHILDREN'S MUSEUM, INC. 980 MACARTHUR CAUSEWAY MIAMI, FL 33130	592396999		10,000.	0.			HECTOR FAMILY DONOR ADVISED FUND
MIAMI CHILDREN'S MUSEUM, INC. 980 MACARTHUR CAUSEWAY MIAMI, FL 33130	592396999		25,000.	0.			HECTOR FAMILY DONOR ADVISED FUND
MIAMI CITY BALLET, INC. 2200 LIBERTY AVENUE MIAMI BEACH, FL 33130	592578534		5,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
MIAMI CITY BALLET, INC. 2200 LIBERTY AVENUE MIAMI BEACH, FL 33130	592578534		10,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND

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
MIAMI COALITION FOR THE HOMELESS, INC. - 140 W. FLAGLER STREET, SUITE 105 - MIAMI, FL 33130	592521237		15,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
MIAMI CONTEMPORARY DANCE COMPANY PO BOX 402823 MIAMI BEACH, FL 33130	65-0989228		19,500.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
MIAMI CONTEMPORARY DANCE COMPANY PO BOX 402823 MIAMI BEACH, FL 33130	65-0989228		24,000.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
MIAMI CONTEMPORARY DANCE COMPANY PO BOX 402823 MIAMI BEACH, FL 33130	65-0989228		36,500.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
MIAMI COUNTRY DAY SCHOOL FOUNDATION, INC. - 601 NE 107 STREET - MIAMI, FL 33130	03-0383482		7,500.	0.			THE ADAM AND JACQUELINE MALAMED FOUNDATION
MIAMI COUNTRY DAY SCHOOL FOUNDATION, INC. - 601 NE 107 STREET - MIAMI, FL 33130	03-0383482		12,500.	0.			THE ADAM AND JACQUELINE MALAMED FOUNDATION
MIAMI DADE COLLEGE FOUNDATION, INC. - 300 NORTHEAST 2ND AVENUE - MIAMI, FL 33130	596169745		12,500.	0.			THE KNIGHT MIAMI FILM FESTIVAL FUND
MIAMI DADE COLLEGE FOUNDATION, INC. - 300 NORTHEAST 2ND AVENUE - MIAMI, FL 33130	596169745		99,742.	0.			THE KNIGHT MIAMI FILM FESTIVAL FUND
MIAMI DADE COLLEGE FOUNDATION, INC. - 300 NORTHEAST 2ND AVENUE - MIAMI, FL 33130	596169745		10,000.	0.			THE KNIGHT MIAMI FILM FESTIVAL FUND

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
MIAMI DADE COLLEGE FOUNDATION, INC. - 300 NORTHEAST 2ND AVENUE - MIAMI, FL 33130	596169745		25,000.	0.			THE KNIGHT MIAMI FILM FESTIVAL FUND
MIAMI DADE COLLEGE FOUNDATION, INC. - 300 NORTHEAST 2ND AVENUE - MIAMI, FL 33130	596169745		100,000.	0.			THE KNIGHT MIAMI FILM FESTIVAL FUND
MIAMI DADE COLLEGE, HIALEAH CAMPUS 1800 WEST 49TH STREET, SUITE 200 HIALEAH, FL 33130	59-6169745		8,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
MIAMI GAY AND LESBIAN FILM FESTIVAL, INC. - P.O. BOX 530280 - MIAMI, FL 33130	650830266		12,500.	0.			GLBT COMMUNITY PROJECTS FUND
MIAMI GAY AND LESBIAN FILM FESTIVAL, INC. - P.O. BOX 530280 - MIAMI, FL 33130	650830266		12,500.	0.			GLBT COMMUNITY PROJECTS FUND
MIAMI JEWISH HEALTH SYSTEMS 5200 NE 2ND AVENUE MIAMI, FL 33130			22,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
MIAMI LIGHTHOUSE FOR THE BLIND AND VISUALLY IMPAIRED, INC. - 601 SW 8TH AVENUE - MIAMI, FL 33130	590637847		7,467.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
MIAMI LIGHTHOUSE FOR THE BLIND AND VISUALLY IMPAIRED, INC. - 601 SW 8TH AVENUE - MIAMI, FL 33130	590637847		10,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
MIAMI LIGHTHOUSE FOR THE BLIND AND VISUALLY IMPAIRED, INC. - 601 SW 8TH AVENUE - MIAMI, FL 33130	590637847		15,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND

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
MIAMI LIGHTHOUSE FOR THE BLIND AND VISUALLY IMPAIRED, INC. - 601 SW 8TH AVENUE - MIAMI, FL 33130	590637847		17,500.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
MIAMI MUSEUM OF SCIENCE 3280 SOUTH MIAMI DRIVE MIAMI, FL 33130	590854960		9,000.	0.			BCBS EMBRACE MINI GRANTS - MIAMI/OPA LOCKA
MIAMI MUSEUM OF SCIENCE 3280 SOUTH MIAMI DRIVE MIAMI, FL 33130	590854960		50,000.	0.			BCBS EMBRACE MINI GRANTS - MIAMI/OPA LOCKA
MIAMI MUSEUM OF SCIENCE 3280 SOUTH MIAMI DRIVE MIAMI, FL 33130	590854960		3,500,000.	0.			BCBS EMBRACE MINI GRANTS - MIAMI/OPA LOCKA
MIAMI MUSIC PROJECT, INC. 2125 BISCAYNE BLVD., UNIT 215 MIAMI, FL 33130	264084871		100,000.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
MIAMI NORLAND SENIOR HIGH SCHOOL 1050 NW 195TH STREET MIAMI GARDENS, FL 33130			5,000.	0.			THE EXCELLENCE IN HIGH SCHOOL SPORTS FUND
MIAMI NORLAND SENIOR HIGH SCHOOL 1050 NW 195TH STREET MIAMI GARDENS, FL 33130			7,500.	0.			THE EXCELLENCE IN HIGH SCHOOL SPORTS FUND
MIAMI RAIL PUBLISHING CORPORATION 174 NW 23RD STREET MIAMI, FL 33130			26,673.	0.			MIAMI RAIL
MIAMI RESCUE MISSION, INC. 2159 NORTHWEST 1ST COURT MIAMI, FL 33130	591743865		5,426.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND

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
MIAMI RESCUE MISSION, INC. 2159 NORTHWEST 1ST COURT MIAMI, FL 33130	591743865		20,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
MIAMI SCIENCE MUSEUM 3280 SOUTH MIAMI AVENUE MIAMI, FL 33130	590854960		6,480,000.	0.			THE KNIGHT FUND FOR THE MIAMI SCIENCE MUSEUM
MIAMI-DADE COLLEGE			30,125.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
MIAMI-DADE COUNTY - DEPARTMENT OF CULTURAL AFFAIRS - 111 NW 1 STREET SUITE 625 - MIAMI, FL 33130			50,000.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
MIAMI-DADE GAY & LESBIAN CHAMBER OF COMMERCE FOUNDATION - 3510 BISCAYNE BOULEVARD SUITE 202 - MIAMI, FL 33130	262291157		8,500.	0.			GLBT COMMUNITY PROJECTS FUND
MICHELEE PUPPETS, INC. 4420 PARKWAY COMMERCE BLVD. SUITE A ORLANDO, FL 33130			9,000.	0.			BCBS EMBRACE MINI GRANTS - ORLANDO
MICHIGAN PHILHARMONIC 774 N. SHELDON RD. PLYMOUTH, MI 48201-3421			10,000.	0.			THE KNIGHT ARTS CHALLENGE - DETROIT 2013 FUND
MICHIGAN PHILHARMONIC 774 N. SHELDON RD. PLYMOUTH, MI 48201-3421			10,000.	0.			THE KNIGHT ARTS CHALLENGE - DETROIT 2013 FUND
MICHIGAN THEATER 603 E. LIBERTY STREET ANN ARBOR, MI 48201-3421			25,000.	0.			THE KNIGHT ARTS CHALLENGE - DETROIT 2013 FUND

