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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

For	calend	dar year 2015 or tax year beginning ,	and ending				
Na	me of fo	undation			A Emple	oyer identification number	
P	ewk	es Family Foundation			51	-0390209	
		d street (or P O box number if mail is not delivered to street address)	Ro	oom/suite		hone number (see instruction:	
6	001	Highway A1A, PMB 8307				2-234-1596	•
		, state or province, country, and ZIP or foreign postal code			C If exer	mption application is pending,	aback have
_ <u>v</u>	ero	Beach FL 32963-1	.014		C II exe	inpuon application is pending,	Clieck fiele
G	Check a	all that apply 🔲 Initial return 🔲 Initial retui	rn of a former public cha	arıty	D 1 Fc	reign organizations, check he	ere •
		Final return Amended	return		2 Fc	oreign organizations meeting t	he
		Address change Name cha	inge		85	% test, check here and attach	computation >
H	Check t	ype of organization X Section 501(c)(3) exempt private	foundation		E If priva	ate foundation status was tem	ninated under
	Section	1 4947(a)(1) nonexempt charitable trust Other taxable	le private foundation		sectio	n 507(b)(1)(A), check here	<b>•</b> _
I F	aır mar	ket value of all assets at J Accounting method	X Cash Acc	rual	F If the t	foundation is in a 60-month te	rmination
e	nd of ye	ear (from Part II, col (c), Other (specify)			under	section 507(b)(1)(B), check h	ere ►
lır	ne 16)	▶ \$ 94,565 (Part I, column (d) must I	be on cash basis)			<u>.</u>	
P	art I	Analysis of Revenue and Expenses The total of	(a) Revenue and	(b) Net inv	estment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	inco		income	purposes
	1	Contributions, gifts, grants, etc , received (attach schedule)	100,000		-		(cash basis only)
	2	Check ► If the foundation is <b>not</b> required to attach Sch B	250,000			<u>.</u>	
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	4		4	4	
	5a	Gross rents				<u> </u>	
a)	b	Net rental income or (loss)					
ž	6a	Net gain or (loss) from sale of assets not on line 10				1	
ē	b	Gross sales price for all assets on line 6a					
Revenue	7	Capital gain net income (from Part IV, line 2)		-	0		
	8	Net short-term capital gain				0	
	9	Income modifications					
	10a	Gross sales less returns and allowances				<u>"</u>	
	b	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12_	Total. Add lines 1 through 11	100,004		4	4	
w	13	-Gompensation of officers, directors, trustees, etc	0				
sei	14	Other employee salaries and wages					
sesuec	15	Pension plans, employee benefits					
МX	16a	Legal fees (attach schedule) See Stmt 1 Accounting fees (attach schedule) Stmt 2	1,040		1,040		
a) LI	þa		3,125		3,125	3,125	
Ě	ļţ	Other professional fees (attach schedule)					
tra	17	Interest		ļ <u>.</u>			
ĬŠ.	18	Taxes (attach schedule) (see instructions)				<u> </u>	
Ē	19	Depreciation (attach schedule) and depletion		ļ			
Ď	20	Occupancy					
and Administrative	21	Travel, conferences, and meetings		ļ			·
a	22	Printing and publications	470	ļ. <u>.</u>			
пg	23	Other expenses (att sch) Stmt 3	470		150	150	
ati	24	Total operating and administrative expenses.	4 635		4 315	4 215	
Operating a		Add lines 13 through 23	4,635		4,315	4,315	
ŏ	25	Contributions, gifts, grants paid	32,600		4 315	4 355	32,600
	26	Total expenses and disbursements. Add lines 24 and 25	37,235	<u> </u>	4,315	4,315	32,600
	27	Subtract line 26 from line 12	62 760				
	l a	Excess of revenue over expenses and disbursements	62,769		0	-	
	b	Net investment income(if negative, enter -0-)  Adjusted net income(if negative, enter -0-)	-		U	0	
	ıc	Autusted het income(ii negative, enter -U-)	1	ı		ı U	ı

