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OMB No 1545-0052

Department of the Treasury Internal Revenue Service

or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

Return of Private Foundation

Open to Public

Inspection , and ending 12-31-2015 For calendar year 2015, or tax year beginning 01-01-2015 A Employer identification number Name of foundation Medina Family Foundation Inc 27-5019542 BTelephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) 2333 Ponce de Leon Blvd 900 (305) 666-0024 **C** If exemption application is pending, check here City or town, state or province, country, and ZIP or foreign postal code Miami, FL 33134 G Check all that apply Initial return of a former public charity Initial return **D 1.** Foreign organizations, check here Final return Amended return $\textbf{2.} \ \ \text{Foreign organizations meeting the } 85\%$ Name change Address change test, check here and attach computation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation **J**Accounting method IFair market value of all assets at end If the foundation is in a 60-month termination Cother (specify) under section 507(b)(1)(B), check here of year (from Part II, col. (c), (Part I, column (d) must be on cash basis.) line 16) **>\$** 52,756 Part I **Analysis of Revenue and Expenses** Disbursements Revenue and Net investment Adjusted net for charitable (The total of amounts in columns (b), (c), and (d) may not expenses per necessarily equal the amounts in column (a) (see (b) (c) income purposes ıncome books (d) (cash basis only) instructions)) Contributions, gifts, grants, etc , received (attach 1 500.000 2 Check ► ☐ If the foundation is **not** required to attach 3 Interest on savings and temporary cash investments 222 222 2,943 2,943 Dividends and interest from securities Gross rents 5a Net rental income or (loss) b Net gain or (loss) from sale of assets not on line 10 1 6a Revenue b Gross sales price for all assets on line 6a 439,032 Capital gain net income (from Part IV, line 2) . . . Net short-term capital gain . . . 8 Income modifications . . . 10a Gross sales less returns and allowances Less Cost of goods sold b Gross profit or (loss) (attach schedule) c 11 Other income (attach schedule) Total. Add lines 1 through 11 440,970 3,165 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages . . . 15 Pension plans, employee benefits . . Expenses Legal fees (attach schedule). 16a 夗 3,32! 3,325 Accounting fees (attach schedule). . . . b Other professional fees (attach schedule) . 夗 238 238 C Operating and Administrative **17** 1 236 236 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion . 20 Occupancy 21 Travel, conferences, and meetings. 22 Printing and publications . . 囫 85 855 23 Other expenses (attach schedule). 24 Total operating and administrative expenses. Add lines 13 through 23 4.654 4.654 930,850 930,850 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 935,504 4,654 930,850 25 27 Subtract line 26 from line 12 -494,534 Excess of revenue over expenses and disbursements а Net investment income (if negative, enter -0-) Adjusted net income(if negative, enter -0-)

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	(a) BOOK Value 31,731	(B) Book Value 8,965	
	2	Savings and temporary cash investments	13,417	43,791	
	3	Accounts receivable -	13, 117	13,731	.5,.51
	ر	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			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	•	Less allowance for doubtful accounts -			
	8	Inventories for sale or use			
اڇ	9	Prepaid expenses and deferred charges			
Assets	10a	Investments—U S and state government obligations (attach			
	100	schedule)			
	b	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule) 🟲			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	442,807	%	
	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			
		ınstructions Also, see page 1, item I)	487,955	52,756	52,756
	17	Accounts payable and accrued expenses			
اي	18	Grants payable			
<u>\$</u>	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
흘	21	Mortgages and other notes payable (attach schedule)			
-	22	Other liabilities (describe 🟲)			
	23	Total liabilities(add lines 17 through 22)		0	
[ی		Foundations that follow SFAS 117, check here 🕨 🔽			
or Fund Balances		and complete lines 24 through 26 and lines 30 and 31.			
	24	Unrestricted	487,955	52,756	
ထူ	25	Temporarily restricted			
뒴	26	Permanently restricted			
필		Foundations that do not follow SFAS 117, check here 🕨 🦵			
5		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
₹	30	Total net assets or fund balances(see instructions)	487,955	52,756	
	31	Total liabilities and net assets/fund balances(see instructions)	487,955	52,756	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		Total net assets or fund balances at beginning of year—Part II, column ((a), line 30 (must ac	gree	
		with end-of-year figure reported on prior year's return) $\dots \dots$		1	487,955
2		Enter amount from Part I, line 27a		2	-494,534
3		Other increases not included in line 2 (itemize)		% 3	59,335
4		Add lines 1, 2, and 3		4	52,756
5		Decreases not included in line 2 (itemize) ▶		5	
6		Total net assets or fund balances at end of year (line 4 minus line 5)—P	art II, column (b), lı	ne 30 . 6	52,756