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
MIDTOWN DETROIT, INC. 3939 WOODWARD AVENUE, SUITE 100 DETROIT, MI 48201-3421			50,000.	0.			THE KNIGHT ARTS CHALLENGE - DETROIT 2013 FUND
MIDWEST CENTER FOR INVESTIGATIVE REPORTING - 701 DEVONSHIRE DR., C-33 - CHAMPAIGN, IL 60515			25,000.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
MILLENNIALS PROJECT, INC 2400 SOUTH DIXIE HIGHWAY MIAMI, FL 33130			5,000.	0.			THE JOHN S. & JAMES L. KNIGHT FOUNDATION FUND
MORE HEALTH INC. 3821 HENDERSON BOULEVARD TAMPA, FL 33130			11,000.	0.			BCBS EMBRACE MINI GRANTS - TAMPA SULPHUR SPRINGS
MOTOR CITY BRASS BAND 24901 NORTHWESTERN HIGHWAY, SUITE 3 SOUTHFIELD, MI 48201-3421			5,000.	0.			THE KNIGHT ARTS CHALLENGE - DETROIT 2013 FUND
MOUNT ZION MISSIONARY BAPTIST INSTITUTIONAL CHURCH - 535 WEST WASHINGTON STREET - ORLANDO, FL 33130			7,000.	0.			BCBS EMBRACE MINI GRANTS - ORLANDO
MOURNING FAMILY FOUNDATION 100 S. BISCAYNE BLVD MIAMI, FL 33130			35,000.	0.			MIAMI HEAT CHARITABLE FUND
MOVING THE LIVES OF KIDS. 2555 NORTHWEST 27TH AVENUE MIAMI, FL 33130			7,000.	0.			PAINTING THE TOWN, CHANGING LIVES FUND
MS HOPE FOR A CURE 2250 BROADWAY, 1K NEW YORK, NY 10006-3724			15,000.	0.			MARSHALL W. COBURN FUND

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
MUJER, INC. P.O. BOX 900685 HOMESTEAD, FL 33130	650534683		48,676.	0.			DENISE MOON MEMORIAL FUND
MUJER, INC. P.O. BOX 900685 HOMESTEAD, FL 33130	650534683		48,676.	0.			DENISE MOON MEMORIAL FUND
NAISMITH MEMORIAL BASKETBALL HALL OF FAME - 1000 HALL OF FAME AVENUE - SPRINGFIELD, MA 01002-5000			50,000.	0.			MIAMI HEAT CHARITABLE FUND
NATIONAL BASKETBALL RETIRED PLAYERS ASSOCIATION - 175 WEST JACKSON BOULEVARD SUITE 1600 - CHICAGO, IL 60515	04-3165255		5,000.	0.			MIAMI HEAT CHARITABLE FUND
NATIONAL FOUNDATION FOR ADVANCEMENT IN THE ARTS - 2100 BISCAYNE BOULEVARD - MIAMI, FL 33130	592141837		30,000.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND
NATIONAL PARKINSON FOUNDATION, INC. - 200 SE 1ST STREET, SUITE 800 - MIAMI, FL 33130	590968031		5,000.	0.			THE KOZYAK-SILVERMAN CHARITABLE FUND
NATIONAL POETRY SERIES 57 MOUNTAIN AVENUE PRINCETON, NJ 08540			5,000.	0.			THE BETSY-SOUTH BEACH COMMUNITY FUND
NEAT STUFF, INC. 2624 NORTHWEST 21ST TERRACE MIAMI, FL 33130	650746714		10,000.	0.			NDMF - NEAT STUFF, INC.
NEAT STUFF, INC. 2624 NORTHWEST 21ST TERRACE MIAMI, FL 33130	650746714		18,456.	0.			NDMF - NEAT STUFF, INC.

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
NEAT STUFF, INC. 2624 NORTHWEST 21ST TERRACE MIAMI, FL 33130	650746714		18,456.	0.			NDMF - NEAT STUFF, INC.
NEAT STUFF, INC. 2624 NORTHWEST 21ST TERRACE MIAMI, FL 33130	650746714		18,456.	0.			NDMF - NEAT STUFF, INC.
NEAT STUFF, INC. 2624 NORTHWEST 21ST TERRACE MIAMI, FL 33130	650746714		18,456.	0.			NDMF - NEAT STUFF, INC.
NEMOURS FOUNDATION 10140 CENTURION PARKWAY NORTH JACKSONVILLE, FL 33130			10,000.	0.			BCBS EMBRACE MINI GRANTS - ORLANDO
NEW IMAGE YOUTH CENTER INC. 212 SOUTH PARRAMORE AVENUE ORLANDO, FL 33130			5,000.	0.			BCBS EMBRACE MINI GRANTS - ORLANDO
NEW THEATRE, INC. 1645 SW 107TH AVENUE MIAMI, FL 33130			35,000.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
NEW VISIONS FOR SOUTH DADE, INC. 14495 SW 297TH TERRACE HOMESTEAD, FL 33130	31-1624820		8,000.	0.			THE JOHN S. & JAMES L. KNIGHT FOUNDATION FUND
NEW WORLD SYMPHONY 500 17TH STREET MIAMI BEACH, FL 33130	592809056		50,000.	0.			HELENA RUBINSTEIN PHILANTHROPIC FUND
NON-VIOLENCE PROJECT USA 1234 SOUTH DIXIE HIGHWAY SUITE 348 CORAL GABLES, FL 33130	13-3812224		22,147.	0.			NDMF - NON-VIOLENCE PROJECT SOUTH FLORIDA, INC.

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
NON-VIOLENCE PROJECT USA 1234 SOUTH DIXIE HIGHWAY SUITE 348 CORAL GABLES, FL 33130	13-3812224		22,147.	0.			NDMF - NON-VIOLENCE PROJECT SOUTH FLORIDA, INC.
NON-VIOLENCE PROJECT USA 1234 SOUTH DIXIE HIGHWAY SUITE 348 CORAL GABLES, FL 33130	13-3812224		22,147.	0.			NDMF - NON-VIOLENCE PROJECT SOUTH FLORIDA, INC.
NON-VIOLENCE PROJECT USA 1234 SOUTH DIXIE HIGHWAY SUITE 348 CORAL GABLES, FL 33130	13-3812224		22,147.	0.			NDMF - NON-VIOLENCE PROJECT SOUTH FLORIDA, INC.
NORTH FLORIDA SCHOOL OF SPECIAL EDUCATION - 223 MILL CREEK ROAD - JACKSONVILLE, FL 33130			9,000.	0.			BCBS EMBRACE MINI GRANTS - JACKSONVILLE
NORTH MIAMI BEACH MEDICAL CENTER INC - PO BOX 680158 - MIAMI, FL 33130			12,600.	0.			BCBS EMBRACE MINI GRANTS - MIAMI/OPA LOCKA
NORTH MIAMI FOUNDATION FOR SENIOR CITIZENS' SERVICES, INC. - 620 NE 127TH STREET - NORTH MIAMI, FL 33130	591582766		46,139.	0.			NDMF - NORTH MIAMI FOUNDATION FOR SENIOR CITIZENS' FUND
NORTH MIAMI FOUNDATION FOR SENIOR CITIZENS' SERVICES, INC. - 620 NE 127TH STREET - NORTH MIAMI, FL 33130	591582766		46,139.	0.			NDMF - NORTH MIAMI FOUNDATION FOR SENIOR CITIZENS' FUND
NORTH MIAMI FOUNDATION FOR SENIOR CITIZENS' SERVICES, INC. - 620 NE 127TH STREET - NORTH MIAMI, FL 33130	591582766		46,139.	0.			NDMF - NORTH MIAMI FOUNDATION FOR SENIOR CITIZENS' FUND
NORTH MIAMI FOUNDATION FOR SENIOR CITIZENS' SERVICES, INC. - 620 NE 127TH STREET - NORTH MIAMI, FL 33130	591582766		46,139.	0.			NDMF - NORTH MIAMI FOUNDATION FOR SENIOR CITIZENS' FUND

