Form 990-T	EXTENDED TO FEBRUARY 15, 2018 Exempt Organization Business Income Tax Retu	Jrn ↓	OMB No 1545-0687
_	(and proxy tax under section 6033(e))	017	0040
·	For calendar year 2016 or other tax year beginning APR 1, 2016 and ending MAR 31, 2 Information about Form 990-T and its instructions is available at www.irs.gov/form 990t.	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	2016
Department of the Treasury Internal Revenue Service	Do not enter SSN numbers on this form as it may be made public if your organization is a 5010)(3) T	open to Public Inspection for 10 (c)(3) Organizations Only
A Check box if address changed	Name of organization (Check box if name changed and see instructions.)	DEmplo (Emplo	yer identification number byees' trust, see ctions)
B Exempt under section	Print MIAMI DADE COLLEGE FOUNDATION, INC.	5.5	9-6169745
X 501(c)(3)	or Number, street, and room or suite no. If a P.O. box, see instructions.	E Unrela	ted business activity codes structions)
408(e)220(e)	Type 300 N.E. 2ND AVENUE, NO. 1423-1		ou donons ,
408A 530(a)		7.	
529(a)	MIAMI, FL 33132	9000	000
C Book value of all assets at end of year	F Group exemption number (See instructions.)		
	G Check organization type ► X 501(c) corporation 501(c) trust 401(a) trust 501(s) primary unrelated business activity. ► SEE STATEMENT 1	ust	Other trust
	on's primary unrelated business activity. SEE STATEMENT 1 s the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?	► Yes	X No
	and identifying number of the parent corporation.	P L Yes	S A NO
	f ► LISA L. MARION, CPA Telephone number	(305	237-3222
	ed Trade or Business Income (A) Income (B) Expe		(C) Net
1a Gross receipts or sal			 `·
b Less returns and allo		ľ	
2 Cost of goods sold (Schedule A, line 7)		
3 Gross profit, Subtrac	ot line 2 from line 1c		
4a Capital gain net incor			
	n 4797, Part II, line 17) (attach Form 4797)		
c Capital loss deductio			7.650
	partnerships and S corporations (attach statement) 5 -7,658. STMT		-7,658.
6 Rent income (Schedi	· · · · · · · · · · · · · · · · · · ·		
	ced income (Schedule E) Oyalties, and rents from controlled organizations (Sch. F) 8		
•	of a section 501(c)(7), (9), or (17) organization (Schedule G)		
	tivity income (Schedule I)		
11 Advertising income (
12 Other income (See in	nstructions; attach schedule) 12		
13 Total, Combine line			-7,658.
	ons Not Taken Elsewhere (See instructions for limitations on deductions.)	_	-
	contributions, deductions must be directly connected with the unrelated business income.)		
	fficers, directors, and trust ees (Schedulo K)	14	
15 Salaries and wages		15	
16 Repairs and mainter17 Bad debts	nance S	16	
18 Interest (attach sch	edule) DEC 1 5 2017	18	
10 Tayes and licenses	100	19	
`20 Charitable contribut	tions (See instructions for imitation as TEN UT SEE STATEMENT 4		0.
21 Depreciation (attach	h Form 4562)		
22 Less depreciation c	laimed on Schedule A and elsewhere on return	22b	
23 Depletion		23	
	ferred compensation plans	24	_
25 Employee benefit pi		25	
26 Excess exempt expe	•	26	
27 Excess readership of 28 Other deductions (a		27	
•	Add lines 14 through 28	28	0.
	taxable income before net operating loss deduction. Subtract line 29 from line 13	30	-7,658.
	deduction (limited to the amount on line 30) SEE STATEMENT 3		
	taxable income before specific deduction. Subtract line 31 from line 30	32	-7,658.
	(Generally \$1,000, but see line 33 instructions for exceptions)	33	1,000.
•	s taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or		
line 32		34	-7,658.
623701 01-18-17 LHA F	or Paperwork Reduction Act Notice, see instructions.		Form 99Q-T (2016)