51-0390209 Bewkes Family Foundation Page 2 Form 990-PF (2015) End of year Beginning of year Attached schedules and amounts in the description column Part li Balance Sheets 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 31,796 94,565 94,565 2 Savings and temporary cash investments 3 Accounts receivable ▶ Less allowance for doubtful accounts ▶ Pledges receivable ▶ Less allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see Other notes and loans receivable (att schedule) 7 0 Less allowance for doubtful accounts ▶ 8 Inventories for sale or use Prepaid expenses and deferred charges Investments - U S and state government obligations (attach schedule) 10a b Investments - corporate stock (attach schedule) Investments - corporate bonds (attach schedule) C Investments - land, buildings, and equipment basis 11 Less accumulated depreciation (attach sch.) 12 Investments - mortgage loans 13 Investments - other (attach schedule) Land, buildings, and equipment basis 14 Less accumulated depreciation (attach sch.) ) 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 31,796 94,565 94,565 instructions Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule) 21 ) 22 Other liabilities (describe 0 0 Total liabilities (add lines 17 through 22) ► X Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 31,796 94,565 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Assets or Fund Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds 27 Paid-in or capital surplus, or land, bldg, and equipment fund 28 Retained earnings, accumulated income, endowment, or other funds 29 31,796 94,565 Net. Total net assets or fund balances(see instructions) 30 31 Total liabilities and net assets/fund balances(see 31,796 94,565 instructions) 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 agree with 31,796 end-of-year figure reported on prior year's return) 62,769 2 Enter amount from Part I, line 27a 2 3

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4

5

6

94,565

94,565

3 Other increases not included in line 2 (itemize) ▶

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

5 Decreases not included in line 2 (itemize)

4 Add lines 1, 2, and 3

Part IV Capital Gains a	nd Losses for Tax on Investme	nt Income			age c
(a) List and des	scribe the kind(s) of property sold (e.g., real estate, warehouse, or common stock, 200 shs. MLC Co.)		(b) How acquired P Purchase D Donation	(c) Date acc	
1a N/A				•	
b					
С				_	
d		•			
е		T	<u> </u>		
(e) Gross sales pnce	(f) Depreciation allowed (or allowable)		or other basis ense of sale		(h) Gain or (loss) (e) plus (f) minus (g)
a					
b					
С			· <b></b>		
_ d					
Complete only for accept above		-1-1			
Complete only for assets snowing	g gain in column (h) and owned by the fou				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 less than -0-)or Losses (from col. (h))
_ a			- <del></del>		
_ b			<del></del>		
<u>c</u>				· · · · · · · · · · · · · · · · · · ·	_
d					
е	<u> </u>		<del></del>		
2 Capital gain net income or (net ca	apital loss)  If gain, also enter in If (loss), enter -0- in	•		2	,
, , ,	ss) as defined in sections 1222(5) and (6) column (c) (see instructions). If (loss), en	ter -0- ın			
Part I, line 8				3	
•	nder Section 4940(e) for Reduce			е	
(For optional use by domestic private	foundations subject to the section 4940(a	) tax on net investme	ent income)		
If section 4940(d)(2) applies, leave th	is part blank				
	ion 4942 tax on the distributable amount of	• •	se period?		Yes X No
<u></u>	ify under section 4940(e) Do not complete				
	each column for each year, see the instruc	tions before making	any entries	— т	(A)
(a) Base period years	(b) Adjusted qualifying distribution:	s Not valu	(c) ue of noncharitable-use asse	de l	(d) Distribution ratio
Calendar year (or tax year beginning	"'7				(col (b) divided by col (c))
2014		,150	51,		1.550805
2013		, 355 , 690	38, 74,		3.601463
2012			74,		1.612247 0.821555
2011		,394	102,		0.821333
2010	44	,400	102,	223	0.434343
2 Total of line 1, column (d)				2	8.020415
	5-year base period – divide the total on lin	e 2 by 5, or by the			
number of years the foundation h	ias been in existence if less than 5 years			3	1.604083
4 Enter the net value of noncharital	ble-use assets for 2015 from Part X, line 5	5		4	45,530
5 Multiply line 4 by line 3				5	73,034
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)			6	
7 Add lines 5 and 6				7	73,034
8 Enter qualifying distributions from	n Part XII, line 4			8	32,600
If line 8 is equal to or greater that Part VI instructions	n line 7, check the box in Part VI, line 1b, a	and complete that pa	rt using a 1% tax rate	See the	