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
NOTES FOR NOTES PO BOX 128473 NASHVILLE, TN 37212			40,000.	0.			THE KNIGHT ARTS CHALLENGE - DETROIT 2013 FUND
NOVA SOUTHEASTERN UNIVERSITY, INC. 3301 COLLEGE AVENUE DAVIE, FL 33130	59-1083502		23,723.	0.			AVENTURA HOSPITAL COMMUNITY HEALTH FUND
NOVOUS VITAE 9871 TIMMONS ROAD THONOTOSASSA, FL 33130			9,000.	0.			BCBS EMBRACE MINI GRANTS - TAMPA SULPHUR SPRINGS
NUTOPIA INC. KIRKMAN HOUSE, 1ST FLOOR 12/14 WHITFIELD ST - LONDON, UNITED KINGDOM			240,000.	0.			THE GATES FUND
NUTOPIA INC. KIRKMAN HOUSE, 1ST FLOOR 12/14 WHITFIELD ST - LONDON, UNITED KINGDOM			371,037.	0.			THE GATES FUND
OHT OLAM INC. 1132 NE 176 TERRACE NORTH MIAMI BEACH, FL 33130			15,380.	0.			THE JOHN S. & JAMES L. KNIGHT FOUNDATION FUND
ONLINE JOURNALISM PROJECT 493 CENTRAL AVENUE NEW HAVEN, CT 06106			37,500.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
OPA-LOCKA COMMUNITY DEVELOPMENT CORPORATION, INC. - 490 OPA-LOCKA BLVD. - OPA-LOCKA, FL 33130	592106635		9,000.	0.			BCBS EMBRACE MINI GRANTS - MIAMI/OPA LOCKA
ORANGE COUNTY HEALTH DEPARTMENT 6101 LAKE ELLENOR DRIVE ORLANDO, FL 33130			7,500.	0.			BCBS EMBRACE MINI GRANTS - ORLANDO

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
ORLANDO HEALTH FOUNDATION/THE HOWARD PHILIPS CENTER - 3160 SOUTHGATE COMMERCE BOULEVARD, SUITE 50 - ORLANDO, FL 33130			9,000.	0.			BCBS EMBRACE MINI GRANTS - ORLANDO
OUR KIDS OF MIAMI-DADE/MONROE, INC. - 401 NW 2ND AVENUE 10TH FLOOR - MIAMI, FL 33130	57-1140890		5,000.	0.			DENISE MOON MEMORIAL FUND
OUR LITTLE ROSES FOREIGN MISSION SOCIETY - P.O. BOX 464 - SOMERSET, NJ 08540	54-1663713		5,000.	0.			RICHARD AND SUSAN LAMPEN FUND
OVERTOWN YOUTH CENTER, INC. 450 NW 14TH STREET MIAMI, FL 33130	651048896		8,000.	0.			MIAMI HEAT CHARITABLE FUND
PACE CENTER FOR GIRLS, INC. 14500 NE 6TH AVENUE NORTH MIAMI, FL 33130	59-2414492		20,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
PALM BEACH OPERA, INC.			57,520.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
PANAMERICANA FOUNDATION, INC. 15751 SHERIDAN STREET SUITE 212 FORT LAUDERDALE, FL 33130			20,000.	0.			THE JOHN S. & JAMES L. KNIGHT FOUNDATION FUND
PARENTS AND CHILDREN ADVANCING TOGETHER LITERACY MINISTRIES - 913 NEWBERGER ROAD - LUTZ, FL 33130			7,380.	0.			BCBS EMBRACE MINI GRANTS - TAMPA SULPHUR SPRINGS
PENUMBRA THEATRE CO. 270 N KENT ST. ST PAUL, MN 55113			99,678.	0.			THE KNIGHT STRATEGIC GROWTH FUND

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
PEREZ ART MUSEUM MIAMI 101 W. FLAGLER STREET MIAMI, FL 33130			10,000.	0.			HELENA RUBINSTEIN PHILANTHROPIC FUND
PEREZ ART MUSEUM MIAMI 101 W. FLAGLER STREET MIAMI, FL 33130			27,500.	0.			HELENA RUBINSTEIN PHILANTHROPIC FUND
PEREZ ART MUSEUM MIAMI 101 W. FLAGLER STREET MIAMI, FL 33130			60,000.	0.			HELENA RUBINSTEIN PHILANTHROPIC FUND
PEREZ ART MUSEUM MIAMI 101 W. FLAGLER STREET MIAMI, FL 33130			250,000.	0.			HELENA RUBINSTEIN PHILANTHROPIC FUND
PERFORMING ARTS CENTER TRUST, INC. 1300 BISCAYNE BLVD MIAMI, FL 33130	65-0353695		17,500.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
PGA REACH FOUNDATION 100 AVE OF THE CHAMPIONS PALM BEACH GARDENS, FL 33130			10,000.	0.			THE STEPHEN HAROLD SCHOTT FAMILY FOUNDATION
PITTSBURGH FILMMAKERS 477 MELWOOD AVE. PITTSBURGH, PA 19162			50,000.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
PRIDELINES YOUTH SERVICES, INC. 9526 NE 2ND AVENUE, #104 MIAMI SHORES, FL 33130	650670159		5,000.	0.			GLBT COMMUNITY PROJECTS FUND
PRIDELINES YOUTH SERVICES, INC. 9526 NE 2ND AVENUE, #104 MIAMI SHORES, FL 33130	650670159		7,000.	0.			GLBT COMMUNITY PROJECTS FUND

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
PRIDELINES YOUTH SERVICES, INC. 9526 NE 2ND AVENUE, #104 MIAMI SHORES, FL 33130	650670159		7,000.	0.			GLBT COMMUNITY PROJECTS FUND
PROFESSIONAL OPPORTUNITIES PROGRAM FOR STUDENTS - 2512 WEST COLONIAL DRIVE - ORLANDO, FL 33130			5,000.	0.			BCBS EMBRACE MINI GRANTS - ORLANDO
RAICES DE ESPERANZA, INC. 420 LINCOLN ROAD, SUITE 348 MIAMI BEACH, FL 33130	20-3801097		10,000.	0.			THE JOHN S. & JAMES L. KNIGHT FOUNDATION FUND
RANSOM EVERGLADES SCHOOL 2045 SOUTH BAYSHORE DRIVE MIAMI, FL 33130			5,000.	0.			THE HIBISCUS PHILANTHROPIC FUND
RANSOM EVERGLADES SCHOOL 2045 SOUTH BAYSHORE DRIVE MIAMI, FL 33130			10,000.	0.			THE HIBISCUS PHILANTHROPIC FUND
RANSOM EVERGLADES SCHOOL, INC. 3575 MAIN HIGHWAY COCONUT GROVE, FL 33130	59-0659070		10,000.	0.			RICHARD AND SUSAN LAMPEN FUND
RARE SPECIES CONSERVATORY FOUNDATION, INC. - 1222 E ROAD - LOXAHATCHEE, FL 33130	65-0560456		125,000.	0.			RARE SPECIES CONSERVATION FUND
RAY OF HOPE FOUNDATION 7984 ESTA LANE ORLANDO, FL 33130	06-1460978		10,000.	0.			MIAMI HEAT CHARITABLE FUND
REAL LIFE 101 SCHOLARSHIP FUND 30500 VAN DYKE AVE., STE. 701A WARREN, MI 48201-3421	38-3412810		10,000.	0.			THE BME FUND

