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

OMB No 1545-0052

▶ Do not enter social security numbers on this form as it may be made public.
rmation about Form 990-PF and its separate instructions is at www.irs.gov/form Department of the Treasury

| 111101111 | 21 110 101 | de derried P information about 1 offin 530-1 1 | and its separate ins | ti uctions is | at ******* | s.gov/formssopr. | open to I abite mapection |
|--------------------------------|---------------|---|------------------------------|---------------|--------------|--------------------------------|-------------------------------------|
| | | | and ending | | , | | |
| Nar | ne of fol | undation | | | A Emplo | oyer identification number | |
| B | owk. | es Family Foundation | | | 51. | -0390209 | |
| | | d street (or P O box number if mail is not delivered to street address) | R | oom/suite | | hone number (see instructions | |
| 6 | 001 | Highway A1A, PMB 8307 | | | | 2-234-1596 | • |
| | | s, state or province, country, and ZIP or foreign postal code | | | C ((a)) | | abasis base |
| | ero | Beach FL 32963-1 | 014 | | C If exer | mption application is pending, | check nere |
| G C | heck a | all that apply Initial return Initial retu | rn of a former public cl | narity | D 1 Fo | oreign organizations check he | re • |
| | | Final return Amended | | | 2 Fo | oreign organizations meeting t | ne |
| | | X Address change Name cha | inge | | 85 | % test, check here and attach | computation |
| | | type of organization $\overline{\mathbf{X}}$ Section 501(c)(3) exempt private | foundation | | E If priva | ate foundation status was term | ninated under |
| | Section | n 4947(a)(1) nonexempt charitable trust Other taxab | le private foundation | | sectio | n 507(b)(1)(A), check here | - |
| I Fa | ır mar | ket value of all assets at J Accounting method | X Cash Acc | rual | F If the f | foundation is in a 60-month te | mination |
| | | ear (from Part II, col (c), Other (specify) | | | under | section 507(b)(1)(B), check h | ere |
| | e 16) | ▶ \$ 31,796 (Part !, column (d) must | be on cash basis) | , | <u></u> | | |
| Pa | i <u>rt</u> l | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal | (a) Revenue and expenses per | (b) Net inv | restment | (c) Adjusted net | (d) Disbursements for charitable |
| | | the amounts in column (a) (see instructions)) | books | inco | me | ıncome | purposes (cash basis only) |
| | 1 | Contributions, gifts, grants, etc., received (attach schedule) | 75,000 | . 1 | " | | (coor, basis oring) |
| | 2 | Check ▶ if the foundation is not required to attach Sch B | | | | | |
| | 3 | Interest on savings and temporary cash investments | | | | | |
| | 4 | Dividends and interest from securities | 5 | | 5 | 5 | |
| | 5a | Gross rents | | | | | |
| ō | ь | Net rental income or (loss) | Σ | 3 ¥ 4 | * | 5 | |
| Revenue | 6a | Net gain or (loss) from sale of assets not on line 10 | | , | | | |
| Š | b | Gross sales price for all assets on line 6a | 13. ,); | wit | | | |
| ď | 7 | Capital gain net income (from Part IX) line 2) | | | 0 | | · |
| | 8 | Net short-term capital gain | | , | | 0 | |
| | 9 | Income modifications | | | | | |
| | 10a | Gross sales less returns and allowances MAY 1 8 2015 | | | | · · | |
| | þ | Less Cost of goods sold | | | | | |
| | C | Gross profit or (loss) (attach schedule) DEN. UT | IK | | | | |
| | 11 12 | Other income (attach schedule) | 75 005 | | 5 | | - |
| | 13 | Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc | 75,005 | | | 5 | |
| enses | 14 | Other employee salaries and wages | <u>_</u> | † - | | | |
| Su e | 15 | Pension plans, employee benefits | | | | | |
| ο. | 16a | Legal fees (attach schedule) | | | | | |
| Ë | b | Accounting fees (attach schedule) Stmt 1 | 2,920 | | 2,920 | 2,920 | |
| <u>×</u> | c | Other professional fees (attach schedule) | | | | | |
| rat | 17 | Interest | | | | | |
| ist | 18 | Taxes (attach schedule) (see instructions) | | | | | |
| 2 1 2015 and Administrative | 19 | Depreciation (attach schedule) and depletion | | | | | |
| 55 | 20 | Occupancy | | | | | |
| 7 P | 21 | Travel, conferences, and meetings | | <u> </u> | | | |
| an ' | 22 | Printing and publications | | | | | |
| <u>_</u> , | 23 | Other expenses (att sch) Stmt 2 | 505 | | 505 | 505 | |
| Operating | 24 | Total operating and administrative expenses. | | | | | |
| er i | | Add lines 13 through 23 | 3,425 | | 3,425 | 3,425 | 0 |
| 급음 | 25 | Contributions, gifts grants paid | 79,150 | | | | 79,150 |
| <u> </u> | 26 | Total expenses and disbursements. Add lines 24 and 25 | 82,575 | | 3,425 | 3,425 | 79,150 |
| | 27 | Subtract line 26 from line 12 | | | | | |
| 5 | a | Excess of revenue over expenses and disbursements | -7,570 | | | | |
|) | b | Net investment income (if negative, enter -0-) | | | 0 | | |
| | l C | Adjusted net income (if negative, enter -0-) | i . | 1 | | l al | |

| - 1 | Part I | Balance Sheets Attached schedules and amounts in the description column | | Beginning of year | End o | f year |
|-------------------------|--------|--|--------|-------------------|----------------|---|
| _ | | should be for end-or-year amounts only (See instructions) | | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| ı | 1 | Cash – non-interest-bearing | | | | |
| | 2 | Savings and temporary cash investments | | 39,366 | 31,796 | 31,796 |
| | 3 | Accounts receivable ▶ | | | | |
| | | Less allowance for doubtful accounts ▶ | | | | |
| | 4 | Pledges receivable ▶ | | | | |
| | | Less allowance for doubtful accounts ▶ | | | <u> </u> | |
| | 5 | Grants receivable | | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | | |
| | | disqualified persons (attach schedule) (see | | | | |
| - | | instructions) | | | | |
| | 7 | Other notes and loans receivable (att. schedule) | | | | * * |
| | | Less allowance for doubtful accounts ▶ | 0 | | | |
| \$ | 8 | Inventories for sale or use | | | | |
| Assets | 9 | Prepaid expenses and deferred charges | | | | |
| ۲ | 10a | Investments – U S and state government obligations (attach schedule) | | | | |
| | b | Investments – corporate stock (attach schedule) | | | | |
| | C | Investments – corporate bonds (attach schedule) | | | | |
| | 11 | Investments – land, buildings, and equipment basis | | | | * |
| | | Less accumulated depreciation (attach sch) ▶ | | | | |
| | 12 | Investments – mortgage loans | | | | |
| | 13 | Investments – other (attach schedule) | | | | |
| | 14 | Land, buildings, and equipment basis ▶ | | _ | | y i |
| | | Less accumulated depreciation (attach sch) ▶ | | | * ** | We did we will be a series of the series of |
| į | 15 | Other assets (describe ▶ |) | | | |
| | 16 | Total assets (to be completed by all filers – see the | | ,- | | |
| \rfloor | | instructions Also, see page 1, item I) | | 39,366 | 31,796 | 31,796 |
| | 17 | Accounts payable and accrued expenses | | | | * |
| | 18 | Grants payable | | | | * * * |
| ies | 19 | Deferred revenue | | | | * |
| Liabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | | * : |
| iab | 21 | Mortgages and other notes payable (attach schedule) | | | | |
| - | 22 | Other liabilities (describe ▶ |) | | | > |
| | 23 | Total liabilities (add lines 17 through 22) | | 0 | 0 | |
| | | Foundations that follow SFAS 117, check here | X | - | <u></u> | |
| S | | and complete lines 24 through 26 and lines 30 and 31. | | | | |
| nces | 24 | Unrestricted | | 39,366 | 31,796 | |
| ala | 25 | Temporarily restricted | | | | |
| 8 | 26 | Permanently restricted | | | | |
| Net Assets or Fund Bala | | Foundations that do not follow SFAS 117, check here | | | | |
| 띤 | | and complete lines 27 through 31. | | | | |
| 0 | 27 | Capital stock, trust principal, or current funds | | | | |
| ets | 28 | Paid-in or capital surplus, or land, bldg, and equipment fund | | | | |
| ASS | 29 | Retained earnings, accumulated income, endowment, or other funds | | | | |
| et/ | 30 | Total net assets or fund balances (see instructions) | | 39,366 | 31,796 | |
| Ž | 31 | Total liabilities and net assets/fund balances (see | | | | |
| ╛ | | instructions) | | 39,366 | 31,796 | |
| | Part I | I Analysis of Changes in Net Assets or Fund Balance | s | <u> </u> | | - |
| | | net assets or fund balances at beginning of year – Part II, column (a), line 30 | | t agree with | | - |
| | | of-year figure reported on prior year's return) | • | 3 | 1 | 39,366 |
| 2 | | amount from Part I, line 27a | | | 2 | -7,570 |
| | | r increases not included in line 2 (itemize) | | | 3 | .,370 |
| | | ines 1, 2, and 3 | | | 4 | 31,796 |
| 5 | | eases not included in line 2 (itemize) | | | 5 | 32,,30 |
| 6 | | net assets or fund balances at end of year (line 4 minus line 5) – Part II, colu | mn (b) |), line 30 | 6 | 31,796 |
| _ | | 7 (o) | \2 | <u>,,,</u> | | 000 DE |

