

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990-PF

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service Do not enter Social Security numbers on this form as it may be made public.
Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

	endar year 2013, or	tax year beginning N	May 9 , 2013		31 , 2013	
Name of fo		ck Edwards Charı	table Edn		A Employer identification nu 46-2742629	mber
Number at	nd street (or P O. box numb	per if mail is not delivered to street	address)		B Telephone number (see the	
101 1	Park Avenue	y, and ZIP or foreign postal code		3500	(212) 696-60	00
New :		y, and zir or loreign poster code	NY	10178	C If exemption application is	pending, check here . X
	ock all that apply:	X Initial return	Initial Return of a form	er public chanty	D 1 Foreign organizations, ch	ock hara ► □
		Final return	Amended return	·	5 5	
		Address change	Name change		Foreign organizations me here and attach computat	
4 Ç	heck type of organiz		1(c)(3) exempt private for	t i		L.
I Fa	ir market value of all ass) nonexempt charitable trues at end of year J Acc	counting method. X C		E If private foundation statu under section 507(b)(1)(A), check here •
(fr	om Part II, column (c), lir	ne 16)	Other (specify)		F If the foundation is in a 60	-month termination
► \$			column (d) must be on a	ash basis.)	under section 507(b)(1)(B	
Kau I	Analysis of F	Revenue and le total of amounts in	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	columns (b), (c),	and (d) may not neces-	expenses per books	income	income	for chantable purposes
	sarily equal the a (see instructions)	mounts in column (a) .)				(cash basis only)
	1 Contributions, gifts	, grants, etc, received (att sch)	2,500,000.			.*
		foundn is not req to att Sch B	Market Committee Com			***********
l		vings and temporary ents	0.		1	
İ		terest from secuntles	11,133.	11,133	3.	## 48 × 8 18 18 19
	5 a Gross rents b Net rental income or (loss)	· · · · · · · · · · · · · · · · · · ·	30000 ACON		A STANSON AND STORY CO.	
R		n sale of assets not on line 10_	24,539.	L-6a Stmt		
E	b Gross sales/pnce t	for all [] [64, 357.		u-oa-scate		
E	7 Capital gain-net inc	come (from Part IV, line 2)		24,539		. 3.9 .336
N	8 Net'short-term	capital gain	\$\$ \$\$\tag{\$\}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}			
Ě	9 Income modifi 10 a Gross sales less	ications, 2014.				
	allowarices	· L144.E.				
	goods sold					
) (átt-sch) 1			<u> </u>	
	,, , , , , , , , , , , , , , , , , , , ,	(andon dor oddio)			·	
		s 1 through 11	2,535,672.	35,672	24,539.	
		officers, directors, trustees, etcsalaries and wages				
İ		, employee benefits				
A	•	n schedule)	18,016.	6,009		12,011.
D M	b Accounting fees (
, 🕌		attach sch) IM fees	10,042.	3,347		6,695.
STR	17 Interest					
STR	18 Taxes (attach schedule19 Depreciation (
[[]	sch) and deple	etion				**************************************
N V	20 Occupancy21 Travel, conference	ences, and meetings				ļ
A E		ublications		· · · · · · · · · · · · · · · · · · ·		
) P	·	es (attach schedule)				
E N S		n currency exch	42.	42	•	
E S		d lines 13 through 23 .	28,100.	9,394		18,706.
	25 Contributions, gift	is, grants pald	r	- Color Confession		
1	26 Total expense Add lines 24 a	es and disbursements. nd 25	28,100.	9,394		18,706.
	27 Subtract line 2	6 from line 12:	20,100.	9,394	i alan ana sa	10,700.
	a Excess of rev	enue over expenses	2,507,572.		建筑器 计定义	
			2,001,012.			1 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
	D Net Investment in	come (if negative, enter -0-)	[25277200 A CALL NOV. 10]	26.278	- 1 - 1 1 1 1 1 1 	
	b Net investment inco	os and disbursements. nd 25 6 from line 12: renue over expenses ments come (if negative, enter -0-) ction Act Notice, see ins		26,278		

