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# ggn-PF

### **Return of Private Foundation**

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

OMB No. 1545-0052 2015

Department of the Treasury Internal Revenue Service

SCANNED MAR 14

▶ 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.

Open to Public Inspection For calendar year 2015 or tax year beginning , 2015, and ending 20 1/1 12/31 15 A Employer identification number Name of foundation 20-3102439 Dennis Edwards and Mark Steinberg Foundation B Telephone number (see instructions) Room/surte Number and street (or P.O. box number if mail is not delivered to street address) (305) 609-6862 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ► Miami, FL 33133 Check all that apply: ☐ Initial return ☐ Initial return of a former public charity D 1. Foreign organizations, check here . . . ▶ □ ☐ Amended return ☐ Final return 2. Foreign organizations meeting the 85% test, ☐ Address change □ Name change check here and attach computation · ▶ □ E If private foundation status was terminated under H Check type of organization: Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here . . . ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation Fair market value of all assets at J Accounting method: ✓ Cash ☐ Accrual If the foundation is in a 60-month termination end of year (from Part II, col. (c), Other (specify) under section 507(b)(1)(B), check here line 16) ▶ \$ 485,656 (Part I, column (d) must be on cash basis.) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per books ıncome purposes the amounts in column (a) (see instructions).) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 24,760 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 . . . . 5a Gross rents . . . . . . . . . . . . . . . . b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . . Net short-term capital gain . . . . . . Income modifications 10a Gross sales less returns and allowances Less: Cost of goods sold . . . . Gross profit or (loss) (attach schedule) . . C 11 Other income (attach schedule) . . . . . 26.439 26,439 26,439 12 Total. Add lines 1 through 11 . . . 51,199 26,439 26,439 13 Compensation of officers, directors, trustees, etc. Operating and Administrative Expenses 14 Other employee salanes and wages . . . . . 15 Pension plans, employee benefits 16a Legal fees (attach schedule) b Accounting fees (attach schedule) Other professional fees (attach schedule) . . 17 Interest . . . Taxes (attach schedule) (see instructions) / ED 18 19 Depreciation (attach schedule) and depletion . 20 4.200 4.200 4.200 4200 21 349 349 349 349 22 Printing and publications... Other expenses (attach schedule) E.M. U.I. 23 730 730 730 730 Total operating and administrative expenses. Add lines 13 through 23 . . . . . . . . . 10,279 10,279 10,279 10,279 25 Contributions, gifts, grants paid . . . . . . 25,685 25,685 26 Total expenses and disbursements. Add lines 24 and 25 35,964 15,558 15,558 35,964 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements 15,235 Net investment income (if negative, enter -0-) . 10,881

For Paperwork Reduction Act Notice, see instructions.

Adjusted net income (if negative, enter -0-)

Cat. No. 11289X

Form **990-PF** (2015)



Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year	End o	•
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	388	3,090	* 3,090
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other	İ		
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶			
Assets	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
Ä	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	0	20,066	20,066
	С	Investments—corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment: basis ▶		_	
		Less: accumulated depreciation (attach schedule) ▶	<u> </u>		
	12	Investments-mortgage loans			
	13	Investments—other (attach schedule)	448,553	441,020	462,500
	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ► )			
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	448,941	464,176	485,656
	17	Accounts payable and accrued expenses			
s	18	Grants payable			
Liabilities	19	Deferred revenue			
ilic	20	Loans from officers, directors, trustees, and other disqualified persons			
ia	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ►)			
	23	Total liabilities (add lines 17 through 22)			
Balances		Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.			
an	24	Unrestricted	<u> </u>		
al	25	Temporarily restricted			
	26	Permanently restricted			
Net Assets or Fund		Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	}		
ts	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
SSE	29	Retained earnings, accumulated income, endowment, or other funds			
Ä	30	Total net assets or fund balances (see instructions)			
Net	31	Total liabilities and net assets/fund balances (see instructions)			
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	<u> </u>		
		I net assets or fund balances at beginning of year-Part II, colui	mn (a), line 30 (must	agree with	<del></del>
		of-year figure reported on prior year's return)			448,941
2		r amount from Part I, line 27a			15,235
3	Othe	er increases not included in line 2 (itemize)		3	0
4	Add	lines 1, 2, and 3		4	464,176
				<u> </u>	0
6	Tota	reases not included in line 2 (itemize) ► I net assets or fund balances at end of year (line 4 minus line 5)—I	Part II, column (b), line	∋30 <b>6</b>	464,176
			<del></del>		Form <b>990-PF</b> (2015)