| Part IV Capital Gains a | nd Losses for Tax on Investme | ent Income | | | | |
|---|--|----------------------|--|----------------------------|--------------------------------|--|
| | ribe the kind(s) of property sold (e.g., real estate, arehouse, or common stock, 200 shs. MLC Co.) | | (b) How acquired P - Purchase D - Donation | (c) Date acc (mo , day, | | (d) Date sold (mo , day, yr) |
| 1a N/A | | | | | | |
| _b | | | | | | |
| c | | | | | | |
| d | | | | | | |
| е | | | | | | ··-·· |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | | or other basis ense of sale | | (h) Gain c (e) plus (f) | |
| a | | | | | | |
| b | | | | | | |
| С | | | _ | | | <u>,</u> |
| d | | | | | | |
| <u>e</u> | | | | | | |
| Complete only for assets showin | g gain in column (h) and owned by the for | undation on 12/31/6 | 9 | (I) G | Gains (Col. (| h) gain minus |
| (i) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | , , | ss of col (i) | | k), but not le Losses (fror | ess than -0-) or n col (h)) |
| a | | | | | | |
| <u>b</u> | · · · · · · · · · · · · · · · · · · · | | | | | |
| С | | | | | | |
| d | | | | | | |
| <u>e</u> | <u> </u> | | | | | - |
| 2 Capital gain net income or (net c | apital loss) If gain, also enter in If (loss), enter -0- in | | | 2 | | |
| 3 Net short-term capital gain or (lo | ss) as defined in sections 1222(5) and (6) |) | | | | |
| If gain, also enter in Part I, line 8 | , column (c) (see instructions) If (loss), ei | nter -0- ın | | | | |
| Part I, line 8 | | | | 3 | | |
| Part V Qualification U | nder Section 4940(e) for Reduc | ed Tax on Net | Investment Inco | me | | |
| (For optional use by domestic private | foundations subject to the section 4940(| a) tax on net invest | ment income) | | | |
| If section 4940(d)(2) applies, leave the | ns part blank | | | | | |
| NAIss Also formulation habits for the same | tion 4042 to continue distantinue de la constitut | af a | | | | Yes X No |
| | tion 4942 tax on the distributable amount lify under section 4940(e) Do not comple | | base period / | | | Yes A No |
| | <u></u> | . | | | | |
| | each column for each year, see the instru | ictions before makii | ng any entries | | _ | (d) |
| (a) Base period years | (b) Adjusted qualifying distributions | Net val | (c) ue of noncharitable-use asset | | | (d) bution ratio |
| Calendar year (or tax year beginning ii | 7 | | | | (col (b) dı | vided by col (c)) |
| 2013 | | , 355 | 38,0 74,3 | | | 3.601463 |
| 2012 | | ,690 | 74, | 720 | | 1.612247 |
| 2011 | | ,394 | | | - | 0.821555 |
| 2010 | | ,400 | 102,3 57,3 | 223 | | 0.434345 0.700295 |
| 2009 | 40 | ,150 | Σ/, . | | | |
| | | | • | 333 | | 0.700293 |
| 2 Total of loss 4 solvers (d) | | | • | | | |
| 2 Total of line 1, column (d) | 5 | 01.5.1.11 | | 2 | | 7.169905 |
| 3 Average distribution ratio for the | 5-year base period – divide the total on li | | | 2 | | 7.169905 |
| 3 Average distribution ratio for the | 5-year base period – divide the total on linas been in existence if less than 5 years | | | | | |
| Average distribution ratio for the number of years the foundation in | nas been in existence if less than 5 years | | | 3 | | 7.169905 1.433981 |
| Average distribution ratio for the number of years the foundation in | | | | 2 | | 7.169905 |
| 3 Average distribution ratio for the number of years the foundation l4 Enter the net value of noncharita | nas been in existence if less than 5 years | | | 3 | | 7.169905 1.433981 51,038 |
| Average distribution ratio for the number of years the foundation in | nas been in existence if less than 5 years | | | 3 | | 7.169905 1.433981 |
| 3 Average distribution ratio for the number of years the foundation I 4 Enter the net value of noncharita 5 Multiply line 4 by line 3 | nas been in existence if less than 5 years lible-use assets for 2014 from Part X, line | | | 3 4 5 | | 7.169905 1.433981 51,038 |
| 3 Average distribution ratio for the number of years the foundation l4 Enter the net value of noncharita | nas been in existence if less than 5 years lible-use assets for 2014 from Part X, line | | | 3 | | 7.169905 1.433981 51,038 |
| 3 Average distribution ratio for the number of years the foundation I 4 Enter the net value of noncharita 5 Multiply line 4 by line 3 6 Enter 1% of net investment income | nas been in existence if less than 5 years lible-use assets for 2014 from Part X, line | | | 2 3 4 5 | | 7.169905 1.433981 51,038 73,188 |
| 3 Average distribution ratio for the number of years the foundation I 4 Enter the net value of noncharita 5 Multiply line 4 by line 3 | nas been in existence if less than 5 years lible-use assets for 2014 from Part X, line | | | 3 4 5 | | 7.169905 1.433981 51,038 |
| 3 Average distribution ratio for the number of years the foundation I 4 Enter the net value of noncharita 5 Multiply line 4 by line 3 6 Enter 1% of net investment incom 7 Add lines 5 and 6 | nas been in existence if less than 5 years lible-use assets for 2014 from Part X, line me (1% of Part I, line 27b) | | | 2 3 4 5 6 | | 7.169905 1.433981 51,038 73,188 |
| 3 Average distribution ratio for the number of years the foundation I 4 Enter the net value of noncharita 5 Multiply line 4 by line 3 6 Enter 1% of net investment incom 7 Add lines 5 and 6 8 Enter qualifying distributions from | nas been in existence if less than 5 years lible-use assets for 2014 from Part X, line me (1% of Part I, line 27b) | 5 | | 2 3 4 5 6 7 | | 7.169905 1.433981 51,038 73,188 |