all a

Form	990-F	PF (2013) Dr. Lee MacCormick Edwards Charit			2742		е 2
Dà	€3023 1 (Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	L	nd of y		
F.a.		(See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Valu	10
	1	Cash — non-interest-bearing					
	2	Savings and temporary cash investments		384,7	49.	384,74	
	3	Accounts receivable		ntelves.		题等统小学庭"	રુ _{કે} 2
		Less allowance for doubtful accounts					
	4	Pledges receivable				经表现是智慧的	3
		Less. allowance for doubtful accounts					_
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach sch)		Contract Contract	5/2 3	# 1	
A		Less allowance for doubtful accounts	Language a double man and and a comment.	THE REAL PROPERTY OF THE PARTY		Character form space	
S	8	Inventories for sale or use					
A S E T	9	Prepaid expenses and deferred charges			\rightarrow		
T S	100	Investments – U.S. and state government				***************************************	—
3		obligations (attach schedule)		0.100.00		0.226.000	
	(Investments — corporate stock (attach schedule)		2,122,83	22.	2,386,80	<u>٥.</u>
	1	: Investments — corporate bonds (attach schedule)	THE SECTION AND THE SECTION	12 1 METERS & 151 X 165 C. P.	を違うで		, 1 .
	11	Investments land, buildings, and equipment basis					
		Less accumulated depreciation (attach schedule)					
	12	Investments - mortgage loans					
	13	Investments - other (attach schedule)					
	14	Land, buildings, and equipment. basis		是不可以		経済の多い	(g.).
		Less. accumulated depreciation (attach schedule)					
	15	Other assets (describe					_
	16						
	<u> </u>	see the instructions Also, see page 1, item I)	0.	2,507,5	71.	2,771,55	<u>7 . </u>
L	17	Accounts payable and accrued expenses	<u></u>				ĝ()
Á	18	Grants payable				新聞的學習的	4
В	19	Deferred revenue					er ^{er} . No.
Ĺ	20	Loans from officers, directors, trustees, & other disqualified persons					1
Ţ	21	Mortgages and other notes payable (attach schedule)		····	\v		
i	22	Other liabilities (describe			¥ 3		``.
E S	23	Total liabilities (add lines 17 through 22)			1.75. 1.05.41		
		Foundations that follow SFAS 117, check here			1		2,73
		and complete lines 24 through 26 and lines 30 and 31.	1		ĝ		
ΝF	24	Unrestricted			T.		٠ <u>٠</u> ٠ د ۲
E U T N	25	Temporarily restricted					ķτ įŠn.
' D	26	Permanently restricted					
A S B	1	Foundations that do not follow SFAS 117, check here					
SA	ŀ	and complete lines 27 through 31.					. 14
A S B S A E L T A	27	Capital stock, trust principal, or current funds	0.	2,507,57	71 - 🗟		£ .
SN	28	Paid-in or capital surplus, or land, building, and equipment fund			13 13		"
С	29	Retained earnings, accumulated income, endowment, or other funds					:] {\}
O E R S	30	Total net assets or fund balances (see instructions)	0.	2,507,57	71		-15.
	31	Total liabilities and net assets/fund balances (see instructions).					- 5
Par	 	Analysis of Changes in Net Assets or Fund Balanc	0.	2,507,57	11. 52		٠.
				————	— т		
1	Total end-o	net assets or fund balances at beginning of year — Part II, column of year figure reported on pnor year's return)	(a), line 30 (must agree w	nth	1).
2	Enter	amount from Part 1, line 27a			2	2,507,572	· ·
3	Other i	ncreases not included in line 2 (Itemize)			3		
4	Add li	nes 1, 2, and 3	· · · .		4	2,507,572	· ·
5	Decrea	ises not included in line 2 (itemize) POUNDING			5		
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - P	art II, column (b), line 30		6	2,507,571	