Form 990-		69745	Page 2
Part I	Tax Computation		
, 35	Organizations Taxable as Corporations. See instructions for tax computation.		
	Controlled group members (sections 1561 and 1563) check here ▶ ☐ See instructions and;		
a	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):		
	(1) \$ (2) \$ (3) \$		
b	Enter organization's share of: (1) Additional 5% tax (not more than \$11,750)		
	(2) Additional 3% tax (not more than \$100,000)		
c	Income tax on the amount on line 34	35c	0.
36	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from:		
	Tax rate schedule or Schedule D (Form 1041)	36	
37	Proxy tax. See instructions	37	-
38	Alternative minimum tax	38	
39	Tax on Non-Compliant Facility Income. See instructions	39	
40	Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies	40	0.
	V Tax and Payments	***************************************	
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 41a		
	Other credits (see instructions) 41b	1	
G	General business credit. Attach Form 3800 41c	7	
ď	Credit for prior year minimum tax (attach Form 8801 or 8827) 41d	┦ ┃	
	Total credits Add lines 41a through 41d	41e	
42	Subtract line 41e from line 40	42	0.
43	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)		
44	Total tax. Add lines 42 and 43	44	0.
	Payments: A 2015 overpayment credited to 2016	· ·	
	2016 estimated tax payments 45b	┤	
	Tax deposited with Form 8868 45c	┥ ┃	
	Foreign organizations, Tax paid or withheld at source (see instructions) 45d	⊣	
	Backup withholding (see instructions) 45e	┥ ┃	
	Credit for small employer health insurance premiums (Attach Form 8941) 451	┥ ┃	
		-	
g	Form 4136 Other Total • 45g	i i	
46	Total payments. Add lines 45a through 45g	46	
	Estimated tax penalty (see instructions). Check if Form 2220 is attached	47	
47	Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed	 	0.
48		48	0.
49	Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid	49	
50 Part	Enter the amount of line 49 you want: Credited to 2017 estimated tax Statements Regarding Certain Activities and Other Information (see instructions)	50	
			N
51	At any time during the 2016 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file		Yes No
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country		•
50	here		$-\frac{X}{X}$
52	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		
50	If YES, see instructions for other forms the organization may have to file.		1 1
53	Enter the amount of tax-exempt interest received or accrued during the tax year \$\bigs\\$ Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my known in the second s	nowledge and helief	It is true
Sign	correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge VP-ADVANCEMENT,	owledge and belief,	it is tide,
Here		May the IRS discuss	
		the preparer shown b	
		instructions)? X	Yes No
	Print/Type preparer's name Preparer's signature Date Check	If PTIN	
Paid	STEVEN BERWICK, self- employed		21.406
Prepa	arer STEVEN BERWICK, CPA CPA 12/04/17	P0018	
Use (Only Firm's name KAUFMAN, ROSSIN & CO., P.A. Firm's EIN I	<u>> 59-18</u>	318353
	2699 S. BAYSHORE DRIVE	/20E\ 0:	E E C O O
	Firm's address ► MIAMI, FL 33133 Phone no	(305) 85	_
		Form	990-T (2016)

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Schedule A - Cost of Goods	Sold. Enter r	nethod of inven	tory va	aluation N/A						
1 Inventory at beginning of year	1			Inventory at end of year	ır		6			
2 Purchases	2		7	Cost of goods sold. St	ubtract I	ine 6		1		
3 Cost of labor	3		7	from line 5. Enter here			ł			
4a Additional section 263A costs			┥	line 2		,	7			
(attach schedule)	4a		8	Do the rules of section	263A (with respect to		<u> </u>	Yes	No
b Other costs (attach schedule)	4b		4	property produced or a	•	•			-	
5 Total, Add lines 1 through 4b	5	_	1	the organization?					ı	
Schedule C - Rent Income (F	rom Real I	Property and			Leas	ed With Real Pro	per	ty)		
(see instructions)		-								
1. Description of property										
(1)							- -			
(2)										
(3)		_								
(4)		-								
	2. Rent received	d or accrued				0/->0				
(a) From personal property (if the perce rent for personal property is more the 10% but not more than 50%)	entage of nan	of rent for p	ersonal p	onal property (if the percenta property exceeds 50% or if d on profit or income)	age	3(a) Deductions directi columns 2(a) a	ly conne and 2(b)	attach schedule	ome ir	1
(1)										
(2)								_		
(3)						· · · · · · · · · · · · · · · · · · ·				
(4)									_	
Total	0.	Total			0.					
(c) Total income. Add totals of columns 2(a here and on page 1, Part I, line 6, column (A		er 🕨			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	-			0.
Schedule E - Unrelated Debt		Income (see	nstruc	ctions)						<u> </u>
		(2.	Gross income from		3. Deductions directly co to debt-finan	nnected ced pro	with or allocable perty		
1. Description of debt-finar	nced property		· '	or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other dedu (attach sche-		3
(1)			Ī				\neg			
(2)				-						
(3)							1	-		
(4)		-					† –			
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or all debt-finance	djusted basis ocable to ced property schedule)	6.	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8. Allocable de (column 6 x total 3(a) and 3	of colu	
(1)				%						
(2)				%						
(3)				%			1		_	
(4)				%			\top			
						nter here and on page 1, Part I, line 7, column (A)		Enter here and or Part I, line 7, col		
Totals				•		0				0.
Total dividends-received deductions inclu	uded in column 8	3					_			0.
		· ·						Form 95	90-T (_