| orm | 990-PF (2014) Bewkes Family Foundation 51-0390209 | | | | P | age 4 |
|-----|---|----|-----|---|------|-------|
| Pa | rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions | | | | | |
| 1a | Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1 | | | | | |
| | Date of ruling or determination letter (attach copy of letter if necessary—see instructions) | | | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check | 1 | | | | |
| | here ▶ $\overline{\mathbf{X}}$ and enter 1% of Part I, line 27b | | | | | |
| С | All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of | | | | | |
| | Part I, line 12, col (b) | | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 2 | | | | 0 |
| 3 | Add lines 1 and 2 | 3 | | | | |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 4 | | | | 0 |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- | 5 | | | | 0 |
| 6 | Credits/Payments | | | | | |
| а | 2014 estimated tax payments and 2013 overpayment credited to 2014 6a 790 | ļ | | | | |
| b | Exempt foreign organizations – tax withheld at source 6b | | | | | |
| С | Tax paid with application for extension of time to file (Form 8868) | | | | | |
| d | Backup withholding erroneously withheld 6d 6d | | } | | | |
| 7 | Total credits and payments Add lines 6a through 6d | 7 | | | | 790 |
| 8 | Enter any penalty for underpayment of estimated tax. Check here. If Form 2220 is attached | 8 | | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | | | | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | | | | 790 |
| 11 | Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ 790 Refunded ▶ | 11 | | | | |
| Pa | rt VII-A Statements Regarding Activities | | _ | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | | | | Yes | No |
| | participate or intervene in any political campaign? | | | 1a | | X |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see | | | | | |
| | Instructions for the definition)? | | | 1b | | X |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | | | | |
| | published or distributed by the foundation in connection with the activities | | | | ś | |
| С | Did the foundation file Form 1120-POL for this year? | | | 1c | | X |
| d | | | | | | |
| | (1) On the foundation > \$ (2) On foundation managers > \$ | | | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | | | | | |
| | on foundation managers > \$ | | | | | |
| 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, articles of | | | | | |
| | incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | | 3 | | X |
| 4a | 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? | | N/A | 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 | | | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that | | | | | |
| | conflict with the state law remain in the governing instrument? | | | 6 | X | ļ |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part | ΧV | | 7 | Х | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ DE | | | | | |
| 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 | х | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or | | | <u> </u> | | 1 |
| J | 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," | | | | | |
| | complete Part XIV | | | 9 | | x |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | | | Ť | | T |
| • | names and addresses | | | 10 | | X |
| | | | | | n Di | |

| | 1990-FF (2014) Dewres Family Foundation 31 0390209 | | _ | <u> </u> | age : |
|-----------|--|------|--------|----------|----------|
| <u>Pa</u> | art 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 | | | | |
| | person had advisory privileges? If "Yes," attach statement (see instructions) | | 12 | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A | | 13 | _X | |
| 14 | The books are in care of ▶ %Curtis Ward & Assoc, PA 3055 Cardinal Dr., #202 Telephone no ▶ 77 | 2-2 | 34- | 840 | 0 |
| | Located at ▶ Vero Beach FL ZIP+4 ▶ 32 | 2963 | } | | |
| 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 | | | | _ |
| 16 | At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority | | | Yes | No |
| | over a bank, securities, or other financial account in a foreign country? | | 16 | | X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If | | | | |
| | "Yes," enter the name of the foreign country ▶ | | | | |
| Pa | art 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. | | _ | Yes | No |
| 1a | During the year did the foundation (either directly or indirectly) | | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | No | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a | | , | , | |
| | disqualified person? | No | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | No | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | No | ٠, | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for | | 3 % | | |
| | the benefit or use of a disqualified person)? | No | , | | |
| | (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) | No | × . | * * | |
| b | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | | 2 . | | . & |
| | section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | I/A | 1b | | |
| | Organizations relying on a current notice regarding disaster assistance check here | | | * | |
| С | 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 2014? | I/A | 1c | | |
| 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)) | | | | |
| а | At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and | | | | |
| | 6e, Part XIII) for tax year(s) beginning before 2014? | No | | | |
| | If "Yes," list the years ▶ 20 , 20 , 20 , 20 | | | | |
| þ | 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 | | | | |
| | | I/A | 2b | | |
| С | If 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 , 20 | | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise | | | | |
| | at any time during the year? | No | | | |
| þ | If "Yes," did it have excess business holdings in 2014 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 | - /- | | | |
| | | I/A | 3b | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | | 4a | | <u>X</u> |
| b | 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 the tax year beginning in 2014? | | 4b | | X |
| | | F | orm 95 | 0-PF | (2014 |

| | 1990-PF (2014) Bewkes Family | | | 1390209 | | | Pa | ige t |
|----------|--|--|--|-----------------------------|---|--|-----------|----------|
| | | Activities for Which Form | 4720 May Be F | Required (con | tinued) | | | |
| 5a | During the year did the foundation pay or inc | | | | | | | |
| | (1) Carry on propaganda, or otherwise atter | | | _ ` | Yes X No | Ì | | |
| | (2) Influence the outcome of any specific pu | | to carry on, | | ₩. | | ł | |
| | directly or indirectly, any voter registration | | | | Yes X No | | ļ | |
| | (3) Provide a grant to an individual for trave | | | ` | Yes $\overline{\overline{\mathbf{X}}}$ No | İ | | |
| | (4) Provide a grant to an organization other | - | described in | | | Ì | | |
| | section 4945(d)(4)(A)? (see instructions | | | · | Yes X No | | | |
| | (5) Provide for any purpose other than relig | • | r educational | _ | | | | |
| | purposes, or for the prevention of cruelty | | | | Yes X No | . | | |
| b | If any answer is "Yes" to 5a(1)–(5), did any o | | · · · | escribed in | /- | | | |
| | Regulations section 53 4945 or in a current | · | | | N/A | 5b | | |
| | Organizations relying on a current notice reg | • | | | > | | | |
| С | If the answer is "Yes" to question 5a(4), does | | om the tax | · · · · · | | | | |
| | because it maintained expenditure responsi | · - | | N/A 🗌 | Yes No | | | |
| _ | If "Yes," attach the statement required by Re | | | | | | | |
| 6a | Did the foundation, during the year, receive | any funds, directly or indirectly, to pa | ay premiums | | (==) | | | |
| | on a personal benefit contract? | | | | Yes X No | | | |
| b | Did the foundation, during the year, pay prer | miums, directly or indirectly, on a per | rsonal benefit contra | ict? | | 6b | | <u> </u> |
| | If "Yes" to 6b, file Form 8870 | | | | (==) | | | ſ |
| 7a | At any time during the tax year, was the four | | | | Yes X No | | - | |
| <u> </u> | If "Yes," did the foundation receive any proce | | | | N/A | 7b | | |
| _Pi | | ers, Directors, Trustees, Fo | oundation ivian | agers, Higniy | Paid Employ | ees, | | |
| 4 | and Contractors | tion managed and their common | antina (non implanta | | | - | - | |
| | _ist all officers, directors, trustees, founda | tuon managers and their compen | sation (see instruc | tions). | 1 2 | | | |
| | 63 November of add | | (b) Title, and average | (c) Compensation | (d) Contributions to employee benefit | (e) Ex | oense ac | count. |
| | (a) Name and addre | ess | hours per week devoted to position | (If not paid, enter -0-) | plans and deferred | | r allowan | |
| | Council Desire To | Wassa Basak | - | | compensation | | | |
| | Garrett Bewkes, Jr. | Vero Beach | Pres. Treas. | | | | | _ |
| | . Marker Way, | FL 32963 | 0.00 | c |) | | | 0 |
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| | | | | | | | | |
| | Companyation of five highest paid ampl | avec /ather than there included | | <u> </u> | | <u> </u> | | |
| 2 | Compensation of five highest-paid emple "NONE." | oyees (other than those included | on line 1 - See ins | structions). If nor | ie, enter | | | |
| | | | | | (d) Contributions to | | | |
| | (a) Name and address of each employee paid | more than \$50 000 | (b) Title, and average hours per week | (c) Compensation | employee benefit | | oense aco | |
| | (-, | | devoted to position | (e) componedation | plans and deferred compensation | othe | r allowan | ces |
| - NO | ONE | - | | | - Componedation | | | |
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| | | | • | | | | | |
| Tota | Il number of other employees paid over \$50,0 | 00 | , <u>, , , , , , , , , , , , , , , , , , ,</u> | <u> </u> | 1 | | Т | 0 |
| | The state of the s | | | | · · · · · · · · · · · · · · · · · · · | orm 99 | 0-PF | _ |
| | | | | | F | UIII J J | J-1 1 | (∠∪14 |