<u>ra</u>	(a) List and describe	the kind(s) of property sold (e.g., rea , or common stock, 200 shares MLC	l estate,	(b) How acquired P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
	a 1000 shs. Endo Heal	th Solutions Inc.		P	various	11/18/13
	C					
	d					
	8					<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale		(h) Gain or (e) plus (f) mi	
	a 64,357.		3:	9,818.		24,539.
	b					
	C					
	<u>d</u>					
	Complete only for accets showing	g gain in column (h) and owned by th	he foundation on 12/31/69		m Cal-a /Ca	/b)
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if an		(f) Gains (Co gain minus column () han -0-) or Losses (fr), but not less
				0.		24,539.
	a 0.	0.				24,339.
	<u>-</u>					
	d					
	8					
2	Capital gain net income or (net c	apital loss) If gain, also	enter in Part I, line 7 er -0- in Part I, line 7	2		24,539.
3	Net short-term capital gain or (lo	ss) as defined in sections 1222(5) an	nd (6)			
	in Part I, line 8	, column (c) (see instructions) If (los	<u> </u>	3		24,539.
<u> </u>		Section 4940(e) for Reduction 4940(e) Section 4940(e)			e	
Was	es,' the foundation does not qualify	on 4942 tax on the distributable amou or under section 4940(e) Do not comp each column for each year; see the i	olete this part		· · · · Yes	No
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asso	ets (co	(d) Distribution lumn (b) divided b	
	2012					
	2011					
	2010					
	2009					
	2008				· , 	
2	Total of line 1, column (d)			2		
3	Average distribution ratio for the number of years the foundation t	5-year base period — divide the total has been in existence if less than 5 ye	on line 2 by 5, or by the ears			····
4	Enter the net value of nonchanta	ble-use assets for 2013 from Part X,	line 5	. 4		
5	Multiply line 4 by line 3			5		
6	Enter 1% of net investment incor	ne (1% of Part I, line 27b)		6		
7	Add lines 5 and 6			7		<u>.</u>
8	Enter qualifying distributions from	n Part XII, line 4		. 8		
	If line 8 is equal to or greater that Part VI instructions	n line 7, check the box in Part VI, line	1b, and complete that part u	ising a 1% tax	rate See the	

•		
Form 990-PF (2013) Dr. Lee MacCormick Edwards Charitable Fdn	46-2742	
Part VI (S) Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494	8 - see instru	ctions)
1 a Exempt operating foundations described in section 4940(d)(2), check here > and enter 'N/A' on line 1	7	
Date of ruling or determination letter (attach copy of letter if necessary — see instrs)		
b Domestic foundations that meet the section 4940(e) requirements in Part V	1	526.
check here . I and enter 1% of Part I, line 27b		
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)	_	* *************************************
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable		
foundations only. Others enter -0-)		0.
3 Add lines 1 and 2	}	526.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	1 -	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	13	526.
6 Credits/Payments:		
a 2013 estimated tax pmts and 2012 overpayment credited to 2013	 -{_``_`	
b Exempt foreign organizations — tax withheld at source	——(K.))	
c Tax paid with application for extension of time to file (Form 8868) 6 c		
d Backup withholding erroneously withheld		
	→ 9	526.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	· · · . · · · 	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	· · ·	0.
11 Enter the amount of line 10 to be: Credited to 2014 estimated tax		
During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		Yes No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1b X
If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials proof distributed by the foundation in connection with the activities.	ublished	
c Did the foundation file Form 1120-POL for this year?		1c X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		
(1) On the foundation > \$ (2) On foundation managers > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	00	
foundation managers > \$	Oli	
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		2 X
If Yes,' attach a detailed description of the activities		
•		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article of incorporation, or bylaws, or other similar instruments? If Yes, attach a conformed copy of the changes.	3S	3 X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		4b
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5 X
If 'Yes,' attach the statement required by General Instruction T		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		
By language in the governing instrument, or		
	no-floor	
By state legislation that effectively amends the governing instrument so that no mandatory directions that with the state law remain in the governing instrument?		6 X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		L. L
8 a Enter the states to which the foundation reports or with which it is registered (see instructions)		
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		
(or designate) of each state as required by General Instruction G? If 'No,' attach explanation		. 8b X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) o	r 4942(i)(5)	
for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If 'Yes,' complete		9 X

Did any persons become substantial contributors during the tax year? If Yes, attach a schedule listing their names and addresses BAA Form 990-PF (2013)