Schedule F - Interest,	Annuitie	es, Royal	ties, an		From Controlled O			ations	(see ins	truction	s)
1. Name of controlled organiza	ation	2. Emp identific numb	ation	3. Net unre	lated income instructions)	4. Tota			6. Deductions directly connected with income in column 5		
(1)					-						
(2)											
(3)								_			
(4)		<u></u>						<u></u>			
Nonexempt Controlled Organ	izations										
7. Taxable Income		unrelated incom see instructions		9. Total o	of specified paying made	ments	10. Part of colu in the controll gross	mn 9 that is ing organiza s income	included ation's		ductions directly connected income in column 10
(1)											
(2)		-									
(3)											
(4)											
							Add colur Enter here and line 8,		I	Enter h	d columns 6 and 11 ere and on page 1, Part I, tine 8, column (B)
Totals						>			0.		0
Schedule G - Investme (see inst	ent Inco tructions)	me of a	Section	501(c)(7	7), (9), or	(17) Or	<u> </u>				
	cription of inco	ome			2. Amount of	ıncome	3. Deduction directly connected (attach scheduler)	ected	4. Set-		5. Total deductions and set-asides (col 3 plus col 4)
(1)											<u> </u>
(2)											
(3)											
(4)					Enter here and	00 0000 1					Enter here and on page
					Part I, line 9, co	lumn (A)					Part I, line 9 column (B)
Totals Schedule I - Exploited		t Activity	Incom	e, Other	Than Ac	0. Ivertisi	ng Income				0
(see instr	uctions)										
1. Description of exploited activity	unrelated	Gross 1 business ne from business	directly c with pro of unr	penses onnected eduction elated s income	4. Net inconfrom unrelated business (cominus colum gain, comput through	I trade or Ilumn 2 n 3) If a e cols 5	5. Gross inco from activity is not unrela business inco	that ted	6. Exp attribut colur	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)	1										
(2)											
(3)											
(4)											
	page 1	re and on 1, Part I, , col (A)				<u> </u>					Enter here and on page 1, Part II, line 26
Totals Schedule J - Advertis	ing Inco	0.		0.							0
Part I Income From					solidated	Basis					<u></u> _
					1 4 44						7
1. Name of periodical		2. Gross advertising income	adv€	3. Direct ertising costs	or (loss) (c col 3) If a g	tising gain of 2 minus ain, comput nrough 7	5. Circula income		6. Reade		7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)											
(2)								I			
(3)					4		<u></u>				!
	ı		1		1		1	1			1
(4)			_+					+			

Form 990-1 (2016) MIAMI DAL						<u>0109/4</u>	25 Page 5
Part II Income From Peri			rate Basis (For eac	ch periodical lis	ted in Pa	ırt II, fill ın	
columns 2 through 7 on	a line-by-line basis.)	<u> </u>				
1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7	5. Circulation income	6.1	Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)							_
(2)							
(3)							
(4)							
Totals from Part I	0.	0.					0.
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)					Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	0.	0.] 0.
Schedule K - Compensation	on of Officers,	Directors, an	d Trustees (see ins	structions)			
1. Name			2. Title	3. Per time de busi	voted to		pensation attributable prelated business
(1)					%		
(2)					%		
(3)					%		
(4)					%		
Total. Enter here and on page 1, Part II,	line 14				•		0.

Form 990-T (2016)

1,418.

MIAMI DAI	DE COLLEGE FOUNDATI	ION, INC.		59-61697	4 5
FORM 990-T	DESCRIPTION OF	ORGANIZATION'S BUSINESS ACTIVIT	PRIMARY UNRELATED Y	STATEMENT	1
	BUSINESS INCOME PA	ASSED THROUGH FROM	M INVESTMENT IN PA	ARTNERSHIPS	
					
FORM 990-T	•	SS) FROM PARTNERS	HIPS	STATEMENT	2
DESCRIPTION	N			AMOUNT	
DTC PRIVATE	- E EQUITY II-Q, L.P. E EQUITY II-Q, L.P. FRATEGIC VALUE REAI	- CAPITAL LOSSE		-17 -19,69 12,22	9.
TOTAL TO FO	ORM 990-T, PAGE 1,	LINE 5		-7,65	8.
FORM 990-T	NET	OPERATING LOSS D	EDUCTION	STATEMENT	
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR	
03/31/13 03/31/14 03/31/16	1,609. 194. 1,418.	1,609. 194. 0.	0. 0. 1,418.	0 0 1,418	•

1,418.

NOL CARRYOVER AVAILABLE THIS YEAR

FORM. 990-T	CONTRIBUTIONS SUMMARY		STATEMENT	4
QUALIFIED CONTRIBUTIONS SU	BJECT TO 100% LIMIT			
CARRYOVER OF PRIOR YEARS U	NUSED CONTRIBUTIONS			
FOR TAX YEAR 2011 FOR TAX YEAR 2012 FOR TAX YEAR 2013 FOR TAX YEAR 2014	12,912,501			
FOR TAX YEAR 2015	12,912,501			
TOTAL CARRYOVER TOTAL CURRENT YEAR 10% CON	TRIBUTIONS	25,825,002		
TOTAL CONTRIBUTIONS AVAILATION AVAILATION A	—· · ——	25,825,002		
EXCESS 10% CONTRIBUTIONS EXCESS 100% CONTRIBUTIONS	_	25,825,002		
TOTAL EXCESS CONTRIBUTIONS		25,825,002		
ALLOWABLE CONTRIBUTIONS DE	DUCTION			0
TOTAL CONTRIBUTION DEDUCTION	ON			C