the Part VI instructions

Parti	List and describe	the kind(s) of property sold (e g , ehouse, or common stock, 200 sh	real estate,	How acquired P—Purchase (b) D—Donation	(6)	ate acquired no , day, yr)	Date sold (d) (mo , day, yr)	
1a	See Additional Data	Table						
b								
С								
d								
e								
(e)) Gross sales price	Depreciation allow (f) (or allowable)		t or other basis expense of sale			or (loss) (f) minus (g)	
а	See Additional Data	Table						
b								
С								
d								
<u>-</u>					1			
	nnlete only for assets	I showing gain in column (h) and owi	ned by the foundation	n on 12/31/69		Caine (Cal	(h) gain minus	
	·	Adjusted basis	<u> </u>	cess of col (ı)	\dashv .		(h) gain minus it less than -0-) or	
(i)	FMV as of 12/31/69	(j) as of 12/31/69		rcol (j), if any	(I)		(from col (h))	
а	See Additional Data	Table						
b								
С								
d								
e								
3	If gain, also enter in	al gain or (loss) as defined in sect Part I, line 8, column (c) (see inst			3		-62,195	
Part \	Qualification (Under Section 4940(e) for	Reduced Tax or	n Net Investme	nt In	come		
If sectio Was the	n 4940(d)(2) applies, foundation liable for th	e section 4942 tax on the distribu	itable amount of any	year in the base p		e)	┌ Yes ┌ No	
		ot qualify under section 4940(e)						
T E III		runt in each column for each year,	T T T T T T T T T T T T T T T T T T T	ore making any em	ries			
	(a) period years Calendar r tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncha			(d) Distribution ratio (col (b) divided by col (c))		
	2014	505,587		593,534			0 851825	
	2013	912,179		1,193,727			0 764144	
	2012	241,910		1,747,511			0 138431	
	2011	99,500	1	1,835,120			0 054220	
	2010							
2	Totalof line 1, columi	• •		_	2		1 808620	
3	the number of years t	ratio for the 5-year base period—other foundation has been in existen	ce ıf less than 5 yea	rs	3		0 452155	
4		f noncharitable-use assets for 20	•	· · · · ·	4		192,830	
5		e 3			5		87,189	
6		stment income (1% of Part I, line			6			
7					7		87,189	
8	Enter qualifying distr	F	8		930,850			