Part		Losses for Tax on Investnering ekind(s) of property sold (e.g., real estate		(b) How acquired P—Purchase	(c) Date a	cquired	(d) Date sold
	2-story bnck warehouse; or common stock, 200 shs. MLC Co.)				(mo., da	io., day, yr)	(mo., day, yr.)
_1a	42 Shares Common Stock of	of Vertex Pharmaceuticals		D	12/28	3/15	12/28/15
<u> </u>				<b></b>	<del></del>		
<u>C</u>							
<u>d</u>				<del>   </del>			<del></del>
<u>e</u>	(e) Gross sales price		other basis		(h) Gain or (loss) (e) plus (f) minus (g)		
a	5,185		5185				
b							
С							
d							
е	0 1-1 1	4)	1	10/01/00			
	Complete only for assets sno	wing gain in column (h) and owned	<del></del>				(h) gain minus less than -0-) <b>or</b>
	(i) F M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col. (i) (j), if any			om col. (h))
a							
b							
<u>c</u>							
<u>d</u>							· · · · · · · · · · · · · · · · · · ·
<u>e</u>	<del></del>	( If goin	also enter in Pa	rt Lline 7	<del></del>	<del></del>	<del></del>
2	Capital gain net income or		, enter -0- in Par		2		0
3	If gain, also enter in Part	n or (loss) as defined in sections I, line 8, column (c) (see instruc	ctions). If (loss)	, enter -0- in }			
Part		er Section 4940(e) for Redu			3		0
Was t		e this part blank. section 4942 tax on the distribu qualify under section 4940(e). D			oase perio	od?	☐ Yes 🗸 No
1	Enter the appropriate amo	ount in each column for each yea	ar; see the instru	uctions before ma	aking any	entries.	
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distribution	s Net value o	(c) f noncharitable-use a	ssets	Distr (col. (b) d	(d) ribution ratio livided by col. (c))
	2014	4	1,235	44	8,553		.0942
	2013	3	4,820	49	6,125		.0701
	2012	2	5,559	49	7,256		.0514
	2011	2	8,367	49	3,219		.0575
	2010		4,888	19	5,516	<del></del>	.0502
2	Total of line 1, column (d)				. 2		.3234
3	Average distribution ratio	for the 5-year base period—divi	de the total on I	ine 2 by 5, or by	the		
	number of years the found	lation has been in existence if le	ess than 5 years		. 3	<b></b> _	.064
4	Enter the net value of non-	charitable-use assets for 2015 f	rom Part X, line	5	. 4		- · <del>- · · · · · · · · · · · · · · · · ·</del>
5	Multiply line 4 by line 3				. 5	<u> </u>	
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b	)		. 6	<del> </del>	<del></del>
7	Add lines 5 and 6				. 7	ļ	
8		ns from Part XII, line 4			. 8	min = = = = i	1/ tay mata C == 41
	Part VI instructions.	ter than line 7, check the box in	ı ran vi, iine 10	, and complete t	лаграп С	ising a 19	n tax rate. See the

Part	Excise Tax Based on investment income (Section 4940(a), 4940(b), 4940(e), or 4948—see in	nstru	ctio	ns)			
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	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)  Domestic foundations that meet the section 4940(e) requirements in Part V, check		•				
	here ▶ □ 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).		i				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)						
3	Add lines 1 and 2						
4	Subtrtle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)						
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0						
6	Credits/Payments: 2015 estimated tax payments and 2014 overpayment credited to 2015   6a						
a b	2015 estimated tax payments and 2014 overpayment credited to 2015   6a   Exempt foreign organizations—tax withheld at source   6b						
C	Tax paid with application for extension of time to file (Form 8868) . 6c						
ď	Backup withholding erroneously withheld 6d						
7	Total credits and payments. Add lines 6a through 6d			- •			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached						
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						
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax ▶ Refunded ▶ 11						
	VII-A Statements Regarding Activities						
18	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			
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	<u>1a</u>					
Б	Instructions for the definition)?	1b					
	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.						
_	· · · · · · · · · · · · · · · · · · ·						
đ	<ul> <li>d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:</li> <li>(1) On the foundation. ► \$</li> <li>(2) On foundation managers. ► \$</li> </ul>						
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					
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					
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a					
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					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	j					
	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					
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 XV	7					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶	l	į				
L	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		ĺ				
b	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	į	,			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	-00					
•	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"		l				
	complete Part XIV	9					
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their						
	names and addresses	10					