10

Рa	tt.VII-A Statements Regarding Activities (continued)			,,		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If Yes', attach schedule (see instructions)			11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified pe advisory privileges? If Yes, attach statement (see instructions).	rson had		12		x
13		cation?		13	Х	<u> </u>
	Website address www.guidestar.com					<u></u>
14	The books are in care of Curtis, Mallet-Prevost, et al LLP Telephone	no 🟲	(212)	696	-600	0
	Located at 101 Park Avenue New York NY ZIP+4	101	78-006	1		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here			• • •	>	
	and enter the amount of tax-exempt interest received or accrued during the year	•	15			
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority bank, securities, or other financial account in a foreign country?	over a		16	Yes	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If Yes,' enter the name of foreign country	the		***		Harry Co.
Pa	rt-VII-B Statements Regarding Activities for Which Form 4720 May Be Required					
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			14 14	Yes	No
1:	a During the year did the foundation (either directly or indirectly).			33.2	\$ 1.44°	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No	-3. 35 100 t		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	XNo			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			製作に
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No	100	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Property and
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes	χNο	大変で	10 mm	3.00 P. 1.
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	Yes	XNo		A STATE OF THE STA	1. 强烈人
i	b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?			1 b	(c).	, <u>.</u> ,,,
	Organizations relying on a current notice regarding disaster assistance check here	•		18,74,2	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
(Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2013?			1 c	markete George	致 X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))				San San San San San San San San San San	
	a At the end of tax year 2013, did the foundation have any undistributed ⊧ncome (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013?	Yes	XNo	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ر المساورة الم الما المساورة الم الما المساورة الما الما الما الما الما الما الما الما	1. 1. 2. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
	If Yes,' list the years 20 , 20 , 20 , 20 , 20	LJ		2 1245		, de
ı	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to)			(ME) (ME) (ME)	
	all years listed, answer 'No' and attach statement — see instructions.)		• • •	2 b	- 384	-5 6 .
	the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20, 20, 20				150 - 150 M	
				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		- بر میراد - بر میراد
3 ;	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No			
l	of if 'Yes,' did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2013)			3 b	· · · · · · · · · · · · · · · · · · ·	
4 8	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	_		4 a		
	- The state of the			70		
ı	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of			A.S.	12	ć į
BAA	the tax year beginning in 2013?	•		4 b	DE (X

Form 990-PF (2013) Dr. Lee MacCormick	Edwards Chari	table Fdn	46-27	42629	Page 6					
Part VII-B Statements Regarding Activit		4720 May Be Req	uired (continued)		T-023					
5 a During the year did the foundation pay or incur a			т. п	J., ,,						
(1) Carry on propaganda, or otherwise attempt t			· · Yes X	No No						
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registration	n drive?		Yes X	- 1 1 7						
(3) Provide a grant to an individual for travel, stu			Yes X	No S						
(4) Provide a grant to an organization other than a chantable, etc, organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)										
(5) Provide for any purpose other than religious, educational purposes, or for the prevention of	, charitable, scientific, lite of cruelty to children or ar	rary, or nimals?	Yes	No No						
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in a (see instructions)?	current notice regarding	disaster assistance		5b						
Organizations relying on a current notice regardi	ng disaster assistance ch	eck here	· · · · · · · · · · · •							
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	foundation claim exempt	ion from the	Yes	No *,,,						
If 'Yes,' attach the statement required by Regula	tions section 53.4945-5(d	0								
6 a Did the foundation, during the year, receive any on a personal benefit contract?		<i></i>		(No						
b Did the foundation, during the year, pay premium	ns, directly or indirectly, o	n a personal benefit con	tract?	6b	X					
If 'Yes' to 6b, file Form 8870		tov shaltes transaction?	Yes X	(No 🎎						
7 a At any time during the tax year, was the foundati b If 'Yes,' did the foundation receive any proceeds				7 b	1 1					
Part VIII Information About Officers, D	irectors. Trustees.	Foundation Manag	ers. Highly Paid		L					
and Contractors	,,		, ,		,					
1 List all officers, directors, trustees, foundation	n managers and their c	ompensation (see inst	uctions).							
(a) Name and address	(b) Title, and average hours per week devoted to position	(c)Compensation (if not paid, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation	(e) Expens other a	se account, allowances					
Tina Albright										
101 Park Avenue NY 10178	Secretary 1.00	0.	0.		0.					
Joseph Piropato 40 W. 57th	President									
New York NY 10019	1.00	0.	0.		0.					
2 Compensation of five highest-paid employee	s (other than those inc	uded on line 1 – see ir	structions). If none, e	nter 'NONE.	,					
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation		se account, allowances					
none										
				1						
				 						
				<u> </u>						
Total number of other employees paid over \$50,000 .	L				None					
BAA	TEEA0306 07/			Form 99	0-PF (2013)					