	990-PF (2015) t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4	4940(e)	. or 4948—se	ee pag	= 18 of	the inst	ructio		age 4
1a	Exempt operating foundations described in section 4940(d)(2), check here		,	\ \					
Ia	and enter "N/A" on line 1	- 1							
	Date of ruling or determination letter			\					
	(attach copy of letter if necessary-see instructions)								
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V	, check	(1				0
	here Fand enter 1% of Part I, line 27b			• •					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organize Part I, line 12, col (b)	zations	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ındatıor	ns only Othe	ers	2				0
3	Add lines 1 and 2				3				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable for	undatıoı	ns only Oth	ers	4				
5	enter -0-) Tax based on investment income. Subtract line 4 from line 3 If zero or less,	enter - (n -		5				0
6	Credits/Payments	circoi (•	3				
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	1	3,681					
b	Exempt foreign organizations—tax withheld at source	6b		3,001					
c	Tax paid with application for extension of time to file (Form 8868)	6c							
d	Backup withholding erroneously withheld	6d							
7	Total credits and payments Add lines 6a through 6d			- 1	7			-	3,681
8	Enter any penalty for underpayment of estimated tax. Check here if Form			_	8				,001
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 amou				10				3,681
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	3,681	Refunded		11				,001
	t VII-A Statements Regarding Activities	3,001	- Rei allaca			<u> </u>			
1a	During the tax year, did the foundation attempt to influence any national, stat	e orlo	cal legislatio	n or di	d			Yes	No
	it participate or intervene in any political campaign?	, 01 10	carregistatio	,	u		1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for	nolitica	al nurnosas i	· · 'caa In	• • etructi				
_	for definition)?					-	1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activitie	s and co	opies of any i	materia	ls	-			
	published or distributed by the foundation in connection with the activities.		-,,, .						
С	Did the foundation file Form 1120-POL for this year?						1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) impo			r					
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers								
e	Enter the reimbursement (if any) paid by the foundation during the year for po				osed				
	on foundation managers 🕨 \$								
2	Has the foundation engaged in any activities that have not previously been re	eported	to the IRS?				2		No
	If "Yes," attach a detailed description of the activities.								
3	Has the foundation made any changes, not previously reported to the IRS, in	its gov	erning instru	ıment,	articles	5			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a con	formed	copy of the c	hanges			3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more	during t	the year?.				4a		No
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 d	urıng th	e year?				5		No
	If "Yes," attach the statement required by General Instruction T.								
6	Are the requirements of section 508(e) (relating to sections 4941 through 4	945)sa	atisfied eithe	r					
	By language in the governing instrument, or								
	By state legislation that effectively amends the governing instrument so t	hat no r	mandatory d	irectio	ns				
	that conflict with the state law remain in the governing instrument? . $$.						6	Yes	
7	Did the foundation have at least $$5,000$ in assets at any time during the year	r? <i>If "Ye</i>	s," complete	Part II	, col. (c),			
	and Part XV.						7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered	(see in	structions)						
	▶ <u>FL</u>								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 9								
	General (or designate) of each state as required by General Instruction G? If						8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the		_						
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see ins	tructions for	Part X	1 A) 3		^		N:-
10	If "Yes," complete Part XIV		h a cab = ded	lict.	• •		9	\vdash	No
10		•		_			10	Yes	
	and addresses.							1 63	

Pai	t 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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►N/A			
14	The books are in care of ►MANUAL D MEDINA Telephone no ►(305)) 375	-6000	
	Located at 2333 Ponce de Leon Blvd Coral Gables FL ZIP +4 33134			
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			Yes	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	res	No No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	10		NO
	Accounts (FBAR) If "Yes", enter the name of the foreign country			
Dai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
Fal	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1.	During the year did the foundation (either directly or indirectly)		165	NO
14	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V 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)? Yes V No			
	(6) A gree 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 any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	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		No
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? Yes ✓ No			
	If "Yes," list the years 🕨 20 , 20 , 20 , 20			
b	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 all years listed, answer "No" and attach statement—see instructions)	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			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
L				
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		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	+-	No
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		No