Form	990-PF (2015) Bewkes Family Foundation 51-0390209			Р	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				
	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)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				C
3	Add lines 1 and 2				
4	Subtitle 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-				C
6	Credits/Payments				
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 790				
b	Exempt foreign organizations – tax withheld at source				
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				<u> 790</u>
8	Enter any penalty for underpayment of estimated tax. Check here				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				<u> 790</u>
11	Enter the amount of line 10 to be Credited to 2016 estimated tax▶ 790 Refunded ▶ 11				
<u>Pa</u>	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?	ļ	1a		X
þ	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				ŀ
	published or distributed by the foundation in connection with the activities				۱
С	Did the foundation file Form 1120-POL for this year?	-	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				
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?	/A	4a		
b		/ <b>A</b>	4b		х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If "Yes " attack the statement required by Contraction T.	-	5		<u> </u>
•	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 language in the offsetively emends the governing instrument as that no mandatory directions that				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that  conflict with the state law remains the governing instrument?		6	X	
7	conflict with the state law remain in the governing instrument?  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	ł	7	X	
_	Enter the states to which the foundation reports or with which it is registered (see instructions)	ŀ			
8a	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	X	_
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	l			
	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"	ł			
	complete Part XIV	}	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses		10		X

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

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 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?

foundation had excess business holdings in 2015)

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X

N/A

3b

4a

Form 990-PF (2015)

orm	990-PF (2015) <b>Bewkes</b>	Family	Foundation		<u> 390209                                   </u>			Page <b>6</b>
	rt VII-B Statements	Regarding	<b>Activities for Which Forr</b>	n 4720 May Be Red	quired (contin	ued)		
5a	During the year did the founda							· ·
	(1) Carry on propaganda, or o	otherwise attern	pt to influence legislation (section	1 4945(e))?	Y	es 🛚 X No		
			olic election (see section 4955), o					
	directly or indirectly, any v	oter registration	n drive?		Y	'es 🗓 No		
			study, or other similar purposes	>	Y	'es 🗓 No		
			han a charitable, etc , organizatio					
	section 4945(d)(4)(A)? (se				Y	es 🗓 No		
	(5) Provide for any purpose of	ther than religio	ous, charitable, scientific, literary,	or educational				
	purposes, or for the preve	ntion of cruelty	to children or animals?		_ Y	es 🗓 No		
b	If any answer is "Yes" to 5a(1)	)–(5), dıd <b>any</b> o	f the transactions fail to qualify ur	der the exceptions desc	ribed in			
	Regulations section 53 4945 o	or in a current n	otice regarding disaster assistand	ce (see instructions)?		N/A	5b	
	Organizations relying on a cur	rent notice rega	arding disaster assistance check	here		<b>▶</b> □		
С	If the answer is "Yes" to quest	ion 5a(4), does	the foundation claim exemption (	from the tax		_		
	because it maintained expend	iture responsib	lity for the grant?		N/A 🗌 Y	es No		
	If "Yes," attach the statement	required by Re	gulations section 53 4945–5(d)					
6a	Did the foundation, during the	year, receive a	ny funds, directly or indirectly, to	pay premiums				
	on a personal benefit contract	?			Y	'es 🛚 X No		
b	Did the foundation, during the	year, pay prem	iums, directly or indirectly, on a p	ersonal benefit contract	7		6b	X
	If "Yes" to 6b, file Form 8870							
7a	At any time during the tax year	r, was the foun	dation a party to a prohibited tax :	shelter transaction?	_ Y	'es X No		
b	If "Yes," did the foundation rec	eive any proce	eds or have any net income attrib	outable to the transaction	?	N/A	7b	
Pa	art VIII Information A	About Office	ers, Directors, Trustees, I	Foundation Manag	ers, Highly Pa	aid Employee	s,	
	and Contract	ors			_			
1 L	ist all officers, directors, tru	stees, founda	tion managers and their comp	ensation (see instruct	tions).		T	
				(b) Title, and average	(c) Compensation	(d) Contributions to	(=) Evn	onno account
		(a) Name and addre	ess	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred		ense account, allowances
				devoted to position	——————————————————————————————————————	compensation		
Ε.	Garrett Bewkes, Jr.		Vero Beach	Pres. Treas.				
51	Marker Way,	<del></del>	FL 32963	2.00	0	0	ļ	0
						_	ļ	
							ļ	
							l	
2	Compensation of five higher "NONE."	est-paid emplo	oyees (other than those includ	iea on line 1 – see inst	ructions). It non	e, enter		
	NONE.			1		(d) Contributions to	Γ	
	(a) Name and address of a		more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit		ense account,
	(a) Name and address of e	acii employee palo	more than \$50,000	devoted to position	(c) compensation	plans and deferred compensation	other	allowances
			· · · · · · · · · · · · · · · · · · ·			- Component	<u> </u>	
NC	ONE							
_					<u>.                                    </u>		<del> </del>	
							]	
			<del> </del>				<del>                                     </del>	
				<b> </b>				
_								
			<u> </u>					
Cot =	I number of other employees pa	and over \$50.00	0				<u> </u>	Τ 0