Kai	n·990-PF (2013) Dr. Lee MacCormick Edwards Charitable Fdn 46-2 FM 46-2 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	742629 Page 7 Employees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
nor	ne	
Tota	Il number of others receiving over \$50,000 for professional services	None
	Summary of Direct Charitable Activities	
List th	ne foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of sizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
ULuan	izations and other beneficiaries served, conferences convened, research papers produced, etc	
- 19an		
1		_
1		
1		
1		
2		
1		
2		
2		
2		
3		
3	Summary of Program-Related Investments (see instructions)	
1 2 3 4	Summary of Program-Related Investments (see instructions) cribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 2 3 4		
1 2 3 4 Par		
1 2 3 4 Par		
3 4 Pan Desc		

TEEA0307 07/10/13

Form **990-PF** (2013)

Total. Add lines 1 through 3

BAA

Rart X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes a Average monthly fair market value of securities 1 a 1,388,282. 1 b 1,209,190. 1 c c Fair market value of all other assets (see instructions) 1 d 2,597,472. e Reduction claimed for blockage or other factors reported on lines 1a and 1c 1 e 2 3 2,597,472. Cash deemed held for charitable activities Enter 1-1/2% of line 3 4 38,962. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4... 5 2,558,510. 6 127,926. Part Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations check here <a> and do not complete this part.) 1 Minimum investment return from Part X, line 6 . . 1 127,926. 526. b Income tax for 2013 (This does not include the tax from Part VI)..... 2 b 2 c 526. 3 Distributable amount before adjustments Subtract line 2c from line 1 3 127,400. Recoveries of amounts treated as qualifying distributions 4 5 127,400. 6 7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1. 127,400. Part XIII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26 1 a 18,706. 1 b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. purposes . 2 3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required). 3 a 3 b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 18,706. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income 5 0. 18,706. Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

BAA

Form 990-PF (2013)

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1	Distributable amount for 2013 from Part XI, line 7				127,400.
	Undistributed income, if any, as of the end of 2013.			Complete State Complete	
	Enter amount for 2012 only			**	
	b Total for prior years. 20, 20, 20		-		2 3 Call
	Excess distributions carryover, if any, to 2013-				
	From 2008				
	b From 2009			4.7	
	From 2010			3.44	
	d From 2011		19		
	From 2012			and deline	
1	Total of lines 3a through e				7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7
4	Qualifying distributions for 2013 from Part				
	XII, line 4: \$ 18,706.			Maria Maria Cara Cara Cara Cara Cara Cara Cara	
;	Applied to 2012, but not more than line 2a	•			
ł	Applied to undistributed income of prior years (Election required — see instructions)				
(Treated as distributions out of corpus (Election required — see instructions)	-			
	d Applied to 2013 distributable amount				18,706.
(Remaining amount distributed out of corpus .	· <u>0.</u>			
5	Excess distributions carryover applied to 2013				
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
	(-,,,				
6	Enter the net total of each column as				
	Indicated below:				
•	a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	0.	South the State of the		
i	Prior years' undistributed income Subtract line 4b from line 2b	1077 E	0.		
•	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
(Subtract line 6c from line 6b Taxable amount — see instructions		0.		
•	Undistributed income for 2012 Subtract line 4a from line 2a. Taxable amount — see instructions			0.	
1	Undistributed income for 2013 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2014				108,694.
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions).	0.			
9	Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a	0.			
10	Analysis of line 9		THE RESERVE THE	Merkell Victoria Vic	
a	Excess from 20090 .	in the state of	YA TUUN K	TEST TO THE	
t	Excess from 2010, 0.	FACE STATES			
C	Excess from 2011 . 0.		Balling Company		
C	Excess from 2012 . 0.		N. F. K. B. K. S.		
6	Excess from 2013 . 0.	KANAGA KANAGA	经验验 基础的		
BAA		and the state of t	nagy, anno 1990, at an ing mga mga mga mga mga mga mga mga mga mg	angen and service and an artistic and an artistic and an artistic and an artistic and an artistic and an artistic and an artistic and artistic artistic and artistic and artistic artistic and artistic and artistic and artistic and artistic artistic and artistic and artistic and artistic and artistic artistic and artistic and artistic and artistic artistic and artistic and artistic artistic and artistic artistic artistic and artistic artistic artistic artistic artistic artistic artistic artistic artistic artistic artistic artistic artistic artisti	Form 990-PF (2013)