Form	990-PF (2015)								Page 6
Pa	rt VII-B Statements Rega	rdii	ng Activities for	· Wł	nich Form 4720	May	y Be Required <i>(Cont</i>	inue	ed)
5a	During the year did the foundatio	п рау	or incur any amour	t to					
	(1) Carry on propaganda, or othe	rwise	attempt to influenc	e leg	ıslatıon (section 49	45(e	e)) [?]	No No	
	(2) Influence the outcome of any	spec	ific public election	(see	section 4955), or to	car	•		
	on, directly or indirectly, any	vote	registration drive?			•			
	(3) Provide a grant to an individu						「 Yes ▽	No	
	(4) Provide a grant to an organiza				· -			_	
	in section 4945(d)(4)(A)? (s		•			•	\ Yes \	/ No	
	(5) Provide for any purpose other						F F	-	
	educational purposes, or for t							' No	
b	If any answer is "Yes" to 5a(1)-(Et.
	Regulations section 53 4945 or								5b
	Organizations relying on a currer								
С	If the answer is "Yes" to question								
	tax because it maintained expend					•	Yes	NO	
c -	If "Yes," attach the statement requ								
6a	Did the foundation, during the year a personal benefit contract?							- Na	
Ь	Did the foundation, during the year						, ,		6b No
U	If "Yes" to 6b, file Form 8870.	п, ра	y premiums, unecci	y 01 1	manectry, on a perso	Jilai	belletit contract	•	OB NO
7a	·	vac t	ao foundation a part	v to :	a prohibited tay chol	tort	ransaction? TYes	- No	
	At any time during the tax year, we If yes, did the foundation receive						·		7b
							n Managers, Highly		1 1
Pa	and Contractors	. 0.	incers, Director	3, II	rustees, rounde	1110	ii Hallagers, Iligiliy	rait	i Lilipioyees,
1	List all officers, directors, trustee	s, fo	ındation managers a	and t	heir compensation (see i	instructions).		
			Title, and average	(c)	Compensation(If		(d)		_
	(a) Name and address		hours per week	` `	not paid, enter	ء ا	Contributions to employee benefit plans		Expense account, other allowances
		(b)	devoted to position		-0-)		d deferred compensation	(6)	other anowances
МЕЦ	SA MEDINA	P/D			0		0		0
	1 SW 56 Court	10 (00						
-	nı,FL 33143								
	TE MEDINA	VP/ 2 00			0		0		0
	3 Ponce de Leon Blvd I Gables, FL 33134	"	,						
	JEL D MEDINA JR	S/D			0		0		0
527	8th Ave S 303	1 00			· ·		· ·		Ŭ
	nville,TN 37203								
MANU	EL D MEDINA	D			0		0		0
	3 Ponce de Leon Blvd	5 00)						
	I Gables, FL 33134			<u> </u>					
	Compensation of five highest-paid	emp	oloyees (other than	thos	e included on line 1– 	-see	1	nter "	NONE."
	(a)		Title, and aver	_			Contributions to employee benefit		Expense account,
Nar	ne and address of each employee more than \$50,000	oala	hours per we (b) devoted to pos		(c) Compensation	n	plans and deferred	(e)	other allowances
			(2) 4010004 00 poo				(d) compensation		
NOV	E								
Tota	I number of other ampleyees not		+ = 0 000				I	ı	

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Part VIII Information About Officers, Directors, Trust and Contractors (continued)	ees, Foundation Managers, Higl	hly Paid Employees,
3 Five highest-paid independent contractors for professional services	(see instructions). If none, enter "NONE	" <u>. </u>
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services.		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rel organizations and other beneficiaries served, conferences convened, research papers produced.		Expenses
1	,	
2		
3		
4		
Part IX-B Summary of Program-Related Investments	(see instructions)	
Describe the two largest program-related investments made by the foundation during	•	Amount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		P

Part X Minimum Investment Return

Ра	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
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	73,662
b	Average of monthly cash balances	1b	122,105
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	195,767
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	195,767
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	2,937
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	192,830
6	Minimum investment return.Enter 5% of line 5	6	9,642
Pai	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► □ and do not complete this part.)	taın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	9,642
2a	Tax on investment income for 2015 from Part VI, line 5 2a		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	9,642
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	9,642
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	9,642
Par	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	930,850
	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	930,850
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	930,850
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