Part	VII-A Statements Regarding Activities (continued)	_		<u> </u>
			Yes	No
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	,	
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		
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address	13		
14	The books are in care of ▶ Telephone no. ▶			
	Located at ► ZIP+4 ►			<u></u>
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			<b>▶</b> □
16	At any time during calendar year 2015, 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		
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶	L		L
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<del></del> -
	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):	l		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?   Yes  No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?   Yes  No			
	(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)?			
	(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.)			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	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 2015?	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 2015, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2015?			,
4.	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
D	Are there any years listed in 2a for which the foundation is <b>not</b> 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 all years listed, answer "No" and attach statement—see instructions.)	A.		
_		2b		<del> </del>
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  20 , 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?			
b	If "Yes," did it have excess business holdings in 2015 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 2015.)	3b		Ĺ <sup>.</sup>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		
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 2015?	4b		

Par	VII-B Statements Regarding Activities	tor W	hich Form	4720	May Be R	equire	ed (contin	iued)			
5a	During the year did the foundation pay or incur a (1) Carry on propaganda, or otherwise attempt to (2) Influence the outcome of any specific public	o influe	ence legislatio					□No			
	directly or indirectly, any voter registration dri (3) Provide a grant to an individual for travel, stu (4) Provide a grant to an organization other than	dy, or o		ourpose	es?		☐ Yes ☐ Yes	☐ No ☐ No			
	section 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious,	 charit	able, sclentif	c, litera	ry, or educ	ational	Yes	□ No			
b	Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?										
С	Organizations relying on a current notice regarding disaster assistance check here										
6a	If "Yes," attach the statement required by Regulations section 53.4945–5(d).  6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums										
b	Did the foundation, during the year, pay premium							∐ No ?	6b	-	
	If "Yes" to 6b, file Form 8870.  At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?   Yes  No  If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?.								7b		
Part	VIII Information About Officers, Direct and Contractors	tors, T	rustees, F	ounda	tion Man	agers,	Highly P	aid Er	nploy	ees,	
1	List all officers, directors, trustees, foundation	n mana	agers and th	eir con	npensation	ı (see ii	nstruction	15).			
	(a) Name and address	hou	rs per week (If not paid, em		emplo	Contributions to ployee benefit plans leferred compensation		(e) Expense account other allowances			
							<del></del>				
		 		<del></del>	<del></del>		··				
2	Compensation of five highest-paid employee	es (oth	er than tho	se incli	uded on li	ne 1:	see instru	etions	). If no	one, e	nter
	"NONE."										
	a) Name and address of each employee paid more than \$50,00	0	(b) Title, and a hours per v devoted to p	veek	(c) Compe	nsation	(d) Contributemployee I plans and documents	eferred			
							!				
				·							
otal	number of other employees paid over \$50,000 .	<u>···</u>	<del></del> .	<u> </u>	· · · ·	· ·	<u> </u>	. 🕨			

3 .	and Contractors (continued)  Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE	Ξ."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
tal n	umber of others receiving over \$50,000 for professional services	
art l	X-A Summary of Direct Charitable Activities	
List th	he foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of lizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1		
2		<del></del>
3		
4		
art l	VALE Summan, of Program-Balated Investments (see instructions)	
_	X-B Summary of Program-Related Investments (see instructions)  ribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
Descr		Amount
		Amount
Descr		Amount
Descr		Amount
Descr 1 2		Amount
1 2	be the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
Descr 1 2	be the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount

Part	X Minimum Investment Return (All domestic foundations must complete this part. Forei	gn fo	undations,
	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	1,672
b	Average of monthly cash balances	1b	4,444
С	Fair market value of all other assets (see instructions)	1c	462,500
d	<b>Total</b> (add lines 1a, b, and c)	1d	468,616
e	Reduction claimed for blockage or other factors reported on lines 1a and		<del></del>
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	468,616
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	7,029
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	461,587
6	Minimum investment return. Enter 5% of line 5	6	23,079
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations check here ► ☐ and do not complete this part.)	ounda	ations
1	Minimum investment return from Part X, line 6	1	23,079
2a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015. (This does not include the tax from Part VI.) 2b 0		
C	Add lines 2a and 2b	2c	108
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	22,971
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	22,971
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	_	
	line 1	7	22,971
Part	XII Qualifying Distributions (see instructions)		
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	35,964
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	0
þ	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	35,964
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 6	108
6	Adjusted qualifying distributions. Subtract line 5 from line 4	لستسا	35,856
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whe	tner the foundation
	qualifies for the section 4340(e) reduction of tax in those years.		F 000-DE (0015)