Form 990-PF (2013) Dr. Lee MacCormic	k Edwards C	haritable Fo	ln	46-274262	9 Page 10
Part XIV Private Operating Foundat					N/A
1 a If the foundation has received a ruling or dete is effective for 2013, enter the date of the rulin	rmination letter thang.	t it is a private opera	iting foundation, and	· · <u>·</u>	,
b Check box to indicate whether the foundation	is a private operati	ng foundation descr	ibed in section	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for each year listed	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets					
section 4942(j)(3)(B)(i) b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X,	· · · · · ·				
line 6 for each year listed			 		
c 'Support' alternative test — enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942()(3)(B)(iii)					
(3) Largest amount of support from an exempt organization	· · · · · · · · · · · · · · · · · · ·				
(4) Gross investment income				<u> </u>	
Supplementary Information assets at any time during the Information Regarding Foundation Managa List any managers of the foundation who have close of any tax year (but only if they have co	e year — see in ers: e contributed more	than 2% of the total	contributions receive		
b List any managers of the foundation who own a partnership or other entity) of which the four	10% or more of the adation has a 10% of	e stock of a corporator greater interest	tion (or an equally lai	ge portion of the own	ership of
2 Information Regarding Contribution, Grant Check here ☐ if the foundation only mal requests for funds. If the foundation makes gr complete items 2a, b, c, and d	kes contributions to fts, grants, etc (see	preselected charita instructions) to indi-	ble organizations and viduals or organization	ons under other condit	olicited ions,
a The name, address, and telephone number of	r e-mail of the perso	on to whom applicati	ions should be addre	ssed	
b The form in which applications should be sub-	mitted and informat	ion and materials the	ey should include		
c Any submission deadlines					
d Any restrictions or limitations on awards, such	as by geographica	l areas, charitable fi	elds, kinds of institut	ions, or other factors	
	TEF	EA0310 07/10/13		F	orm 990-PF (2013)

.

.

3 Grants and Contributions Paid During the Yea	ar or Approved for a di	T		T
Recipient	If reciplent is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
Name and address (home or business) a Paid during the year	substantial contributor	recipient	CONTIDUCION	
Total			3 a	
b Approved for future payment			3 a	

gross amounts unless otherwise indicated	Unrelat	ed business income	Exclude	d by section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exemp function income (See instructions
	ļ		ļ		
11.61				<u> </u>	
Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments			14	0.	
Dividends and interest from securities			14	11,133.	750 2 22 287
Net rental income or (loss) from real estate.	31/4/2			SECTION STATE	THE STATE OF THE S
Debt-financed property			<u> </u>		
Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income			-		24,53
Net income or (loss) from special events			 		24,5
Gross profit or (loss) from sales of inventory					
Other revenue					新記立記。
	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The contra office of the factories	3-44-6-41		
		1			
			_		
	Se Selle and Sellen and		557 NY244	11 122	24 5
Subtotal Add columns (b), (d), and (e)			226		24,5
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)					
Subtotal Add columns (b), (d), and (e)				13	24,5 35,6
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)				13	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation EXVI:B: Relationship of Activities to the storage of th	ns)	olishment of Exempled of Part	pt Purp	ooses	35, 6
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to the state of the state of the substitution	ns)	olishment of Exempled of Part	pt Purp	ooses	35,6
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation EXVI:B: Relationship of Activities to the storage of th	ns)	olishment of Exempled of Part	pt Purp	ooses	35,6
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation EXVI:B: Relationship of Activities to the storage of th	ns)	olishment of Exempled of Part	pt Purp	ooses	35,6
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation EXVI:B: Relationship of Activities to the storage of th	ns)	olishment of Exempled of Part	pt Purp	ooses	35,6
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI:B: Relationship of Activities to the Royal Park of the Royal Pa	ns)	olishment of Exempled of Part	pt Purp	ooses	35,6
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI:B: Relationship of Activities to the Royal Park of the Royal Pa	ns)	olishment of Exempled of Part	pt Purp	ooses	35,6
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI:B: Relationship of Activities to the Royal Park of the Royal Pa	ns)	olishment of Exempled of Part	pt Purp	ooses	35,6
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVIBB Relationship of Activities to the	ns)	olishment of Exempled of Part	pt Purp	ooses	35,6
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation with the second section of the second	ns)	olishment of Exempled of Part	pt Purp	ooses	35,6
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI:B Relationship of Activities to the structure of the structur	ns)	olishment of Exempled of Part	pt Purp	ooses	35,6
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation EXVI:B: Relationship of Activities to the storage of th	ns)	olishment of Exemp	pt Purp	ooses	35,6
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI:B: Relationship of Activities to the Royal Park of the Royal Pa	ns)	olishment of Exemp	pt Purp	ooses	35,6
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI:B: Relationship of Activities to the Royal Park of the Royal Pa	ns)	olishment of Exemp	pt Purp	ooses	35,6
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI:B: Relationship of Activities to the Royal Park of the Royal Pa	ns)	olishment of Exemp	pt Purp	ooses	35,6
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI:B Relationship of Activities to the structure of the structur	ns)	olishment of Exemp	pt Purp	ooses	35,6
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI:B: Relationship of Activities to the Royal Park of the Royal Pa	ns)	olishment of Exemp	pt Purp	ooses	35,6
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI:B: Relationship of Activities to the Royal Park of the Royal Pa	ns)	olishment of Exemp	pt Purp	ooses	35,6