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
REDLAND TROPICAL GARDENS & BOTANICAL FOUNDATION INC. - 24050 SW 162 AVENUE - HOMESTEAD, FL 33130	650655603		7,000.	0.			THE DR. FREDDIE L. YOUNG EDUCATION AND LEADERSHIP FOUNDATION
RESERVE MIAMI 2130 CORAL WAY, #202 MIAMI, FL 33130			15,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
RISING SONS 2036 N. 19TH STREET, UNIT B PHILADELPHIA, PA 19162	01-0940732		10,000.	0.			THE BME FUND
ROCKY MOUNTAIN PUBLIC BROADCASTING NETWORK INC. - 1089 BANNOCK STREET - DENVER, CO 80111	84-0510785		37,500.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
RUTGERS PREPATORY SCHOOL 1345 EASTON AVENUE SOMERSET, NJ 08540	22-1607926		10,000.	0.			RICHARD AND SUSAN LAMPEN FUND
SABRINA COHEN FOUNDATION 1800 PURDY AVE. APT 2406 MIAMI BEACH, FL 33130	03-0579618		15,000.	0.			OUR MIAMI GRANTS ADMINISTRATIVE FUND
SAFE SCHOOLS SOUTH FLORIDA, INC. P.O. BOX 24444 FORT LAUDERDALE, FL 33130	20-4993492		15,000.	0.			GLBT COMMUNITY PROJECTS FUND
SAFE SCHOOLS SOUTH FLORIDA, INC. P.O. BOX 24444 FORT LAUDERDALE, FL 33130	20-4993492		15,000.	0.			GLBT COMMUNITY PROJECTS FUND
SAFESPACE FOUNDATION, INC. P.O. BOX 530521 MIAMI SHORES, FL 33130	65-0353923		75,000.	0.			MIAMI HEAT CHARITABLE FUND

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
SALAK TELESYSTEMS 220 ALTON PLACE COLUMBIA, MD 21230			35,000.	0.			THE KNIGHT FUND FOR SALAK TELESYSTEMS
SALVATION ARMY - MIAMI AREA COMMAND - 1907 NORTHWEST 38TH STREET - MIAMI, FL 33130			5,426.	0.			PHILIP D. MYERS FUND
SAVE DADE 4500 BISCAYNE BLVD., SUITE 340 MIAMI, FL 33130	65-0430497		5,000.	0.			THE GLBT (GAY LESBIAN BI-SEXUAL TRANSGENDER) FUND OF AMERICA
SAVE FOUNDATION, INC. 4500 BISCAYNE BOULEVARD, SUITE 340 MIAMI, FL 33130	650836881		10,000.	0.			GLBT COMMUNITY PROJECTS FUND
SCHOLARSHIP AMERICA ONE SCHOLARSHIP WAY SAINT PETER, MN 55113	04-2296967		10,000.	0.			THE CODINA FAMILY CHARITABLE FUND
SCLERODERMA FOUNDATION 3930 OAKS CLUBHOUSE DRIVE #206 POMPANO BEACH, FL 33130	52-1375827		10,000.	0.			STEARNS WEAVER MILLER WEISSLER ALHADEEF & SITTERSON FUND
SERAPHIC FIRE, INC. 2153 CORAL WAY, SUITE 401 MIAMI, FL 33130	200725426		10,000.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
SERAPHIC FIRE, INC. 2153 CORAL WAY, SUITE 401 MIAMI, FL 33130	200725426		90,000.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
SHAKE-A-LEG MIAMI, INC. 2620 SOUTH BAYSHORE DRIVE COCONUT GROVE, FL 33130	650611917		8,628.	0.			LOCKWOOD FUND

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
SHAKE-A-LEG MIAMI, INC. 2620 SOUTH BAYSHORE DRIVE COCONUT GROVE, FL 33130	650611917		43,000.	0.			LOCKWOOD FUND
SHERIDAN HOUSE FAMILY MINISTRIES 1700 SOUTH FLAMINGO ROAD DAVIE, FL 33130	59-1258384		6,450.	0.			JAMES W. AND ESSIE BARFIELD FUND
SHRINERS HOSPITAL FOR CHILDREN 12502 USF PINE DRIVE TAMPA, FL 33130	36-2193608		8,179.	0.			WINIFRED E. PUECH MEMORIAL FUND
SOSYETE KOUKOUY 5921 NE 2ND AVENUE MIAMI, FL 33130	65-0011457		20,740.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
SOUTH FLORIDA AUTISM CHARTER SCHOOLS, INC. - 13835 NW 97TH AVENUE - HIALEAH, FL 33130	263880489		6,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
SOUTH FLORIDA AUTISM CHARTER SCHOOLS, INC. - 13835 NW 97TH AVENUE - HIALEAH, FL 33130	263880489		6,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
SOUTH FLORIDA NATIONAL PARKS TRUST 1390 SOUTH DIXIE HIGHWAY, SUITE 220 CORAL GABLES, FL 33130	134341209		15,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
SOUTHFIELD OMEGA FOUNDATION, INC. PO BOX 3201 SOUTHFIELD, MI 48201-3421	38-3602280		10,000.	0.			THE BME FUND
SOUTHFIELD OMEGA FOUNDATION, INC. PO BOX 3201 SOUTHFIELD, MI 48201-3421	38-3602280		10,000.	0.			THE BME FUND

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
SOUTHWEST DETROIT BUSINESS ASSOCIATION - 7752 W. VERNOR HIGHWAY - DETROIT, MI 48201-3421	38-2262287		17,369.	0.			THE KNIGHT ARTS CHALLENGE - DETROIT 2013 FUND
SPECIAL OLYMPICS FLORIDA, MIAMI-DADE COUNTY - 2335 NW 107TH AVENUE BOX 57 - MIAMI, FL 33172	237181560		10,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
SPRINGBOARD FOR THE ARTS 308 PRINCE STREET, SUITE 270 SAINT PAUL, MN 55113	41-1690483		99,678.	0.			THE KNIGHT FUND FOR SPRINGBOARD FOR THE ARTS
ST. JOHN COMMUNITY DEVELOPMENT CORPORATION, INC. - 1324 NORTHWEST 3RD AVENUE - MIAMI, FL 33130	592657550		40,000.	0.			SPECIAL PROJECTS FUND - DESIGNATED
ST. JOSEPH'S HOSPITALS FOUNDATION 2700 W DR. MARTIN LUTHER KING BLVD TAMPA, FL 33130	59-1100828		9,000.	0.			BCBS EMBRACE MINI GRANTS - TAMPA SULPHUR SPRINGS
ST. LOUIS PUBLIC RADIO/UNIVERSITY OF MISSOURI - ST. LOUIS - 3651 OLIVE STREET - ST. LOUIS, MO 63108			50,000.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
ST. PHILLIP'S EPISCOPAL CHURCH, INC. - 1121 ANDALUSIA AVENUE - CORAL GABLES, FL 33130			20,000.	0.			THE CODINA FAMILY CHARITABLE FUND
SUITED FOR SUCCESS, INC. 2650 SW 27TH AVENUE SUITE 300A MIAMI, FL 33130	65-0508106		10,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
SUNDARI FOUNDATION, INC. 1514 NW 2ND AVENUE MIAMI, FL 33130	810652266		10,000.	0.			DENISE MOON MEMORIAL FUND

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
SUNDARI FOUNDATION, INC. 1514 NW 2ND AVENUE MIAMI, FL 33130	810652266		15,000.	0.			DENISE MOON MEMORIAL FUND
SUNDARI FOUNDATION, INC. 1514 NW 2ND AVENUE MIAMI, FL 33130	810652266		46,818.	0.			DENISE MOON MEMORIAL FUND
SUNDARI FOUNDATION, INC. 1514 NW 2ND AVENUE MIAMI, FL 33130	810652266		46,818.	0.			DENISE MOON MEMORIAL FUND
SUNSET TPR, INC. DBA WHISPERING THERAPUTIC RIDING CENTER - 6255 SW 125TH AVENUE - MIAMI, FL 33130	273697303		7,500.	0.			HECTOR FAMILY DONOR ADVISED FUND
SUNSET TPR, INC. DBA WHISPERING THERAPUTIC RIDING CENTER - 6255 SW 125TH AVENUE - MIAMI, FL 33130	273697303		75,000.	0.			HECTOR FAMILY DONOR ADVISED FUND
SURVIVORS PATHWAY CORP 1801 CORAL WAY, SUITE 328 MIAMI, FL 33130	80-0796422		13,000.	0.			GLBT COMMUNITY PROJECTS FUND
SURVIVORS PATHWAY CORP 1801 CORAL WAY, SUITE 328 MIAMI, FL 33130	80-0796422		13,000.	0.			GLBT COMMUNITY PROJECTS FUND
SWITCHBOARD OF MIAMI, INC. 190 NE 3RD STREET MIAMI, FL 33130	591348970		10,000.	0.			DENISE MOON MEMORIAL FUND
SWITCHBOARD OF MIAMI, INC. 190 NE 3RD STREET MIAMI, FL 33130	591348970		12,500.	0.			DENISE MOON MEMORIAL FUND