Part	XIII Undistributed Income (see instruction	ins)	<del></del>		
	√ - Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years prior to 2014	(c) 2014	<b>(d)</b> 2015
	line 7				22,971
2	Undistributed income, if any, as of the end of 2015:				
а	Enter amount for 2014 only			0	
þ	Total for prior years: 20,20,20		0		
3	Excess distributions carryover, if any, to 2015:				
а	From 2010		1	į	
b	From 2011 4,151				
C	From 2012 1,285				
d	From 2013 10,145		İ		
e	From 2014 18,355		1		
f	Total of lines 3a through e	34,482			
4	Qualifying distributions for 2015 from Part XII, line 4: ▶ \$ 35,964				
а	Applied to 2014, but not more than line 2a .			o	
b	Applied to undistributed income of prior years				
	(Election required—see instructions)		اه		
С	Treated as distributions out of corpus (Election				
-	required—see instructions)	0	1	}	
d	Applied to 2015 distributable amount				22,971
e	Remaining amount distributed out of corpus	12,993			22,371
5	Excess distributions carryover applied to 2015	12,593			0
J	(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. Subtract line 5	47,475			
	Prior years' undistributed income. Subtract	47,475			<del></del>
D	line 4b from line 2b		ا		
	•		0		
C	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				5
a	Subtract line 6c from line 6b. Taxable		0		
đ	amount—see instructions				
			0		
е	Undistributed income for 2014. Subtract line		ĺ		
	4a from line 2a. Taxable amount—see			ľ	
	instructions			0	
f	Undistributed income for 2015. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2016				0
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be		1		
	required—see instructions)	0			
8	Excess distributions carryover from 2010 not				
	applied on line 5 or line 7 (see instructions).	546			
9	Excess distributions carryover to 2016.				
	Subtract lines 7 and 8 from line 6a	46,929			
10	Analysis of line 9:				<del></del>
а	Excess from 2011		[	(	
b	Excess from 2012 1,285				
С	Excess from 2013 10,145		1	1	
d	Excess from 2014 18,355				
e	Excess from 2015 12,993				
_					

Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A, question 9	))	
1a	If the foundation has received a ruling foundation, and the ruling is effective fo					
b	Check box to indicate whether the four	ndation is a private	operating foundat	tion described in se	ection  4942()	(3) or 4942(j)(5)
2a		Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(e) Total
b	85% of line 2a		<del> </del>	<del></del>		<del> </del>
С	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					
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:					
a b	"Assets" alternative test—enter:  (1) Value of all assets  (2) Value of assets qualifying under section 4942(j)(3)(B)(i)  "Endowment" alternative test—enter <sup>2</sup> / <sub>3</sub> of minimum investment return shown in Part X, line 6 for each year listed					
С	"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(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part				he foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-		1 <b>s.</b> )	<del></del>		
1 a	Information Regarding Foundation List any managers of the foundation of before the close of any tax year (but of	who have contribu				by the foundation
Dennis	Edwards					
b	List any managers of the foundation ownership of a partnership or other el			•		arge portion of the
N/A	I de constitución de la constitución	0: 0:4 1	- O-1-11			
2	Information Regarding Contribution Check here ▶ ☐ if the foundation unsolicited requests for funds. If the foundations, complete items 2a,	only makes controundation makes	ributions to prese	lected charitable	-	•
а	The name, address, and telephone nu	ımber or e-mail ad	Idress of the perso	on to whom applic	ations should be	addressed:
Dennis	Edwards, 2907 Seminole Street, Miami,	FL 33133-3235				
	The form in which applications should		d information and	materials they sho	uld include:	
Letter	of Intent					
С	Any submission deadlines:					
N/A d	Any restrictions or limitations on av factors:	vards, such as b	y geographical ar	eas, charitable fi	elds, kinds of ins	stitutions, or other
Our pr	imaryu interests are in the arts, educatio	n and non-discrimi	nation efforts in Mi	ami-Dade County		