	· . <u> ·</u>						
Dart YVIII数	Information	Regarding	Transfers To ai	d Transactions	and Relatio	nships With	Noncharitable
L'OILVAUS			manarcia roui	ia iranoaonom	and notatio	nompo m.	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Exempt Or	ganizations					

describe relating to a Transfer (1) Cas (2) Other tra (1) Sale (2) Purc (3) Ren (4) Reir (5) Load (6) Perf c Sharing d If the another good	in section 501(co political organization of the reporting of the control of the c	c) of the Code (otherations? Ing foundation to a pt organization le exempt organization . assets	organizations) organizations) organization of	b) should always son received less the	nan fair market valu	1 a (1) 1 a (2) 1 b (1) 1 b (2) 1 b (3) 1 b (4) 1 b (5) 1 c	X X X X X X X X X X X X X X X X X X X	
(a) Line no	(b) Amount involve	d (c) Name	of noncharitable exempt orga	nization	(d) Description of trai	nsfers, transactions, and	sharing arranger	nents
• • • • • • • • • • • • • • • • • • • •	····				<u>`' </u>		· · · · · · · · · · · · · · · · ·	
	•							
			·					
		~			··	- -		
			.			 		
			· · · · · · · · · · · · · · · · · · ·					
-					· · ·	,	 	
					·			
-							·	
								
					•			
describe	undation directly o d in section 501(c complete the follow) of the Code (other	d with, or related to, one er than section 501(c)(3)	or more tax-exe) or in section 52	empt organizations 27?		Yes	χNο
(a)	Name of organiz	ation	(b) Type of org	anızatıon	(0	c) Description of rela	itionship	
								
								
			18 - 1					
Sign	and complete Declarati	ion of preparer (other that	d this return, including accompa an taxpayer) is based on all infor	matton of which prepa	rer has any knowledge		May the IRS	th the
Here	H hI'	-ell	14/	17/14	Preside	nt_	preparer sho (see instruction	wn below ons)?
Signa	\/ 		Date	-A	Title		Ye	
	Print/Type preparer's	name	Preparer's signalare	V .	Date	Check	PTIN	
Paid	Vivian F.		1 Kinn T	M'	$\langle \perp Y/2JJY \rangle$	self-employed	P012079.	35
Preparer	Firm's name		llet-Prevost,	dolt & Mos	sle LLP	Firm's EIN ► 13-5	018900	
Jse Only	Firm's address	101 PARK A	VE 35TH FL			1		
<u> </u>		NEW YORK		NY 1	0178-0061	Phone no (212	?) 696-60	00
BAA							Form 990-P	F (2013)

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, 990-PF) and its instructions is at www.irs.gov/form990.