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
SWITCHBOARD OF MIAMI, INC. 190 NE 3RD STREET MIAMI, FL 33130	591348970		12,500.	0.			DENISE MOON MEMORIAL FUND
SWITCHBOARD OF MIAMI, INC. 190 NE 3RD STREET MIAMI, FL 33130	591348970		40,000.	0.			DENISE MOON MEMORIAL FUND
SWITCHBOARD OF MIAMI, INC. 190 NE 3RD STREET MIAMI, FL 33130	591348970		40,000.	0.			DENISE MOON MEMORIAL FUND
SYRACUSE UNIVERSITY 200 EGGERS HALL SYRACUSE, NY 10006	15-0532081		7,500.	0.			THE CHEKA FUND
TAKE STOCK IN CHILDREN 300 NORTHEAST 2ND AVENUE ROOM 5501- MIAMI, FL 33130	593331584		30,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
TALLAHASSEE SENIOR CITIZENS FOUNDATION, INC. - 1400 NORTH MONROE STREET - TALLAHASSEE, FL 33130	59-2040638		6,000.	0.			BCBS EMBRACE MINI GRANTS - TALLAHASSEE
TEACH FOR AMERICA MIAMI-DADE 3252 NE 1ST AVENUE, SUITE 212 MIAMI, FL 33130			15,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
TEACH FOR AMERICA MIAMI-DADE 3252 NE 1ST AVENUE, SUITE 212 MIAMI, FL 33130			5,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
TEAM BETTER BLOCK 2136 LEANDER DRIVE DALLAS, TX 77074			25,509.	0.			THE KNIGHT FUND FOR TEAM BETTER BLOCK

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
TEMPLE BETH SHOLOM 4144 CHASE AVENUE MIAMI BEACH, FL 33130	59-0714828		7,500.	0.			THE HIBISCUS PHILANTHROPIC FUND
TEMPLE BETH SHOLOM, INC. 4144 CHASE AVENUE MIAMI BEACH, FL 33130	59-0714828		19,675.	0.			THE JEFFREY MILLER CHARITABLE FAMILY FUND
TEMPLE EMANU-EL 1701 WASHINGTON AVENUE MIAMI BEACH, FL 33130	59-0711180		30,000.	0.			THE CINDI NASH FAMILY FUND
TEMPLE JUDEA 5500 GRANADA BOULEVARD CORAL GABLES, FL 33130	59-0791048		10,000.	0.			THE E.R.A. FUND
THE A.S.E. FOUNDATION, INC. 2023 BUSHY HALL ROAD TALLAHASSEE, FL 33130	90-0392526		6,500.	0.			BCBS EMBRACE MINI GRANTS - TALLAHASSEE
THE AGENCY FOR LGBT AFRICAN-AMERICANS - 41 BURROUGHS STREET, SUITE 109 - DETROIT, MI 48201-3421	56-2393981		10,000.	0.			THE BME FUND
THE ASCAP FOUNDATION, INC. ONE LINCOLN PLAZA NEW YORK, NY 10006-3724	51-0181769		8,959.	0.			RAYMOND HUBBELL MUSICAL SCHOLARSHIP FUND
THE CENTER FOR HIGH IMPACT PHILANTHROPY - 3815 WALNUT STREET - PHILADELPHIA, PA 19162	23-1352685		500,000.	0.			UJB DONOR ADVISED FUND
THE CENTER FOR MEDIA CHANGE, INC. 733 44TH STREET OAKLAND, CA 90046	68-0632366		25,000.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND

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
THE CHILDREN'S MOVEMENT OF FLORIDA 3250 SOUTHWEST 3RD AVENUE MIAMI, FL 33130	311626706		17,500.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
THE COUNCIL FOR EDUCATIONAL EXCHANGE - 3265 MERIDIAN PARKWAY, SUITE 130 - WESTON, FL 33130	01-0638224		10,000.	0.			THE JEFFREY MILLER CHARITABLE FAMILY FUND
THE FOUNDATION FOR LEON COUNTY SCHOOLS - 725 S. CALHOUN STREET - TALLAHASSEE, FL 33130	59-2852594		5,000.	0.			BCBS EMBRACE MINI GRANTS - TALLAHASSEE
THE INSTITUTE ON HIGHER AWESOME STUDIES - 321 HIGHLAND AVENUE, #1 - SOMERVILLE, MA 01002-5000	27-5002182		62,080.	0.			THE KNIGHT FUND FOR THE INSTITUTE ON HIGHER AWESOME STUDIES
THE JACKSONVILLE ARBORETUM AND GARDENS - P.O. BOX 5763 - JACKSONVILLE, FL 33130	20-1061861		9,000.	0.			BCBS EMBRACE MINI GRANTS - JACKSONVILLE
THE JEWISH MUSEUM 1109 5TH AVENUE NEW YORK, NY 10006-3724	13-6146854		5,000.	0.			HELENA RUBINSTEIN PHILANTHROPIC FUND
THE JUNIOR LEAGUE OF TAMPA, INC. 87 COLUMBIA DRIVE TAMPA, FL 33130	59-0693993		6,750.	0.			BCBS EMBRACE MINI GRANTS - TAMPA SULPHUR SPRINGS
THE LENS 1025 S. JEFFERSON DAVIS PKWY NEW ORLEANS, LA 70130	27-2072772		37,500.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
THE M ENSEMBLE COMPANY, INC. P.O. BOX 1175 MIAMI, FL 33130	59-1773348		30,000.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND

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
THE MIAMI FOUNDATION 200 SOUTH BISCAYNE BOULEVARD SUITE MIAMI, FL 33130	65-0350357		6,450.	0.			JAMES W. AND ESSIE BARFIELD FUND
THE MOTIVATIONAL EDGE 3323 NW 17TH AVENUE MIAMI, FL 33130	262916391		18,750.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
THE MOTIVATIONAL EDGE 3323 NW 17TH AVENUE MIAMI, FL 33130	262916391		39,368.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
THE MUSICAL ARTS ASSOCIATION OF MIAMI, INC. - 1444 BISCAYNE BLVD, SUITE 302 - MIAMI, FL 33130	20-5196415		23,241.	0.			THE KNIGHT MIAMI CLASSICAL MUSEUM FUND
THE POSSE FOUNDATION, INC. 14 WALL STREET, SUITE 8A-60 NEW YORK, NY 10006-3724	133840394		15,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
THE SAINT PAUL CHAMBER ORCHESTRA SOCIETY - 408 SAINT PETER STREET - SAINT PAUL, MN 55113	41-0829498		49,892.	0.			THE KNIGHT DIGITAL MEDIA INNOVATION FUND
THE SEED FOUNDATION 1776 MASSACHUSETTS AVENUE, SUITE 60 WASHINGTON, DC 20006	54-1850819		100,000.	0.			HECTOR FAMILY DONOR ADVISED FUND
THE SEED FOUNDATION 1776 MASSACHUSETTS AVENUE, SUITE 60 WASHINGTON, DC 20006	54-1850819		150,000.	0.			HECTOR FAMILY DONOR ADVISED FUND
THE SOCIETY FOR THE RE-INSTITUTIONALIZATION OF STORY TELLING - 1546 LEE PLACE #2E - DETROIT, MI 48201-3421	46-5151156		10,000.	0.			THE KNIGHT ARTS CHALLENGE - DETROIT 2013 FUND