| Form 990-PF (20 | 14) Bewkes Family Foundation | 51-0390209 | Page 7 |
|----------------------|---|--------------------------------------|------------------|
| Part VIII | Information About Officers, Directors, Trustees, Found Contractors (continued) | oundation Managers, Highly Paid E | mployees, |
| 3 Five highe | est-paid independent contractors for professional services (see i | nstructions). If none, enter "NONE." | |
| | (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | | |
| | - | | |
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| | | | |
| Total number of | others receiving over \$50,000 for professional services | | > |
| Part IX-A | Summary of Direct Charitable Activities | | |
| | s four largest direct charitable activities during the tax year. Include relevant statistical information of their beneficiaries served, conferences convened, research papers produced, etc. | nation such as the number of | Expenses |
| 1 N/A | | | |
| | | | |
| 2 | | | |
| - | | | |
| | | | |
| 3 | | | |
| | | | |
| 4 | | | |
| | | | |
| Part IX-B | Summary of Program-Related Investments (see in | petructions) | |
| | rgest program-related investments made by the foundation during the tax year on lines 1 and | | Amount |
| 1 N/A | | | |
| | | | |
| 2 | | | |
| - | | | |
| | | - · | |
| All other program-re | elated investments. See instructions | | |
| J | | | |
| | | | |
| Total. Add lines | 1 through 3 | • | |

Form **990-PF** (2014)

| Form | 990-PF (2014) Bewkes Family Foundation 51-0390209 | | Page 8 |
|------|---|------|---------------|
| Pa | Irt X Minimum Investment Return (All domestic foundations must complete this part. Foreign | four | |
| | see instructions) | | |
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. | | |
| | purposes | | |
| а | Average monthly fair market value of securities | 1a | 0 |
| b | Average of monthly cash balances | 1b | 51,815 |
| С | Fair market value of all other assets (see instructions) | 1c | 0 |
| d | Total (add lines 1a, b, and c) | 1d | 51,815 |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) 1e 0 | - 1 | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0 |
| 3 | Subtract line 2 from line 1d | 3 | 51,815 |
| 4 | Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see | l | |
| | instructions) | 4 | 777 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 | 5 | 51,038 |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 2,552 |
| Pa | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for | ound | ations |
| | and certain foreign organizations check here ▶ and do not complete this part) | | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 2,552 |
| 2a | Tax on investment income for 2014 from Part VI, line 5 | | |
| b | Income tax for 2014 (This does not include the tax from Part VI) | | |
| С | Add lines 2a and 2b | 2c | |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 2,552 |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | Add lines 3 and 4 | 5 | 2,552 |
| 6 | Deduction from distributable amount (see instructions) | 6 | |
| 7 | Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, | | |
| | line 1 | 7 | 2,552 |
| P: | art-XII Qualifying Distributions (see instructions) | | |
| | are An equality ing Distributions (666 motivations) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | - | |
| а | Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26 | 1a | 79,150 |
| b | Program-related investments – total from Part IX-B | 1b | |
| 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 | | |
| а | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 79,150 |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income | | _ |
| | Enter 1% of Part I, line 27b (see instructions) | 5 | 0 |
| 6 | Adjusted qualifying distributions Subtract line 5 from line 4 | 6 | 79,150 |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundatio | n | |

qualifies for the section 4940(e) reduction of tax in those years

| <u>Pa</u> | <u>irt XIII - * Undistributed Income</u> | (see instructions) | | | · · · · · · · · · · · · · · · · · · · | |
|-----------|--|--------------------|---------------|--|---------------------------------------|-------------|
| 1 | . Distributable amount for 2014 from Part X | 1 | (a) Corpus | (b) Years prior to 2013 | (c) 2013 | (d) 2014 |
| | line 7 | \', | 55,755 | | | 2,552 |
| 2 | Undistributed income, if any, as of the end | d of 2014 | | | | 2,052 |
| | Enter amount for 2013 only | | | | | |
| | Total for prior years 20 , 20 | . 20 | | | | |
| 3 | Excess distributions carryover, if any, to 2 | | | | | |
| а | From 2009 | 37,283 | | | | |
| b | From 2010 | 40,105 | | | | |
| С | From 2011 | 57,658 | | | | |
| d | From 2012 | 116,398 | | | | |
| е | From 2013 | 137,420 | | | | |
| f | Total of lines 3a through e | | 388,864 | | | |
| 4 | Qualifying distributions for 2014 from Part | t XII, | | | | |
| | line 4 ▶ \$ 79,150 | | | | ! | |
| а | Applied to 2013, but not more than line 2a | a | | | | |
| b | Applied to undistributed income of prior ye | ears | | | | |
| | (Election required – see instructions) | | | | > | |
| C | Treated as distributions out of corpus (Ele | ection | | , | ** | |
| | required - see instructions) | | | | · . | |
| d | Applied to 2014 distributable amount | | | | s s | 2,552 |
| е | Remaining amount distributed out of corp | ous | 76,598 | | · | |
| 5 | Excess distributions carryover applied to | 2014 | | · - · · · · · · · · · · · · · · · · · · | | |
| | (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: | | | | , , | |
| а | Corpus Add lines 3f, 4c, and 4e Subtrac | t line 5 | 465,462 | | | |
| b | Prior years' undistributed income Subtraction | ct | | | | |
| | line 4b from line 2b | | | | * | |
| С | Enter the amount of prior years' undistribit | | | | | |
| | income for which a notice of deficiency ha | as | | | | |
| | been issued, or on which the section 494 | 2(a) | | | | |
| | tax has been previously assessed | | | | | |
| d | Subtract line 6c from line 6b Taxable | | | | | |
| | amount - see instructions | | | | | |
| е | Undistributed income for 2013 Subtract I | ine | | | | |
| | 4a from line 2a Taxable amount – see | | | | | |
| | instructions | | | | | |
| f | Undistributed income for 2014 Subtract I | 1 | | | | |
| | 4d and 5 from line 1. This amount must b | e | | | | |
| - | distributed in 2015 | | | | | 0 |
| 7 | Amounts treated as distributions out of co | · . | | | | |
| | to satisfy requirements imposed by section 170(b)(1)(E) or 4942(a)(3) (Election may) | t t | | | : | |
| | 170(b)(1)(F) or 4942(g)(3) (Election may required—see instructions) | be | | | | |
| 8 | Excess distributions carryover from 2009 | not | | | | |
| Ü | applied on line 5 or line 7 (see instruction | | 37,283 | | | |
| 9 | Excess distributions carryover to 2015 | · ' | 3,,203 | | | |
| 3 | Subtract lines 7 and 8 from line 6a | | 428,179 | | | |
| 10 | Analysis of line 9 | ŀ | | | | |
| a | Excess from 2010 | 40,105 | | | | |
| b | Excess from 2011 | 57,658 | | | | |
| c | Excess from 2012 | 116,398 | | | | |
| ď | Excess from 2013 | 137,420 | | | | |
| e | Excess from 2014 | 76,598 | | | | |