Ρ	art XIIII Undistributed	Income (see instr	uctions)				
			(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015	
1	Distributable amount for 2015	from Part XI, line 7					9,642
2	Undistributed income, if any, a	s of the end of 2015					
а	Enter amount for 2014 only.						
Ь	Total for prior years 20	, 20 <u> </u> , 20 <u> </u>					
3	Excess distributions carryove						
а	From 2010						
	From 2011	59,665					
	From 2012	154,914					
	From 2013	912,536					
е	From 2014	476,236					
f	Total of lines 3a through e		1,603,351				
	Qualifying distributions for 201						
	XII, line 4 🕨 \$						
а	Applied to 2014, but not more						
	Applied to undistributed incom						
	(Election required—see instruc						
C	Treated as distributions out of	corpus (Election					
	required—see instructions).						
d	Applied to 2015 distributable	amount					9,642
е	Remaining amount distributed	out of corpus	921,208				
5	Excess distributions carryove	r applied to 2015					
	(If an amount appears in columi same amount must be show	. ,,					
6	Enter the net total of each co- indicated below:	lumn as					
а	Corpus Add lines 3f, 4c, and 4	e Subtract line 5	2,524,559				
b	Prior years' undistributed incor						
	line 4b from line 2b						
С	Enter the amount of prior years						
	income for which a notice of de been issued, or on which the se	•					
	tax has been previously asses	, ,					
d	Subtract line 6c from line 6b 1						
	—see instructions						
е	Undistributed income for 2014	Subtract line					
	4a from line 2a Taxable amou						
_	instructions						
t	Undistributed income for 2016 lines 4d and 5 from line 1. This						
	be distributed in 2015						0
7	Amounts treated as distributio						
	corpus to satisfy requirements	ımposed by					
	section 170(b)(1)(F) or 4942(
	be required - see instructions)						
8	Excess distributions carryove						
_	applied on line 5 or line 7 (see						
9	Excess distributions carryover Subtract lines 7 and 8 from line		2,524,559				
10	Analysis of line 9						
	Excess from 2011	59,665					
	Excess from 2012	154,914					
c	Excess from 2013	912,536					
d	Excess from 2014	476,236					
е	Excess from 2015	921,208					

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

c Any submission deadlines

factors

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 930,850 **b** Approved for future payment

Part XVI-A Analysis of Income-Produc	ing Activitie	:S			Page 1 2
Enter gross amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	n 512, 513, or 514	(e) Related or exemp function income
1 Program service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	(See Instructions)
a b					
c					
e					
g Fees and contracts from government agencies Membership dues and assessments					
investments			14	222	
Dividends and interest from securities 6 Net rental income or (loss) from real estate			14	2,943	
a Debt-financed propertyb Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income			18	-62,195	
Net income or (loss) from special events Gross profit or (loss) from sales of inventory			10	-02,193	
L Other revenue a					
b					
d					
2 Subtotal Add columns (b), (d), and (e). 3 Total.Add line 12, columns (b), (d), and (e).			:	-59,030 13	l .
(See worksheet in line 13 instructions to verify a Part XVI-B Relationship of Activities to		plishment of I	Exempt Purpos	es	
Explain below how each activity for whether the accomplishment of the foundation's instructions)					