Par	Supplementary Information (continuous YGrants and Contributions Paid During t	nued)	ad for Eur	turo Povmont	
	* Recipient	If recipient is an individual.	Foundation	1	
		If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
	Name and address (home or business)  Paid during the year	or substantial contributor	recipient		
a	r aid during the year				
See A	ttached Schedule				
					<u></u>
			}		
			}		
			,		
					}
			ļ		
			:		
			ļ		{
	Total		l	▶ 3a	
b	Approved for future payment				
N/A					
		l			
	Total			3b	

Ente	r gross amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by section	on 512, 513, or 51	→ (e)
	D	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	Related or exempt function income (See instructions.)
1	Program service revenue:		<u> </u>		<del></del>	<u> </u>
	a <sub>N/A</sub>		<del> </del>	<u> </u>	<del></del>	<del> </del>
	b					
	d			-		
	······································					
	e		, , , , , , , , , , , , , , , , , , ,			_
				<del> </del>	<del></del>	<del></del>
_	g Fees and contracts from government agencies			ļ <del> </del>		
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments		···	<del> </del>	··	<del></del>
4	Dividends and interest from securities		·	<del> </del>		
5	Net rental income or (loss) from real estate:		<del></del>	<del> </del>	······	<del></del>
	a Debt-financed property		<del></del>	<del> </del>	<del></del>	
	<b>b</b> Not debt-financed property		·	<del> </del>		<u>-</u>
6	Net rental income or (loss) from personal property		<del></del>	<del> </del>		<del> </del>
7	Other investment income	<del></del>	<del></del>	<del> </del>		<del> </del>
8	Gain or (loss) from sales of assets other than inventory	ļ		<del> </del> -		
9	Net income or (loss) from special events	<u> </u>	<del> </del>	<del> </del>	<del></del>	<del></del>
10	Gross profit or (loss) from sales of inventory		<del></del>	<del> </del>	<del></del>	<del></del>
"	Other revenue: a			<del> </del>	<del></del>	<del>- </del>
	b	ļ —	<del></del>			<del></del>
	C		<del></del>	<del> </del>	<del></del>	<del></del>
	d		<del></del>	<del>                                     </del>		- <del> </del>
	e	ì		1		1
10	Subtatal Add calumns (b) (d) and (a)					
	Subtotal. Add columns (b), (d), and (e)				10	
13	Total. Add line 12, columns (b), (d), and (e)				13	
<b>13</b> (See	<b>Total.</b> Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation	is.)			13	
13 See Pa	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		importantly to the
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to table 1	 ns.) Accomplishm	ent of Exemp	t Purposes		importantly to the uctions.)
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp	t Purposes		importantly to the actions.)
13 (See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to table 1	 ns.) Accomplishm	ent of Exemp	t Purposes		importantly to the uctions.)
13 (See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to table 1	 ns.) Accomplishm	ent of Exemp	t Purposes		importantly to the actions.)
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to table 1	 ns.) Accomplishm	ent of Exemp	t Purposes		importantly to the actions.)
13 (See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to table 1	 ns.) Accomplishm	ent of Exemp	t Purposes		importantly to the actions.)
13 (See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to table 1	 ns.) Accomplishm	ent of Exemp	t Purposes		importantly to the
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to table 1	 ns.) Accomplishm	ent of Exemp	t Purposes		importantly to the uctions.)
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to table 1	 ns.) Accomplishm	ent of Exemp	t Purposes		importantly to the uctions.)
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to table 1	 ns.) Accomplishm	ent of Exemp	t Purposes		importantly to the
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to table 1	 ns.) Accomplishm	ent of Exemp	t Purposes		importantly to the
13 (See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to table 1	 ns.) Accomplishm	ent of Exemp	t Purposes		importantly to the actions.)
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to table 1	 ns.) Accomplishm	ent of Exemp	t Purposes		importantly to the actions.)
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to table 1	 ns.) Accomplishm	ent of Exemp	t Purposes		importantly to the actions.)
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to table 1	 ns.) Accomplishm	ent of Exemp	t Purposes		importantly to the actions.)
13 (See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to table 1	 ns.) Accomplishm	ent of Exemp	t Purposes		importantly to the actions.)
13 (See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to table 1	 ns.) Accomplishm	ent of Exemp	t Purposes		importantly to the uctions.)
13 (See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to table 1	 ns.) Accomplishm	ent of Exemp	t Purposes		importantly to the uctions.)
13 (See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to table 1	 ns.) Accomplishm	ent of Exemp	t Purposes		importantly to the uctions.)
13 See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to table 1	 ns.) Accomplishm	ent of Exemp	t Purposes		importantly to the uctions.)
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13 (See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation to table 1	 ns.) Accomplishm	ent of Exemp	t Purposes		importantly to the actions.)