| _ | 990-PF (2014) Bewkes Family | | | 51-03902 | | Page 1 0 |
|---------|--|-------------------------|---------------------------------------|------------------------------|---------------------|-----------------|
| | rt XIV Private Operating Fou | | | | 9) 1 | |
| 1a | If the foundation has received a ruling or of | | | - | | |
| _ | foundation, and the ruling is effective for 2 | | | | 1942(j)(3) or 4942 | |
| b 2a | Check box to indicate whether the founda Enter the lesser of the adjusted net | Tax year | ing loundation descr | Prior 3 years | 1942(J)(3) 014942 | !(j)(5) |
| Za | income from Part I or the minimum | (a) 2014 | (b) 2013 | (c) 2012 | (d) 2011 | (e) Total |
| | investment return from Part X for | (4) 2014 | (5) 2010 | (0) 2012 | (4)2011 | |
| | each year listed | | | | | |
| b | 85% of line 2a | | | | | |
| c | Qualifying distributions from Part XII. | | | | | |
| Ĭ | line 4 for each year listed | | | | | |
| d | Amounts included in line 2c not used directly | | <u> </u> | | | |
| _ | for active conduct of exempt activities | | | | | |
| е | 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 | | | | | |
| а | "Assets" alternative test – enter | | | | | |
| | (1) Value of all assets | | | | | |
| | (2) Value of assets qualifying under | | | | | _ |
| | 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 | | ļ | | | |
| С | "Support" alternative test – enter | | | 1 | 1 | |
| | (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 | | ĺ | | | |
| | organizations as provided in | | | | | |
| | section 4942(j)(3)(B)(iii) (3) Largest amount of support from | | · · · · · · · · · · · · · · · · · · · | - | | |
| | an exempt organization | | | | | |
| | (4) Gross investment income | | | | | |
| Pa | art XV Supplementary Inform | nation (Complet | e this part only i | f the foundation h | nad \$5.000 or more | in assets at |
| • | any time during the y | | - | | 40,000 01 111010 | |
| 1 | Information Regarding Foundation Ma | | • | | | |
| а | List any managers of the foundation who | have contributed mor | e than 2% of the total | contributions received | by the foundation | |
| | before the close of any tax year (but only | if they have contribute | ed more than \$5,000) | (See section 507(d)(2) |) | |
| | E. Garrett Bewkes, J | r. | | | | |
| b | List any managers of the foundation who | own 10% or more of | the stock of a corpora | tion (or an equally large | portion of the | |
| | ownership of a partnership or other entity |) of which the foundal | tion has a 10% or grea | ater interest | | |
| | N/A | | | | | |
| 2 | Information Regarding Contribution, C | | | | | |
| | Check here ▶ X if the foundation only | | • | • | · · | |
| | unsolicited requests for funds If the foun | | ants, etc (see instruc | tions) to individuals or c | organizations under | |
| | other conditions, complete items 2a, b, c, | | | | | |
| а | The name, address, and telephone numb | er or e-mail address | of the person to whom | n applications should be | e addressed | |
| | N/A | | | | | |
| | The form in which productions the 141 c | aubmitted | ation and existent in | | | |
| b | The form in which applications should be N/A | submitted and inform | iation and materials th | ney snould include | | |
| | Any submission deadlines | | | | | |
| ٠ | N/A | | | | | |
| d | Any restrictions or limitations on awards, | such as by geographi | ical areas, charitable t | fields, kinds of institution | ns, or other | |
| | factors | · | | | | |
| | N/A | | | | | |

Page **11**

| 3 Grants and Contributions Paid During the | Year or Approved for F | uture Payment | | |
|--|---|--------------------------------------|----------------------------------|--------|
| Recipient | If recipient is an individual show any relationship to any foundation manager | Foundation status of recipient | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | | |
| a Paid during the year See Attached Sch | | | | |
| | | | | 79,150 |
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| | | | | |
| Total | T | 1 | ▶ 3a | 79,15 |
| b Approved for future payment N/A | | | | |
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| | | | | |
| | | | | |
| Total | | | ▶ 3b | |

_____Page **12**

| Enter gross amounts unless otherwise indicated | | Unrelated t | ousiness income | Excluded by | section 512, 513, or 514 | (e) | |
|--|--|--|-----------------|--|--------------------------|---|--|
| 4 | | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | Related or exempt function income (See instructions.) | |
| 1 Program se | | | | | | · · · · · · · · · · · · · · · · · · · | |
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| | nd contracts from government agencies | - | | + + | | | |
| | p dues and assessments | | | | | | |
| | savings and temporary cash investments | | | | | | |
| | and interest from securities | | | 14 | 5 | | |
| | ncome or (loss) from real estate | | | | | | |
| | nanced property | | | 1 1 | | | |
| | ot-financed property | - - - - - - - - | | | | | |
| | ncome or (loss) from personal property | | | | | | |
| 7 Other inves | · · · · · · · · · · · · · · · · · · · | | | | | | |
| | ss) from sales of assets other than inventory | | | | | · | |
| | or (loss) from special events | | | | | _ . | |
| | t or (loss) from sales of inventory | | | <u> </u> | | | |
| • | nue a | · - | | <u> </u> | | <u> </u> | |
| | | - | | | | | |
| | | | <u> </u> | 1 1 | | | |
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| е | | | | <u> </u> | | · · · · · · | |
| | dd columns (b), (d), and (e) | * / | <u>-</u> | 0 *** ** | 5 | 0 | |
| | line 12, columns (b), (d), and (e) | <u> </u> | | | 13 | 5 | |
| | t in line 13 instructions to verify calculations) | | | | - | | |
| Part:XVI-E | | Accomplishme | nt of Exempt I | Purposes | | | |
| Line No | Explain below how each activity for which incom | | | | I importantly to the | | |
| ▼ | accomplishment of the foundation's exempt pur | | | | | ıs) | |
| N/A | | | | | | | |
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| rant. | AVII . | Exempt Organiza | _ | insiers to and | i iialisactio | ns and Neiadonships W | Atti Nonchantable | | |
|---------------|------------------|--|---|---------------------------------------|--|---|-------------------------------------|----------------|----------|
| 1 Di | d the org | | | e in any of the follo | wing with any ot | ther organization described | | Yes | No |
| ın | section 5 | 01(c) of the Code (other | r than section | n 501(c)(3) organiz | ations) or in sec | ction 527, relating to political | | _ | |
| org | ganızatıo | ns? | | | | | | | l |
| a Tra | ansfers f | rom the reporting found | ation to a nor | ncharitable exempt | organization of | | | | |
| ٠, , |) Cash | | | | | | 1a(1) | $\overline{}$ | <u>X</u> |
| - |) Other a | | | | | | 1a(2) | 4 | X |
| | her trans | | | | | | | | 32 |
| • | | of assets to a noncharita | • | = | _ | | 1b(1 | | X |
| ٠. | | ses of assets from a no | | . • | 1 | | 1b(2 | | X |
| • • | | of facilities, equipment, irsement arrangements | | eis | | | 1b(3 1b(4 | 4 | X |
| | | or loan guarantees | , | | | | 1b(5 | 4 | x |
| | | nance of services or me | embership or | fundraising solicita | itions | | 1b(6 | 4 | x |
| • | • | facilities, equipment, m | • | <u> </u> | | | 1c | + | X |
| | - | | | | | nn (b) should always show the fa | | | |
| | | | | | | he foundation received less tha | | | |
| va | lue in an | y transaction or sharing | arrangemen | t, show in column (| (d) the value of | the goods, other assets, or serv | ices received | | |
| (a) L | ine no | (b) Amount involved | (c) Name | e of noncharitable exemp | t organization | (d) Description of transfers, | transactions, and sharing arrangem | ents | |
| <u> </u> | | | <u> </u> | | | | | | |
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| 2a Is | the foun | dation directly or indirec | tly affiliated v | with, or related to, o | one or more tax- | exempt organizations | _ | | _ |
| | | in section 501(c) of the | | than section 501(c) | (3)) or in section | n 527? | \ | es X | . No |
| b If _ | "Yes," co | mplete the following sc | nedule | · · · · · · · · · · · · · · · · · · · | | T | | | |
| N/ | ' 7 | (a) Name of organization | | (b) Type of or | rganization | (c) Desc | cription of relationship | | |
| N/ | A | | | | | | | | |
| | | | | | | | | | |
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| | | | | · | | | | | |
| | | | | | | dules and statements, and to the best of | my knowledge and belief, it is true | | |
| | correct | and complete. Declaration of p | reparer (other th | ian taxpayer) is based o | n all information of w | thich preparer has any knowledge | May the IRS discuss this | return | \neg |
| Sign | | <i>F</i> / \ | | | | , | with the preparer shown i | - | |
| Here | 1. | 54 | 1 | | | 1.1. | (see instructions)? | Yes | No |
| | <u> </u> | /anux | سعرك | 1 e 1 | رم ا | <u> </u> | | | |
| | Sig | nature of officer or trustee | | | Date | Title | | | |
| | Print/ | Type preparer's name | | | Preparer's signatu | ure / | Date | Check | ıf |
| Paid | | _ | | | MILL | 11)/inti | | self-em | ployed |
| repare | er 💳 | P. Curtis, C. | | 1 | 1,009 | VI CONTRACTOR OF THE PROPERTY | 04/27/15 | | |
| Jse On | I ly Firm | name ► Curt | | ler & Ass | | | PTIN P0012 | | |
| | Firm's | | | nal Drive, | | 202 | Firm's EIN ▶ 59-27 | | |
| | Ц | vero | Beach, | FL 3296 | <u>. </u> | | Phone no 772-23 | 34-8 190-PF | |
| | | | | | | | Form M | יים-טכי | - (2014) |