Part XVII	Information Re Noncharitable				actio	ns and Relation	ships With		•	_
1 Did the oi	rganization directly or in	•			h any o	ther organization de	escribed in		[
	01(c) of the Code (othe	er than section	n 501(c)(3) o	rganızatıons) o	rın sec	tion 527, relating to	political		Yes	No
organızat					_					
	from the reporting foun									
(1) Cash										No
	rassets							1a(2)		No
b Other tra								41.443		
• •	s of assets to a noncha	•	-					1b(1)		No
	hases of assets from a							1b(2)		No
	al of facilities, equipme									No
	bursement arrangemen							1b(4)		No
									-+	
• •		•	-							
_			•							NO
of the god	ds, other assets, or se	rvices given b	y the reporti	ng foundation I	f the fo	undation received le	ess than fair marke	et value	ue	
(a) Line No	(b) Amount involved	(c) Name of n	oncharitable exe	mpt organization	(d)	Description of transfers	, transactions, and sha	ırıng arrar	ngemen	its
described		ne Code (othe						. ┌ Үe	s 🔽	Νο
2 11 1 00,	(a) Name of organization		(b) Type of organiza	tion	(0	c) Description of relation	onship		
Sign the	best of my knowledge a rmation of which prepar	ınd belief, it is	true, correct	, and complete		ration of preparer (o	ther than taxpaye	r) ıs bas	ed on	all
Here	****			2016-05-11	_ k	*****	return			
	Signature of officer or ti	rustee		Date	<u> </u>	Tıtle	below	· · ·		
	Print/Type preparer's JOHN L HOFMANN		(c) Description of relationship e that I have examined this return, including accompanying schedules and statements, and to f, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all ny knowledge 2016-05-11 Date Title Preparer's Signature Preparer's Signature (c) Description of relationship May the IRS discuss this return with the preparer shown below (see Instr.)? Yes No Firm's EIN F							
	Firm's name ▶		1				Firm's EIN ▶	1		
Paid	J L Hofmann & Assoc	:ıates PA								
Preparer	Firm's address 🕨						Phone no			
Use Only		4B Coral Gal	oles.FL 3314	46				24		
			, . = 001							

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr)	(d) Date sold (mo , day, yr)
4,803 Shares of Western Asset Variable RT	Р	2013-05-08	2015-03-06
2,300 Shares of Western Asset Variable RT	Р	2013-05-09	2015-03-06
3,074 Shares of Shares of Western Asset Variable RT	Р	2013-05-13	2015-03-06
2,528 Shares of Western Asset Variable RT	Р	2013-05-14	2015-03-06
5,500 Shares of Western Asset Variable RT	Р	2013-05-15	2015-03-06
295 Shares of Western Asset Variable RT	Р	2013-05-16	2015-03-06
8,095 Shares of Western Asset Variable RT	Р	2013-05-16	2015-03-09

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
79,203	0	90,096	-10,893
37,928	0	43,146	-5,218
50,691	0	57,918	-7,227
41,688	0	47,613	-5,925
90,697	0	103,944	-13,247
4,865	0	5,574	-709
133,961	0	152,937	-18,976

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets show	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69					
(i) F M V as of 12/31/69	Adjusted basis Excess of col (i) (j) as of 12/31/69 (k) over col (j), if any		col (k), but not less than -0-) or (l) Losses (from col (h))			
0	0	0	-10,893			
0	0	0	-5,218			
0	0	0	-7,227			
0	0	0	-5,925			
0	0	0	-13,247			
0	0	0	-709			
0	0	0	-18,976			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
City Year Miami 44 West Flagler St Suite 500 Miami, FL 33130		PC	EducationalSupportActivities	1,500
Jackson Health Foundation 1501 NW North River Drive Miami, FL 33125		PC	MedicalSupportFoundation	10,000
Camillus House 336 NW 5th Street Miami, FL 33128		PC	CharitableSupportActivities	138,000
Live Like Bella PO Box 161215 Miami, FL 33116		PC	CharitableSupportActivities	5,000
Mıamı Children's Museum 980 MacArthur Causeway Mıamı, FL 33132		PC	Educational Support Activities	10,000
Boys & Girls Club of Miami-Dade 2805 SW 32 Avenue Miami, FL 33133		PC	CharitableSupportActivities	5,000
Endeavor Miami 900 Broadway Ste 301 NYC,NY 10003		PC	CharitableSupportActivities	75,000
Leadership Learning Center 1366 NW 1st Street Miami, FL 33125		PC	Educational Support Activities	10,000
FIU Foundation Inc 11200 SW 8 St Miami, FL 33174		PC	Educational Support Activities	250,000
Miami City Ballet 2200 Liberty Avenue Miami Beach,FL 33139		PC	CharitableSupportActivities	10,000
Junior League of Miami 713 Biltmore Way Miami, FL 33134		PC	CharitableSupportActivities	1,750
Informed Families 2490 Coral Way Miami, FL 33145		PC	CharitableSupportActivities	2,600
Mıamı Children's Health Foundation 3100 SW 62 Avenue Mıamı,FL 33155		PC	MedicalSupportFoundation	5,000
MCH Foundation 3100 SW 62 Avenue Miami, FL 33155		PC	MedicalSupportFoundation	10,000
The Seed School of Miami Foundation LLC 8004 NW 154th St 38 Miami Lakes,FL 33016		PC	Educational Support Activities	300,000
Total				930,850