2013

OMB No 1545-0047

Name of the organization		Employer Identification number
Dr. Lee MacCormick Edwards Ch	naritable Fdn	46-2742629
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt chantable trust not treated as a private	vate foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private	foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Gen	eral Rule or a Special Rule	
Note. Only a section 501(c)(7), (8), or (10) organ	ization can check boxes for both the General Rule and a Special	Rule See instructions
General Rule X For an organization filing Form 990, 990-EZ, contributor (Complete Parts I and II)	or 990-PF that received, during the year, \$5,000 or more (in mor	ney or property) from any one
Special Rules		
509(a)(1) and 170(b)(1)(A)(vi) and received f	m 990 or 990-EZ that met the 33-1/3% support test of the regulation any one contributor, during the year, a contribution of the grill, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II	itions under sections eater of (1) \$5,000 or
For a section 501(c)(7), (8), or (10) organizat total contributions of more than \$1,000 for us the prevention of cruelty to children or anima	ion filing Form 990 or 990-EZ that received from any one contrib e exclusively for religious, charitable, scientific, literary, or educa is Complete Parts I, II, and III	utor, during the year, itional purposes, or
Contributions for use exclusively for religious, if this box is checked, enter here the total corpurpose. Do not complete any of the parts ur	ion filing Form 990 or 990-EZ that received from any one contrib chantable, etc, purposes, but these contributions did not total to atributions that were received during the year for an exclusively re- aless the General Rule applies to this organization because it re-	o more than \$1,000 religious, charitable, etc,
990-PF) but it must answer 'No' on Part IV. line 2	he General Rule and/or the Special Rules does not file Schedule 2, of its Form 990, or check the box on line H of its Form 990-EZ ling requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	or on its Form 990-PF.
BAA For Paperwork Reduction Act Notice, se or 990-PF.	e the Instructions for Form 990, 990EZ, Schedule B	(Form 990, 990-EZ, or 990-PF) (2013)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2013)	Page	1 of 1 of Part 1
Name of org		' '	r identification number 7 4 2 6 2 9
	ee MacCormick Edwards Charitable Fdn		142023
Part IS	Contributors (see instructions) Use duplicate copies of Part I if additional space		1
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Lee M. Edwards 158 Feeks Lane	\$2 <u>_500</u> _000.	Person X Payroll Noncash (Complete Part II for
	Locust Valley NY 11560	_	noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Noncash Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> </u>		\$	Person Payroil Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
BAA	TEEA0702 12/27/13	Schedule B (Form 990	, 990-EZ, or 990-PF) (2013)

1 of Part 1

Form 990-PF Part I, Line 6a

Net Gain or Loss From Sale of Assets

2013

Name		Employer Identification Number
Dr. Lee MacCormick Edwards	Charitable Fdn	46-2742629
Asset Information:		
Description of Property En	do Health Solutions Inc.	
Date Acquired. 07/29/13		
Date Sold 11/18/13		
Sales Price		39,818.
Sales Expense:	Valuation Method	
Total Gain (Loss) 24,	539. Accumulation Depreciation	
Description of Property		
Date Acquired .	How Acquired	
Date Sold	Name of Buyer	
Sales Price:	Cost or other basis (do not reduce by depreciation)	
	Valuation Method	
Total Gain (Loss)		
Description of Property		
Date Acquired:	How Acquired	
Date Sold	Name of Buyer	
Sales Price	Cost or other basis (do not reduce by depreciation) .	
Sales Expense	Valuation Method	
Total Gain (Loss)	Accumulation Depreciation	
Description of Property		
Date Acquired -	How Acquired	
Date Sold	Name of Huver	
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense	- Valuation Method	, <u>, , , , , , , , , , , , , , , , , , </u>
Total Gain (Loss)	Accumulation Depreciation	
Description of Property		
Date Acquired .	How Acquired .	
Date Sold	Name of Buyer	
Sales Price .	Cost or other basis (do not reduce by depreciation)	
Sales Expense .	Valuation Method	
Total Gain (Loss)	Accumulation Depreciation	
Description of Property	· · · · · · · · · · · · · · · · · · ·	
Date Acquired	How Acquired .	
Date Sold	Name of Buyer	
Sales Price .	Cost or other basis (do not reduce by depreciation)	
Sales Expense.	Valuation Method .	
Total Gain (Loss).	Accumulation Depreciation	
Description of Property.		
Date Acquired	How Acquired	
Date Sold	Name of Buyer	
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method	
Total Gain (Loss)	Accumulation Depreciation	
Description of Property		
Date Acquired	How Acquired .	
Date Sold	Name of Buyer	
Sales Price .	Cost or other basis (do not reduce by depreciation)	
Sales Expense .	Valuation Method .	
Total Gain (Loss).	Accumulation Depreciation	