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
THE TAKE CHARGE FOUNDATION	27-1832986		15,000.	0.			MIAMI HEAT CHARITABLE FUND
THE TAMPA GENERAL HOSPITAL FOUNDATION, INC. - P.O. BOX 1289 - TAMPA, FL 33130	23-7354477		10,000.	0.			WEISSER FAMILY FUND
THE TITUS FOUNDATION PO BOX 12339 TALLAHASSEE, FL 33130	20-0617303		5,000.	0.			BCBS EMBRACE MINI GRANTS - TALLAHASSEE
THE TOWN OF PALM BEACH UNITED WAY 44 COCONUT ROW, M201 PALM BEACH, FL 33130	59-0637885		15,000.	0.			SABADELL UNITED BANK, N.A. FUND
THE WHITNEY MUSEUM OF AMERICAN ART 945 MADISON AVENUE AT 75TH STREET MANHATTAN, NY 10006-3724	13-1789318		10,000.	0.			HELENA RUBINSTEIN PHILANTHROPIC FUND
THE WOMEN'S BREAST HEALTH INITIATIVE, FLORIDA AFFILIATE - 14125 NW 80TH AVENUE, SUITE 306 - MIAMI LAKES, FL 33130	27-3403874		5,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
THE WOMEN'S BREAST HEALTH INITIATIVE, FLORIDA AFFILIATE - 14125 NW 80TH AVENUE, SUITE 306 - MIAMI LAKES, FL 33130	27-3403874		17,500.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
THOMAS ARMOUR YOUTH BALLET, INC. 5818 SW 73RD STREET MIAMI, FL 33130	596163957		20,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
TIGERTAIL PRODUCTIONS INC 842 NW 9TH COURT MIAMI, FL 33130	59-1968705		9,000.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND

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
TIGERTAIL PRODUCTIONS INC 842 NW 9TH COURT MIAMI, FL 33130	59-1968705		10,000.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
TIGERTAIL PRODUCTIONS INC 842 NW 9TH COURT MIAMI, FL 33130	59-1968705		40,000.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
TROPICAL AUDUBON SOCIETY, INC. 5530 SUNSET DRIVE MIAMI, FL 33130	59-6147345		10,000.	0.			PORTER ANDERSON FUND
TRUE ROCK CHURCH 23060 BITTERSWEET LANE SOUTHFIELD, MI 48201-3421	26-0589809		10,000.	0.			THE BME FUND
TRUSTEES OF BOSTON UNIVERSITY 25 BUICK STREET BOSTON, MA 01002-5000	04-2103547		50,000.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
TU DANCE PO BOX 40405 ST. PAUL, MN 55113	20-2534129		99,678.	0.			THE KNIGHT FUND FOR TU DANCE
TULSA COMMUNITY FOUNDATION 7030 SOUTH YALE AVENUE SUITE 600 TULSA, OK 74136	73-1554474		37,500.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
TWIN LAKES ELEMENTARY 6735 WEST 5TH PLACE HIALEAH, FL 33130	91-1161504		8,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
UDONIS HASLEM CHILDREN FOUNDATION, INC. - 6637 BOXWOOD DRIVE - MIRAMAR, FL 33130	20-3303133		10,000.	0.			MIAMI HEAT CHARITABLE FUND

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
UDONIS HASLEM CHILDREN FOUNDATION, INC. - 6637 BOXWOOD DRIVE - MIRAMAR, FL 33130	20-3303133		10,000.	0.			MIAMI HEAT CHARITABLE FUND
UNITED NEGRO COLLEGE FUND, INC. 1222 SOUTH ANDREWS AVENUE SUITE 502 FT. LAUDERDALE, FL 33130	13-1624241		50,000.	0.			MIAMI HEAT CHARITABLE FUND
UNITED STATES FUND FOR UNICEF CORPORATION - 333 EAST 38TH STREET - NEW YORK, NY 10006-3724	13-1760110		5,426.	0.			PHILIP D. MYERS FUND
UNITED WAY OF MIAMI-DADE, INC. 3250 SW 3RD AVENUE MIAMI, FL 33130	59-0830840		7,921.	0.			THE CODINA FAMILY CHARITABLE FUND
UNITED WAY OF MIAMI-DADE, INC. 3250 SW 3RD AVENUE MIAMI, FL 33130	59-0830840		10,000.	0.			THE CODINA FAMILY CHARITABLE FUND
UNITED WAY OF MIAMI-DADE, INC. 3250 SW 3RD AVENUE MIAMI, FL 33130	59-0830840		10,000.	0.			THE CODINA FAMILY CHARITABLE FUND
UNITED WAY OF MIAMI-DADE, INC. 3250 SW 3RD AVENUE MIAMI, FL 33130	59-0830840		15,920.	0.			THE CODINA FAMILY CHARITABLE FUND
UNITED WAY OF MIAMI-DADE, INC. 3250 SW 3RD AVENUE MIAMI, FL 33130	59-0830840		25,000.	0.			THE CODINA FAMILY CHARITABLE FUND
UNITY COALITION/COALICION UNIDA, INC - 831 NINTH STREET - MIAMI BEACH, FL 33130	26-3327254		5,000.	0.			GLBT COMMUNITY PROJECTS FUND

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
UNIVERSITY OF MASSACHUSETTS 181 PRESIDENTS DRIVE AMHERST, MA 01002-5000	04-6013152		5,000.	0.			THE MIAMI HEAT SCHOLARSHIP FUND
UNIVERSITY OF MIAMI PO BOX 248073 CORAL GABLES, FL 33130	590624458		5,000.	0.			LAWRENCE R. HYER FUND
UNIVERSITY OF MIAMI PO BOX 248073 CORAL GABLES, FL 33130	590624458		8,000.	0.			LAWRENCE R. HYER FUND
UNIVERSITY OF MIAMI PO BOX 248073 CORAL GABLES, FL 33130	590624458		15,000.	0.			LAWRENCE R. HYER FUND
UNIVERSITY OF MIAMI PO BOX 248073 CORAL GABLES, FL 33130	590624458		21,580.	0.			LAWRENCE R. HYER FUND
UNIVERSITY OF MIAMI PO BOX 248073 CORAL GABLES, FL 33130	590624458		21,590.	0.			LAWRENCE R. HYER FUND
UNIVERSITY OF MIAMI PO BOX 248073 CORAL GABLES, FL 33130	590624458		5,000.	0.			LAWRENCE R. HYER FUND
UNIVERSITY OF MIAMI PO BOX 248073 CORAL GABLES, FL 33130	590624458		20,000.	0.			LAWRENCE R. HYER FUND
UNIVERSITY OF MIAMI - DIVISION OF UNIVERSITY ADVANCEMENT - 5807 PONCE DE LEON BOULEVARD - CORAL GABLES, FL 33130	590624458		12,500.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND