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient		Foundation	Purpose of grant or	A mount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
St Philip's Episcopal SHA 1121 Andalusia Ave Coral Gables,FL 33134		PC	CharitableSupportActivities	6,000
United Way of Miami-Dade 3250 SW 3rd Ave Miami,FL 33129		PC	CharitableSupportActivities	10,000
Voices for Children Foundation Inc 601 NW 1st Ct 10 Miami,FL 33136		PC	CharitableSupportActivities	10,000
Shake-a-leg 2620 S Bayshore Dr Coconut Grove,FL 33133		PC	CharitableSupportActivities	15,000
The Children's Movement of Florida 3250 SW 3rd Ave Miami, FL 33129		PC	CharitableSupportActivities	25,000
Baptist Health South Florida Foundation 8900 North Kendall Drive Miami,FL 33176		PC	MedicalSupportFoundation	20,000
American Jewish Community 9200 South Dadeland Blvd Suite 500 Miami,FL 33156		PC	CharitableSupportActivities	10,000
Starbot Technologies 7028 SW 46th St Miami,FL 33155		PC	EducationalSupportFoundation	1,000
Total			▶ 3a	930,850

TY 2015 Accounting Fees Schedule

Name: Medina Family Foundation Inc

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
J L Hofmann & Assoc Accounting	3,325	3,325		

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Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2015 Gain/Loss from Sale of Other Assets Schedule

Name: Medina Family Foundation Inc

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
4,803 shares of Western Asset Variable RT	2013-05	Purchased	2015-03		79,203	90,096	Cost		-10,893	
2,300 shares of Western Asset Variable RT	2013-05	Purchased	2015-03		37,928	43,146	Cost		-5,218	
3,074 shares of Western Asset Variable RT	2013-05	Purchased	2015-03		50,691	57,918	Cost		-7,227	
2,528 shares of Western Asset Variable RT	2013-05	Purchased	2015-03		41,688	47,613	Cost		-5,925	
5,500 shares of Western Asset Variable RT	2013-05	Purchased	2015-03		90,697	103,944	Cost		-13,247	
295 shares of Western Asset Variable RT	2013-05	Purchased	2015-03		4,865	5,573	Cost		-708	
8095 shares of Western Asset Variable RT	2013-05	Purchased	2015-03		133,960	152,937	Cost		-18,977	

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TY 2015 Investments - Other Schedule

Name: Medina Family Foundation Inc

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
Western Asset Variable RT			

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TY 2015 Other Expenses Schedule

Name: Medina Family Foundation Inc

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Computer and Internet	855	855		

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TY 2015 Other Increases Schedule

Name: Medina Family Foundation Inc

Description	Amount
Loss realized on sale of securities	59,335

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TY 2015 Other Professional Fees Schedule

Name: Medina Family Foundation Inc

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Citibank Investment	238	238		

TY 2015 Taxes Schedule

Name: Medina Family Foundation Inc

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Licenses and permits	236	236		