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

Department of the Treasury Internal Revenue Service **Schedule of Contributors**

OMB No 1545-0047

2014

► 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.

Name of the organization

Employer identification number

| _Bewkes Famil | y Foundation | 51-0390209 |
|---|--|--|
| Organization type (check | one) | |
| Filers of | Section: | |
| Form 990 or 990-EZ | 501(c)() (enter number) organization | |
| | 4947(a)(1) nonexempt charitable trust not treated as a priva | ate foundation |
| | 527 political organization | |
| Form 990-PF | X 501(c)(3) exempt private foundation | |
| | 4947(a)(1) nonexempt charitable trust treated as a private fo | oundation |
| | 501(c)(3) taxable private foundation | |
| | is covered by the General Rule or a Special Rule . c)(7), (8), or (10) organization can check boxes for both the General Ru | ile and a Special Rule See |
| General Rule | | |
| | in filing Form 990, 990-EZ, or 990-PF that received, during the year, con or property) from any one contributor. Complete Parts I and II. See ins- contributions. | |
| Special Rules | | |
| regulations under 13, 16a, or 16b, a | on described in section 501(c)(3) filing Form 990 or 990-EZ that met the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form and that received from any one contributor, during the year, total contributor the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line | m 990 or 990-EZ), Part II, line utions of the greater of (1) |
| contributor, during | on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ the year, total contributions of more than \$1,000 exclusively for religion onal purposes, or for the prevention of cruelty to children or animals. | us, charitable, scientific, |
| contributor, during contributions total during the year foi General Rule app | on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ in the year, contributions exclusively for religious, charitable, etc., purposed more than \$1,000. If this box is checked, enter here the total contribution an exclusively religious, charitable, etc., purpose. Do not complete any plies to this organization because it received nonexclusively religious, clamore during the year. | ses, but no such utions that were received y of the parts unless the |
| 990-EZ, or 990-PF), but it | that is not covered by the General Rule and/or the Special Rules does must answer "No" on Part IV, line 2, of its Form 990, or check the box of the certify that it does not meet the filing requirements of Schedule B (F | on line H of its Form 990-EZ or on its |

7767 Bewkes Family Foundation 51-0390209

Federal Statements

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FYE: 12/31/2014

Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

| | | Name of Manager | Amount |
|----|---------|-----------------|------------|
| Ε. | Garrett | Bewkes, Jr. | \$ |
| | Total | | \$ 0 |
| | | | |

Page 1 of 1

Page 2

Name of organization

Bewkes Family Foundation

Employer identification number 51-0390209

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 1 E. Garrett Bewkes, Jr. X Person 51 Marker Way Payroll 75,000 Noncash Vero Beach FL 32963 (Complete Part II for noncash contributions) (b) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** \$ Noncash (Complete Part II for noncash contributions) (b) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll Noncash (Complete Part II for noncash contributions) (b) (c) (d) (a) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions) (b) (a) (c) (d) Name, address, and ZIP + 4 No. Total contributions Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions)

Bewkes Family Foundation EIN Number: 51-0390209

FYE: 12/31/14

FEDERAL STATEMENTS

Part XV Supplementary Information

| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of recipient | Purpose of grant or contribution | Amount |
|--|--|--------------------------------------|----------------------------------|---------|
| Name and address (home or business) | or substantial contributor | Tecipient | | |
| Alliance to Protect Nantucket 4 Barnstable Road Hyannis, MA 02601 | None | Private | Unrestricted | \$200 |
| American Cancer Society PO Box 13600 Tampa, FL 33681 | None | Private | Unrestricted | \$100 |
| Atlantic Classical Orchestra 141 US 1 Fort Pierce, FL 34950 | None | Private | Unrestricted | \$500 |
| Boys & Girls Club of IRC PO Box 643068 Vero Beach, FL 32963 | None | Private | Unrestricted | \$1,000 |
| Camp Wawenock 33 Wawenock Road Raymond, ME 04071 | None | Private | Unrestricted | \$200 |
| Class of 74 Memorial Scholarship 100 W 10th Street, Ste. 1109 Wilmington, DE 19801 | None | Private | Unrestricted | \$500 |
| Community Foundation of Nantucket 17 Sherburne Turnpike Nantucket, MA 02554 | None | Private | Unrestricted | \$500 |
| Coskata Coatue Wildlife Ref Wauwinet Road Nantucket, MA 02554 | None | Private | Unrestricted | \$1,000 |
| Dasie Bridgewater Hope Ctr PO Box 701483 Wabasso, FL 32970 | None | Private | Unrestricted | \$500 |
| Dana Farber Cancer Institute 450 Brookline Avenue Boston, MA 02215 | None | Private | Unrestricted | \$250 |

Bewkes Family Foundation EIN Number: 51-0390209

FYE: 12/31/14

FEDERAL STATEMENTS

Part XV Supplementary Information

| 3. Grants and Contributions Paid During the | Year or Approved for Future | Payment | | |
|---|---|----------------------|----------------------------------|----------|
| Recipient | show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
| Darien Land Trust P.O. Box 1074 Darien, Ct 06820 | None | Private | Unrestricted | \$100 |
| Darien Police Association 25 Hecker Ave. Darien, CT 06820 | None | Private | Unrestricted | \$500 |
| Deerfield Academy 7 Boyden Lane Deerfield, MA 01342 | None | Private | Unrestricted | \$17,500 |
| Greens Farm Academy PO Box 998 Greens Farms, CT 06838 | None | Private | Unrestricted | \$2,000 |
| Gifford Youth Activity Ctr 4875 43rd Ave Vero Beach, FL 32967 | None | Private | Unrestricted | \$500 |
| Habitat For Humanity 270 Peachtree St., St. 1300 Atlanta, GA 30309-1263 | None | Private | Unrestricted | \$1,000 |
| Hancock Comm Christmas PO Box 1070 Hancock, MA 01237 | None | Private | Unrestricted | \$100 |
| Harvest Food & Outreach Ctr 1360 28thSt Vero Beach, FL 32960 | None | Private | Unrestricted | \$250 |
| Historic Deerfield PO Box 321 84B Main Street Deerfield, MA 01342 | None | Private | Unrestricted | \$250 |
| Indian River Land Trust 1904 12th Court Vero Beach, FL 32960 | None | Private | Unrestricted | \$1,500 |