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
UNIVERSITY OF MIAMI HILLEL 1100 STANFORD DRIVE CORAL GABLES, FL 33130	52-1758796		5,000.	0.			THE JEFFREY MILLER CHARITABLE FAMILY FUND
UNIVERSITY OF MIAMI HILLEL 1100 STANFORD DRIVE CORAL GABLES, FL 33130	52-1758796		50,000.	0.			THE JEFFREY MILLER CHARITABLE FAMILY FUND
UNIVERSITY OF MIAMI SCHOOL OF LAW CAREER DEVELOPMENT OFFICE - 1311 MILLER DRIVE - CORAL GABLES, FL 33130	59-0624458		50,000.	0.			THE CINDI NASH FAMILY FUND
UNIVERSITY OF SOUTHERN CALIFORNIA 635 CHILDS WAY LOS ANGELES,, CA 90046	95-1642394		10,000.	0.			THE PAUL AND MARIE-FRANCE BLOCH FUND
UNIVERSITY OF VIRGINIA LAW SCHOOL FOUNDATION - 580 MASSIE ROAD - CHARLOTTESVILLE, VA 22904-4276	54-1682176		5,000.	0.			THE GIUSTO FAMILY FOUNDATION
UNIVERSITY OF WEST FLORIDA 11000 UNIVERSITY PARKWAY PENSACOLA, FL 33130	59-6166292		5,000.	0.			THE MIAMI HEAT SCHOLARSHIP FUND
UOTS CANCER CAMP/MIAMI CHILDRENS HOSPITAL. - 3100 SW 62 AVENUE NE WING #121 - MIAMI, FL 33130	59-1720704		25,000.	0.			THE CINDI NASH FAMILY FUND
UP2US, INC. 520 8TH AVENUE 2ND FLOOR NEW YORK, NY 10006-3724	80-0535933		100,000.	0.			MIAMI HEAT CHARITABLE FUND
URBANPROMISE MIAMI	452899556		5,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND

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
URGENT, INC. 1000 NW 1 AVENUE, SUITE 100 MIAMI, FL 33130	650516506		15,000.	0.			THE PROMISES KEPT FUND
U-TURNS, INC. 13720 OLD ST. AUGUSTINE RD. #8-123 JACKSONVILLE, FL 33130	20-2442876		9,000.	0.			BCBS EMBRACE MINI GRANTS - JACKSONVILLE
VERMONT JOURNALISM TRUST 97 STATE STREET MONTPELIER, VT 05753	27-1553931		37,500.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
VICTIM RESPONSE, INC. - THE LODGE P.O. BOX 470728 MIAMI, FL 33130	27-0077139		50,000.	0.			DENISE MOON MEMORIAL FUND
VICTIM RESPONSE, INC. - THE LODGE P.O. BOX 470728 MIAMI, FL 33130	27-0077139		50,000.	0.			DENISE MOON MEMORIAL FUND
VIDA LEGAL ASSISTANCE, INC. 6538 COLLINS AVENUE, #324 MIAMI BEACH, FL 33130	275325859		50,000.	0.			DENISE MOON MEMORIAL FUND
VIDA LEGAL ASSISTANCE, INC. 6538 COLLINS AVENUE, #324 MIAMI BEACH, FL 33130	275325859		50,000.	0.			DENISE MOON MEMORIAL FUND
VILLAGE OF KEY BISCAYNE 88 W. MCINTYRE STREET, SUITE 210 KEY BISCAYNE, FL 33130	30-0239421		15,000.	0.			SABADELL UNITED BANK, N.A. FUND
VILLAGEREACH 2900 EAST LAKE AVENUE EAST SUITE 23 SEATTLE, WA 98109	91-2083484		300,000.	0.			UBJ DONOR ADVISED FUND

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
VOICE OF ORANGE COUNTY 207 N. BROADWAY, SUITE H SANTA ANA, CA 90046	27-0550219		37,500.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
WADE'S WORLD FOUNDATION, INC. 3109 GRAND AVENUE, PMB 447 MIAMI, FL 33130	20-8765440		20,000.	0.			MIAMI HEAT CHARITABLE FUND
WCIJ INC. 821 UNIVERSITY AVENUE MADISON, WI 53706	26-2143608		37,500.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
WESTLAND HIALEAH SENIOR HIGH SCHOOL - 4000 WEST 18TH AVENUE - HIALEAH, FL 33130			6,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
WILEY SUNSHINE FOUNDATION 1920 CHOWKEEBIN NENE TALLAHASSEE, FL 33130	20-0901474		18,000.	0.			BCBS EMBRACE MINI GRANTS - TALLAHASSEE
WILLIAM WAY COMMUNITY CENTER 1315 SPRUCE STREET PHILADELPHIA, PA 19162	23-7429170		10,000.	0.			THE GLBT (GAY LESBIAN BI-SEXUAL TRANSGENDER) FUND OF AMERICA
WILLIAM WAY COMMUNITY CENTER 1315 SPRUCE STREET PHILADELPHIA, PA 19162	23-7429170		5,000.	0.			THE GLBT (GAY LESBIAN BI-SEXUAL TRANSGENDER) FUND OF AMERICA
WOMEN OF TOMORROW MENTOR & SCHOLARSHIP PROGRAM - 22 EAST FLAGLER STREET, 6TH FLOOR - MIAMI, FL 33130	650862995		5,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
WOMEN OF TOMORROW MENTOR & SCHOLARSHIP PROGRAM - 22 EAST FLAGLER STREET, 6TH FLOOR - MIAMI, FL 33130	650862995		10,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND

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
WOMEN OF TOMORROW MENTOR & SCHOLARSHIP PROGRAM - 22 EAST FLAGLER STREET, 6TH FLOOR - MIAMI, FL 33130	650862995		15,000.	0.			COMMUNITY GRANTS ADMINISTRATIVE FUND
WORKING WELL, INC. PO BOX 6416 TALLAHASSEE, FL 33130	30-0592433		5,000.	0.			BCBS EMBRACE MINI GRANTS - TALLAHASSEE
WYOFIELD 112 W. SECOND STREET CASPER, WY 82601	27-0410642		37,500.	0.			THE KNIGHT LOCAL MEDIA INITIATIVE FUND
YALE CANCER CENTER 157 CHURCH STREET, 9TH FLOOR NEW HAVEN, CT 06106	06-0646973		500,000.	0.			THE DANEEN AND CHARLES STIEFEL CHARITABLE FOUNDATION
YES INSTITUTE 5275 SUNSET DRIVE SOUTH MIAMI, FL 33130	65-0646667		7,500.	0.			GLBT COMMUNITY PROJECTS FUND
YMCA OF GREATER MIAMI 730 NW 107TH AVENUE SUITE 200 MIAMI, FL 33130	590624464		5,000.	0.			COMMUNITY GRANTS FUND
YMCA OF GREATER MIAMI 730 NW 107TH AVENUE SUITE 200 MIAMI, FL 33130	590624464		17,500.	0.			COMMUNITY GRANTS FUND
YOUNG ARTS 2100 BISCAYNE BOULEVARD MIAMI, FL 33130	59-2141837		6,512.	0.			THE BARLICK FAMILY CHARITABLE FUND
YOUNG NATION 9232 FALCON STREET DETROIT, MI 48201-3421	26-2296175		5,300.	0.			THE KNIGHT ARTS CHALLENGE - DETROIT 2013 FUND

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
YOUTH CO-OP, INC. 3525 NW 7TH STREET MIAMI, FL 33130	237320351		6,000.	0.			BCBS EMBRACE MINI GRANTS - HIALEAH
ZOETIC STAGE 7454 SW 54 COURT MIAMI, FL 33130	27-1795274		25,000.	0.			THE KNIGHT ARTS CHALLENGE - MIAMI 2013 FUND
CITY YEAR MIAMI, INC. 44 WEST FLAGLER STREET, SUITE 500 MIAMI, FL 33130			5,000.	0.			THE JOHN S. & JAMES L. KNIGHT FOUNDATION FUND
MAKE-A-WISH FOUNDATION OF SOUTHERN FLORIDA, INC. - 4491 SOUTH STATE ROAD 7 SUITE 201 - FT. LAUDERDALE, FL 33130			5,000.	0.			MIAMI HEAT CHARITABLE FUND
NEW WORLD SCHOOL OF THE ARTS 25 N.E. 2ND STREET MIAMI, FL 33130			10,538.	0.			SELMA ALEXANDER FUND
TEACH FOR AMERICA, INC. 3250 NE 1 AVENUE SPACE 10, 11 & 12 MIAMI, FL 33130	13-3541913		5,000.	0.			HECTOR FAMILY DONOR ADVISED FUND
TEACH FOR AMERICA, INC. 3250 NE 1 AVENUE SPACE 10, 11 & 12 MIAMI, FL 33130	13-3541913		25,000.	0.			HECTOR FAMILY DONOR ADVISED FUND
TEACH FOR AMERICA, INC. 3250 NE 1 AVENUE SPACE 10, 11 & 12 MIAMI, FL 33130	13-3541913		25,000.	0.			HECTOR FAMILY DONOR ADVISED FUND
TEACH FOR AMERICA, INC. 3250 NE 1 AVENUE SPACE 10, 11 & 12 MIAMI, FL 33130	13-3541913		25,000.	0.			HECTOR FAMILY DONOR ADVISED FUND