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OMB No 1545-0047

0045

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

2015

Employer identification number

Medina	a Family Foundation In	С				
Organ	ization type (check or	27-5019542 In type (check one)				
Filers	of:	Section:				
Form 9	90 or 990-EZ	☐ 501(c)() (enter number) organization				
		☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		□ 527 political organization				
Form 9	90-PF	√ 501(c)(3) exempt private foundation				
		☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
Gener		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to any one contributor Complete Parts I and II See instructions for determining a				
Specia	al Rules					
Γ	under sections 509(a) received from any one	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₈ % suppl(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Partile contributor, during the year, total contributions of the greater of (1) \$5,000 or Form 990-EZ, line 1 Complete Parts I and II	ll, line 13, 16a, or 16b, and that			
Γ	during the year, total of	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received contributions of more than \$1,000 exclusively for religious, charitable, scientific, cruelty to children or animals. Complete Parts I, II, and III				
Γ	during the year, contri this box is checked, e purpose Do not comp	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received ibutions exclusively for religious, charitable, etc., purposes, but no such contributer here the total contributions that were received during the year for an excludete any of the parts unless the General Rule applies to this organization becatic, contributions totaling \$5,000 or more during the year	outions totaled more than \$1,000 lf usively religious, charitable, etc, ause it received nonexclusively			

990-EZ, or 990-PF)

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of 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

Name of organization Medina Family Foundation Inc Employer identification number 27-5019542

Part I	Contributors (see instructions) Use duplicate copies of Part I if	additional space is needed		
(a) <u>N</u> o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	MANUEL D MEDINA		Person Payroll	r ⊢
	2333 Ponce de Leon Blvd Apt 900 Miami, FL33134	\$ 500,000	Noncash (Complete Part II fo	r noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of conti	ibution
			Person	Γ
		\$	Payroll	Γ
			Noncash	Γ
			(Complete Part II fo	r noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contr	ibution
			Person	Г
		\$	Payroll	Γ
	-		Noncash	Γ
			(Complete Part II fo	r noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contr	ibution
			Person	Г
		\$	Payroll	Γ
			Noncash	Γ
			(Complete Part II fo	r noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contr	ibution
			Person	Γ
		\$	Payroll	_ _
			Noncash (Complete Part II fo	r noncash
(a)	(b)	(c)	contributions)	
No.	Name, address, and ZIP + 4	Total contributions	Type of contr	ibution
			Person	Г
		\$	Payroll	Γ
			Noncash	Г
			(Complete Part II fo	

lame of organizati		Employer identification number 27-5019542		
ledına Famıly Foui	ndation INC			
	Noncash Property	•		
(a) No.from Part I	(see instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		<u> </u>		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		<u> </u>		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		<u> </u>		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
-				

Schedule B (Form 990, 990-EZ, or 990-PF)	(2015)	
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Page 4

Name of organization Medina Family Foundation Inc			Employer identification number 27-5019542	
total more line entry of \$1,000	Iy religious, charitable, etc., contribute than \$1,000 for the year from any of For organizations completing Part or less for the year. (Enter this informate copies of Part III if additional space is	one contributor. Complete column III, enter the total of <i>exclusively</i> re rmation once. See instructions.) •	ns (a) through (e) and the following eligious, charitable, etc., contributions	
(a) No.from Part I	(b) Purpose of gift (c) Use of gift		(d) Description of how gift is held	
= = = = = = = = = = = = = = = = = = = =	Transferee's name, address, an	(e) Transfer of gift ad ZIP4 Re	lationship of transferor to transferee	
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
· -	Transferee's name, address, an	(e) Transfer of gift ad ZIP4 Re	lationship of transferor to transferee	
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
· -	Transferee's name, address, an	(e) Transfer of gift Re	lationship of transferor to transferee	
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
· -	Transferee's name, address, an	(e) Transfer of gift ad ZIP4 Re	lationship of transferor to transferee	
<u> </u>				