Bewkes Family Foundation EIN Number: 51-0390209

FYE: 12/31/14

FEDERAL STATEMENTS

Part XV Supplementary Information

| Grants and Contributions Paid During the Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | | Purpose of grant or contribution | Amount |
|---|---|---------|----------------------------------|---------|
| Indian River Medical Center 1000 36th Street | None | Private | Unrestricted | \$1,500 |
| Vero Beach, Florida 32960 JI Community Service League 600 Indian Harbor Road | None | Private | Unrestricted | \$1,000 |
| Vero Beach, FL 32963 Lenox Hill Hosp Meeth Optha 100 East 77th Street | None | Private | Unrestricted | \$1,000 |
| New York, NY 10075 McKee Botanical Gardens 350 US 1 | None | Private | Unrestricted | \$1,500 |
| Vero Beach, FL 32962 Nantucket Boys & Girls Club PO Box 269 | None | Private | Unrestricted | \$1,000 |
| Nantucket, MA 02554 Nantucket Conservation Fdn PO Box 13 | None | Private | Unrestricted | \$1,500 |
| Nantucket, MA 02554-0013 Nantucket Cottage Hospital 57 Prospect Street | None | Private | Unrestricted | \$1,500 |
| Nantucucket, Ma 02554 Nantucket Shell Fish Association PO Box 1244 | None | Private | Unrestricted | \$200 |
| Nantucket, MA 02554 Norwalk Maritime Center 10 N Water Street | None | Private | Unrestricted | \$2,500 |
| Norwalk, CT 06854 NYU Urology Research Program 1 Park Avenue 17th Floor | None | Private | Unrestricted | \$500 |
| 1 Park Avenue 17th Floor New York, NY 10016 | | | | |

Bewkes Family Foundation EIN Number: 51-0390209

FYE: 12/31/14

FEDERAL STATEMENTS

Part XV Supplementary Information

| 3. Grants and Contributions Paid During the | Year or Approved for Future | Payment | | |
|---|--------------------------------|------------|---------------------|----------|
| Recipient | If recipient is an individual, | Foundation | Purpose of grant or | |
| | show any relationship to | status of | contribution | Amount |
| | any foundation manager | recipient | | |
| Name and address (home or business) | or substantial contributor | | | |
| Outward Bound USA | None | Private | Unrestricted | \$500 |
| 910 Jackson Street | | | | |
| Goldon, CO 80401 | | | | |
| Pelican Island Audubon Society | None | Private | Unrestricted | \$2,000 |
| PO Box 1833 | | | | |
| Vero Beach, FL 32961 | | | | |
| Riverside Theatre | None | Private | Unrestricted | \$1,500 |
| 3001 Riverside Park Drive | | | | |
| Vero Beach, FL 32963 | | | | |
| Sankaty Head Foundation | None | Private | Unrestricted | \$1,500 |
| PO Box 875 | | | | |
| Siasconset, MA 02564 | | | | |
| Save Our Sound | None | Private | Unrestricted | \$5,000 |
| 4 Barnstable Road | | | İ | |
| Hyannis, MA 02601 | | | | |
| Sconset Trust | None | Private | Unrestricted | \$1,000 |
| PO Box 821 | | 1 | | |
| Siasconset, MA 02564 | | | | |
| Smile Train | None | Private | Unrestricted | \$250 |
| PO Box 96231 | | | | |
| Washington, D.C. 20090-6231 | | l. | : | |
| St. Lawrence University | None | Private | Unrestricted | \$2,000 |
| 23 Romoda Drive | | | | |
| Canton, NY 13617 | | | | |
| The Bement School | None | Private | Unrestricted | \$1,500 |
| 94 Old Main Street | | | | |
| Deerfield, MA 01342 | | | | |
| The Learning Alliance | None | Private | Unrestricted | \$200 |
| P.O. Box 643446 | | | | |
| Vero Beach, FL 32964-3446 | | | | |
| The Maritime Aquarium | None | Private | Unrestricted | \$10,000 |