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
TEACH FOR AMERICA, INC. 3250 NE 1 AVENUE SPACE 10, 11 & 12 MIAMI, FL 33130	13-3541913		30,000.	0.			HECTOR FAMILY DONOR ADVISED FUND
TEACH FOR AMERICA, INC. 3250 NE 1 AVENUE SPACE 10, 11 & 12 MIAMI, FL 33130	13-3541913		250,000.	0.			HECTOR FAMILY DONOR ADVISED FUND
TEMPLE BETH AM, INC. 5950 NORTH KENDALL DRIVE MIAMI, FL 33130	59-0855408		8,000.	0.			RICHARD AND SUSAN LAMPEN FUND
TEMPLE BETH AM, INC. 5950 NORTH KENDALL DRIVE MIAMI, FL 33130	59-0855408		10,000.	0.			RICHARD AND SUSAN LAMPEN FUND
TEMPLE BETH AM, INC. 5950 NORTH KENDALL DRIVE MIAMI, FL 33130	59-0855408		10,000.	0.			RICHARD AND SUSAN LAMPEN FUND
TEMPLE BETH AM, INC. 5950 NORTH KENDALL DRIVE MIAMI, FL 33130	59-0855408		10,000.	0.			RICHARD AND SUSAN LAMPEN FUND
THE GOOD GOVERNMENT INITIATIVE 1320 SOUTH DIXIE HIGHWAY SUITE 911 CORAL GABLES, FL 33130	27-3639937		144,597.	0.			THE GOOD GOVERNMENT INITIATIVE FUND

Part III**Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" to 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 non-cash assistance

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 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS**

THE ORGANIZATION HAS MULTIPLE COMPETITIVE GRANTS PROGRAMS WITH

ESTABLISHED CRITERIA FOR GRANTS ELIGIBILITY. COMPETITIVE GRANT

APPLICATIONS ARE REVIEWED BY THE PROGRAM STAFF OF THE MIAMI FOUNDATION.

RECOMMENDATIONS ARE APPROVED BY THE BOARD OF MIAMI FOUNDATION, INC.

THE FOUNDATION ENTERS INTO GRANT AGREEMENTS WITH ALL GRANTEEES WHO ARE

RECIPIENTS OF COMPETITIVE GRANTS THAT LAY OUT THE TERMS AND CONDITIONS

OF THE GRANT. ALL GRANTS ARE REQUIRED TO FILE REPORTS DETAILING

NARRATIVE AND FINANCIAL INFORMATION REGARDING THE USE OF FUNDS. THE

Part IV Supplemental Information

FOUNDATION FREQUENTLY CONDUCTS SITE VISITS AND PHONE CONSULTATIONS WITH
GRANTEES. GRANT AWARDS MAY BE SPLIT INTO MULTIPLE PAYMENTS. ANY
PAYMENTS ON GRANT AWARDS ARE CONTINGENT UPON RECEIPT AND APPROVAL OF
GRANT AGREEMENTS AND PROGRESS REPORTS. A PROGRAM OFFICER IS
RESPONSIBLE FOR MONITORING THE GRANTEES ACTIVITIES.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Open to Public
Inspection

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 in 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 (e.g., 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 in 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 in 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 in 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" to line 5a or 5b, describe in Part III.

6 For persons listed in 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" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in 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" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2014

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 in 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 are not 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 in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JAVIER ALBERTO SOTO PRESIDENT & CEO	(i)	266,134.	25,000.	0.	14,159.	8,156.	313,449.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) CHARISSE L. GRANT SENIOR VICE PRESIDENT	(i)	153,127.	1,000.	0.	7,849.	8,038.	170,014.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) PAMELA OLMO VICE PRESIDENT OF FINANCE & CFO	(i)	137,370.	1,000.	0.	7,043.	5,487.	150,900.	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)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

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 \$196 MILLION IN GRANTS AND SCHOLARSHIPS HAS BEEN AWARDED IN OUR RICH 48 YEAR HISTORY. TODAY, WE CAREFULLY STEWARD OVER \$200 MILLION IN CHARITABLE ASSETS.

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

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) (2014)

432211
08-27-14

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 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.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Name of the organization

THE MIAMI FOUNDATION, INC.

Employer identification number
65-0350357

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
DADEFUND, INC. - 65-0366144 40 NW 3RD STREET, SUITE 305 MIAMI, FL 33128	GRANTS	FLORIDA	501(C)(3)	11A	N/A		X
MLM FUND III, INC. - 20-2042064 40 NW 3RD STREET, SUITE 305 MIAMI, FL 33128	GRANTS	FLORIDA	501(C)(3)	11A	N/A		X
COLLEGE ASSISTANCE PROGRAM, INC. - 65-0082772, 40 NW 3RD STREET, SUITE 305, MIAMI, FL 33128	GRANTS	FLORIDA	501(C)(3)	11A	N/A		X

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

Schedule R (Form 990) 2014

Part III

Part IV

Part IV

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	X
b Gift, grant, or capital contribution to related organization(s)	1b	X
c Gift, grant, or capital contribution from related organization(s)	1c	X
d Loans or loan guarantees to or for related organization(s)	1d	X
e Loans or loan guarantees by related organization(s)	1e	X
f Dividends from related organization(s)	1f	X
g Sale of assets to related organization(s)	1g	X
h Purchase of assets from related organization(s)	1h	X
i Exchange of assets with related organization(s)	1i	X
j Lease of facilities, equipment, or other assets to related organization(s)	1j	X
k Lease of facilities, equipment, or other assets from related organization(s)	1k	X
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	X
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X
o Sharing of paid employees with related organization(s)	1o	X
p Reimbursement paid to related organization(s) for expenses	1p	X
q Reimbursement paid by related organization(s) for expenses	1q	X
r Other transfer of cash or property to related organization(s)	1r	X
s Other transfer of cash or property from related organization(s)	1s	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.	L	199,089.FMV	
(2) MLM FUND III, INC.	L	10,000.FMV	
(3) COLLEGE ASSISTANCE PROGRAM, INC.	L	38,402.FMV	
(4)			
(5)			
(6)			

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

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

[illegible]

Provide additional information for responses to questions on Schedule R (see instructions).

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions	
Type or print Name of exempt organization or other filer, see instructions. THE MIAMI FOUNDATION, INC.	Employer identification number (EIN) or 65-0350357
Number, street, and room or suite no. If a P.O. box, see instructions. 40 NW 3RD STREET, NO. 305	Social security number (SSN)
City, town or post office, state, and ZIP code. For a foreign address, see instructions. MIAMI, FL 33128	

Enter the Return code for the return that this application is for (file a separate application for each return) **01**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

PAMELA OLMO

- The books are in the care of **40 NW 3RD STREET SUITE 305 - MIAMI, FL 33128**

Telephone No. **305-371-2711**

Fax No. ☐

- If the organization does not have an office or place of business in the United States, check this box ☐

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **NOVEMBER 15, 2015.**

5 For calendar year **2014**, or other tax year beginning _____, and ending _____.

6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

7 State in detail why you need the extension

INFORMATION NEEDED TO FILE A COMPLETE AND ACCURATE RETURN IS NOT AVAILABLE AT THIS TIME. ADDITIONAL TIME IS REQUESTED.

8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ☐

Title **CPA**

Date ☐

Form **8868** (Rev. 1-2014)