Part	XVII	Information Exempt Or			sfers To and T	ransactio	ns and	Relationsh	ips V	Vith I	Nonch	aritab	le	<u> </u>
	in sec	ne organization of	directly or in	directly e	engage in any of section 501(c)(3)								Yes	No
а			-		a noncharitable									
									• •			1a(1)		<b>✓</b>
		ther assets .										1a(2)	]	✓
		transactions:	1 10									41.41		,
					mpt organization				• •		• •	1b(1)		/
					ble exempt orga				• •		• •	1b(2)		1
					rassets				• •		• •	1b(3)		1
			_								• •	1b(4) 1b(5)	_	<b>√</b>
	•	_			ip or fundraising				• •		• •	1b(6)		<b>∨</b> ✓
_					its, other assets,						• •	1c		1
					s," complete the								fair m	
	value	of the goods, o	ther assets,	or servi	ces given by the ement, show in c	reporting fo	oundation	. If the found	dation	rece	ived le	ss than	fair m	arket
(a) Line	no. (	b) Amount involved	(c) Nan	ne of nonch	antable exempt organ	nzation	(d) Desc	ription of transfe	ers, tran	sactio	ns, and s	haring arr	angeme	ents
N/A		····-			<del></del>						•			
													-	
												-		
								<del></del>						
	descr	foundation dire ibed in section 5 s," complete the	501(c) of the	Code (o	iliated with, or re ther than section	elated to, o 501(c)(3)) (	ne or mo or in secti	re tax-exemon 527? .	ipt org	janiza 	ations · ·	☐ Yes	<b>□</b>	No
		(a) Name of organ			(b) Type o	f organization			(c) Des	criptio	n of relat	ionship		
N/A														
									-		_			
					d this return, including a						my know	ledge and	belief, it	ıs true,
Sign	correc	ct, and complete. Decl	aration of prepar	rer (other tha	ın taxpayer) ıs based on 7	<b>L</b>	of which prep	parer has any kno	wledge.		May the	IRS discu	iss this	return
Here		2/27	7EM	re le	_  2//7	/16 Di	rector				with the	preparer	shown	below
		ature of officer or trus	stee		Date	Title					(See Inst	tructions)?	∟ res[	ואס
Paid		Print/Type preparer	's name		Preparer's signature	•		Date		Chec	k $\square$ rf	PTIN		
Prepa	rer										mployed			
Use C		Firm's name_ ▶							Firm's	EIN Þ				
		Firm's address ▶							Phone	no.				

#### Schedule B

(Form 990, 990-EZ. or 990 F)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

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

Name of the organization **Employer identification number** 20-3102439 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 private foundation ☐ 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions 

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

Name of o	organization		Employer identification number
Part I	Contributors (see instructions). Use duplicate co	pies of Part I if additional space	is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Dennis Edwards  2907 Seminole Street  Miami, FL 33133	\$\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization **Employer identification number** Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) 200 Shares of Common Stock in Vertex Pharmaceuticals 1 24,760 12/28/15 (c) FMV (or estimate) (a) No. (b) (d) from Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions)

	Form 990, 990-EZ, or 990-PF) (2015)		Page 4		
Name of o	rganization		Employer identification number		
Part III	(10) that total more than \$1,000 f	or the year from any one co zations completing Part III, en the year. (Enter this informati	nizations described in section 501(c)(7), (8), er contributor. Complete columns (a) through (e) and neer the total of exclusively religious, charitable, etc., tion once. See instructions.)		
(a) No. from Part I	(b) Purpose of gift (c) Use of gift		t (d) Description of how gift is held		
	(e) Transfer of gift		ift		
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
<u>-</u>	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
	•••••••••••••••••••••••••••••••••••••••				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	***************************************	***************************************			
		***************************************			
-	(e) Transfer of gift				
<u> </u>	Transferee's name, address,		Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				