Bewkes Family Foundation EIN Number: 51-0390209

FYE: 12/31/14

FEDERAL STATEMENTS

Part XV Supplementary Information

3. Grants and Contributions Paid During the Year or Approved for Future Payment

| 1836 14th Avenue Vero Beach, FL 32960 VNA Hospice 1110 35th Lane Vero Beach, Fl 32960 Vero Beach, Fl 32960 Vero Beach Indian River Community Foundation 3055 Cardinal Drive Ste 106 Vero Beach Museum of Art 3001 Riverside Park Drive Vero Beach, FL 32963 VFW 406 W 34th St, Ste 718 Kansas City, MO 64111 Wounded Warrior Project 4899 Belfort Rd., Ste 300 Jacksonville, FL 32256 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 | 3. Grants and Contributions Paid During the Year | r or Approved for Future | Payment | | |
|--|--|--------------------------------|------------|---------------------|---------------|
| Name and address (home or business) 10 N Water Street Norwalk, CT 06854 United Way of Indian River County 1836 14th Avenue Vero Beach, FL 32960 VNA Hospice 1110 35th Lane Vero Beach, FI 32960 Vero Beach Indian River Community Foundation 3055 Cardinal Drive Ste 106 Vero Beach, FL 32963 Vero Beach Museum of Art 3001 Riverside Park Drive Vero Beach, FL 32963 VFW 406 W 34th St, Ste 718 Kansas City, MO 64111 Wounded Warrior Project 4899 Belfort Rd., Ste 300 Jacksonville, FL 32256 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 | Recipient | If recipient is an individual, | Foundation | Purpose of grant or | |
| Name and address (home or business) 10 N Water Street Nonwalk, CT 06854 United Way of Indian River County 1836 14th Avenue Vero Beach, FL 32960 VNA Hospice 1110 35th Lane Vero Beach, FI 32960 Vero Beach Indian River Community Foundation 3055 Cardinal Drive Ste 106 Vero Beach, FL 32963 Vero Beach Museum of Art 3001 Riverside Park Drive Vero Beach, FL 32963 VFW 406 W 34th St, Ste 718 Kansas City, MO 64111 Wounded Warrior Project 4899 Belfort Rd., Ste 300 Jacksonville, FL 32256 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 | | show any relationship to | status of | contribution | Amount |
| 10 N Water Street | | any foundation manager | recipient | | |
| Norwalk, CT 06854 United Way of Indian River County 1836 14th Avenue Vero Beach, FL 32960 VNA Hospice 1110 35th Lane Vero Beach, Fl 32960 Vero Beach Indian River Community Foundation 3055 Cardinal Drive Ste 106 Vero Beach, FL 32963 Vero Beach Museum of Art 3001 Riverside Park Drive Vero Beach, FL 32963 VFW 406 W 34th St, Ste 718 Kansas City, MO 64111 Wounded Warrior Project 4899 Belfort Rd., Ste 300 Jacksonville, FL 32256 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 | | or substantial contributor | | | |
| United Way of Indian River County 1836 14th Avenue Vero Beach, FL 32960 VNA Hospice 1110 35th Lane Vero Beach, FI 32960 Vero Beach Indian River Community Foundation 3055 Cardinal Drive Ste 106 Vero Beach, FL 32963 Vero Beach Museum of Art 3001 Riverside Park Drive Vero Beach, FL 32963 VFW 406 W 34th St, Ste 718 Kansas City, MO 64111 Wounded Warrior Project 4899 Belfort Rd., Ste 300 Jacksonville, FL 32256 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 | | | | | |
| 1836 14th Avenue Vero Beach, FL 32960 VNA Hospice 1110 35th Lane Vero Beach, Fl 32960 Vero Beach indian River Community Foundation 3055 Cardinal Drive Ste 106 Vero Beach Museum of Art 3001 Riverside Park Drive Vero Beach, FL 32963 VFW 406 W 34th St, Ste 718 Kansas City, MO 64111 Wounded Warrior Project 4889 Belfort Rd., Ste 300 Jacksonville, FL 32256 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 | Norwalk, CT 06854 | | | ļ | |
| 1836 14th Avenue Vero Beach, FL 32960 VNA Hospice 1110 35th Lane Vero Beach, Fl 32960 Vero Beach Indian River Community Foundation 3055 Cardinal Drive Ste 106 Vero Beach Museum of Art 3001 Riverside Park Drive Vero Beach, FL 32963 VFW 406 W 34th St, Ste 718 Kansas City, MO 64111 Wounded Warrior Project 4899 Belfort Rd., Ste 300 Jacksonville, FL 32266 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 | United Way of Indian River County | None | Private | Unrestricted | \$5,000 |
| VNA Hospice 1110 35th Lane Vero Beach, Fl 32960 Vero Beach Indian River Community Foundation 3055 Cardinal Drive Ste 106 Vero Beach, FL 32963 Vero Beach Museum of Art 3001 Riverside Park Drive Vero Beach, FL 32963 VFW 406 W 34th St, Ste 718 Kansas City, MO 64111 Wounded Warrior Project 4899 Belfort Rd., Ste 300 Jacksonville, FL 32256 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 | 1836 14th Avenue | | | | |
| 1110 35th Lane Vero Beach, Fl 32960 Vero Beach Indian River Community Foundation 3055 Cardinal Drive Ste 106 Vero Beach, FL 32963 Vero Beach Museum of Art 3001 Riverside Park Drive Vero Beach, FL 32963 VFW 406 W 34th St, Ste 718 Kansas City, MO 64111 Wounded Warrior Project 4899 Belfort Rd., Ste 300 Jacksonville, FL 32256 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 | Vero Beach, FL 32960 | | | | |
| 1110 35th Lane Vero Beach, Fl 32960 Vero Beach Indian River Community Foundation 3055 Cardinal Drive Ste 106 Vero Beach, FL 32963 Vero Beach Museum of Art 3001 Riverside Park Drive Vero Beach, FL 32963 VFW 406 W 34th St, Ste 718 Kansas City, MO 64111 Wounded Warrior Project 4899 Belfort Rd., Ste 300 Jacksonville, FL 32256 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 | VNA Hospice | None | Private | Unrestricted | \$1,000 |
| Vero Beach Indian River Community Foundation 3055 Cardinal Drive Ste 106 Vero Beach, FL 32963NonePrivateUnrestricted\$5,00Vero Beach Museum of Art 3001 Riverside Park Drive Vero Beach, FL 32963NonePrivateUnrestricted\$1,50VFW 406 W 34th St, Ste 718 Kansas City, MO 64111NonePrivateUnrestricted\$10Wounded Warrior Project 4899 Belfort Rd., Ste 300 Jacksonville, FL 32256NonePrivateUnrestricted\$10WPBT2 Miami, FL 33181NonePrivateUnrestricted\$10Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341NonePrivateUnrestricted\$25 | · · · · · · · · · · · · · · · · · · · | | | | , , , |
| 3055 Cardinal Drive Ste 106 Vero Beach, FL 32963 Vero Beach Museum of Art 3001 Riverside Park Drive Vero Beach, FL 32963 VFW 406 W 34th St, Ste 718 Kansas City, MO 64111 Wounded Warrior Project 4899 Belfort Rd., Ste 300 Jacksonville, FL 32256 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 | | | | | |
| 3055 Cardinal Drive Ste 106 Vero Beach, FL 32963 Vero Beach Museum of Art 3001 Riverside Park Drive Vero Beach, FL 32963 VFW 406 W 34th St, Ste 718 Kansas City, MO 64111 Wounded Warrior Project 4899 Belfort Rd., Ste 300 Jacksonville, FL 32256 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 | Vero Beach Indian River Community Foundation | None | Private | Unrestricted | \$5,000 |
| Vero Beach, FL 32963 Vero Beach Museum of Art 3001 Riverside Park Drive Vero Beach, FL 32963 VFW 406 W 34th St, Ste 718 Kansas City, MO 64111 Wounded Warrior Project 4899 Belfort Rd., Ste 300 Jacksonville, FL 32256 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 | • | | 1 | | 40,000 |
| 3001 Riverside Park Drive Vero Beach, FL 32963 VFW 406 W 34th St, Ste 718 Kansas City, MO 64111 Wounded Warrior Project 4899 Belfort Rd., Ste 300 Jacksonville, FL 32256 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 | | | | | |
| 3001 Riverside Park Drive Vero Beach, FL 32963 VFW 406 W 34th St, Ste 718 Kansas City, MO 64111 Wounded Warrior Project 4899 Belfort Rd., Ste 300 Jacksonville, FL 32256 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 | Vara Booch Museum of Art | None | Drivete | Linguistad | 64 E00 |
| Vero Beach, FL 32963 VFW 406 W 34th St, Ste 718 Kansas City, MO 64111 Wounded Warrior Project 4899 Belfort Rd., Ste 300 Jacksonville, FL 32256 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 | | None | Private | Officed | \$1,500 |
| VFW 406 W 34th St, Ste 718 Kansas City, MO 64111 Wounded Warrior Project 4899 Belfort Rd., Ste 300 Jacksonville, FL 32256 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 | | | | | |
| 406 W 34th St, Ste 718 Kansas City, MO 64111 Wounded Warrior Project 4899 Belfort Rd., Ste 300 Jacksonville, FL 32256 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 | 1010 Bodon, 1 2 02000 | | | 1 | |
| Wounded Warrior Project 4899 Belfort Rd., Ste 300 Jacksonville, FL 32256 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 | | None | Pri∨ate | Unrestricted | \$100 |
| Wounded Warrior Project 4899 Belfort Rd., Ste 300 Jacksonville, FL 32256 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 | • | | | | |
| 4899 Belfort Rd., Ste 300 Jacksonville, FL 32256 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 | Kansas City, MO 64111 | | | | |
| 4899 Belfort Rd., Ste 300 Jacksonville, FL 32256 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 | Wounded Warrior Project | None | Private | Unrestricted | \$100 |
| Jacksonville, FL 32256 WPBT2 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 None Private Unrestricted \$10 Unrestricted \$10 Unrestricted \$25 | <u>-</u> | | ''' | 3,11000110100 | V 100 |
| 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 None Private Unrestricted \$25 | • | | | | |
| 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 None Private Unrestricted \$25 | | | | | |
| 14901 Northeast 20th Avenue Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 None Private Unrestricted \$25 | WPBT2 | None | Private | Unrestricted | \$100 |
| Miami, FL 33181 Yale Law School Fund PO Box 208341 New Haven, CT 06520-8341 New Haven, CT 06520-8341 | | | | | Ţ. 3 0 |
| PO Box 208341 New Haven, CT 06520-8341 | | | | | |
| PO Box 208341 New Haven, CT 06520-8341 | Vola Laur Oak and Franch | Nama | Dairect | | 4055 |
| New Haven, CT 06520-8341 | | None | Private | Unrestricted | \$250 |
| | | | | 1 | |
| | New Havell, C1 00320-0341 | | | | |
| Total \$79.15 | | | | | \$79.150 |

Total \$79,150

| 7767 Bewkes Family Foundation 51-0390209 FYE: 12/31/2014 | Federal | Federal Statements | | 4/27/2015 5·59 PM Page 1 |
|---|---|--|--------------------------------------|-----------------------------|
| State | Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees | art I, Line 16b - Accou | unting Fees | |
| Description Curtis, Ward & Associates - Tax Elaine Meyers - Secretarial Total | Fotal \$ 1,570 1,350 \$ 2,920 | Net Investment \$ 1,570 \$ 2,920 | Adjusted Net \$ 1,570 1,350 \$ 2,920 | Charitable Purpose |
| | Form 990-PF, Pa | Form 990-PF, Part I, Line 18 - Taxes | | |
| Description Excise Tax Total | S 0 | Net Investment | Adjusted Net | Charitable Purpose |
| Stat | Statement 2 - Form 990-PF, | 990-PF, Part I, Line 23 - Other Expenses | Expenses | |
| Description | Total | Net Investment | Adjusted Net | Charitable Purpose |
| Expenses Investment Fees DE Filing Fee | 245 | 245 | 245 | |
| | | | | |
| | | | | 7 1 |