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Part VIII	Information About Officers, Directors, Trustees, Fou and Contractors (continued)	ndation Managers, Highly Paid Em	
3 Five high	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			
Total number of	others recover aver 050 000 for reaf-several convers		
Total number of	others receiving over \$50,000 for professional services		
Part IX-A	Summary of Direct Charitable Activities		<del>,</del>
	s four largest direct charitable activities during the tax year. Include relevant statistical informa other beneficiaries served, conferences convened, research papers produced, etc	ation such as the number of	Expenses
1 N/A			
2			
3			
4		·	
Part IX-B	Summary of Program-Related Investments (see ins	structions)	
	argest program-related investments made by the foundation during the tax year on lines 1 and	12	Amount
1 N/A			
2			
	related investments. See instructions		
3			
Total. Add lines	1 through 3	<b>•</b>	

Pa	rt XIII Undistributed Income (see instructions)				
		(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part XI,	Corpus	Years prior to 2014	2014	2015
	line 7				2,277
2	Undistributed income, if any, as of the end of 2015				
а	Enter amount for 2014 only				
b	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2015				
а	From 2010 40,105				
b	From 2011 57,658				
C	From 2012 116,398	1			
d	From 2013 137, 420	1	1		
е	From 2014 76,598	1			
f	Total of lines 3a through e	428,179			_
4	Qualifying distributions for 2015 from Part XII,				
	line 4 ▶ \$32,600				
	Applied to 2014, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election		:		
	required – see instructions)				0.077
	Applied to 2015 distributable amount	20 222		<u></u>	2,277
e	Remaining amount distributed out of corpus	30,323			
5	Excess distributions carryover applied to 2015				
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a) )  Enter the net total of each column as				
U	indicated below:				
•	Corpus Add lines 3f, 4c, and 4e Subtract line 5	458,502			
	Prior years' undistributed income Subtract	430,302			
Ü	line 4b from line 2b				
c	Enter the amount of prior years' undistributed				
Ů	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				-
	amount – see instructions				
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount – see				
	instructions				
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				
	required—see instructions)				<u> </u>
8	Excess distributions carryover from 2010 not				
	applied on line 5 or line 7 (see instructions)	40,105			
9	Excess distributions carryover to 2016.				
	Subtract lines 7 and 8 from line 6a	418,397			
10	Analysis of line 9				
а	Excess from 2011 57, 658	1			
b	Excess from 2012 116, 398	1			
C	Excess from 2013 137, 420	1			
d	Excess from 2014 76,598				
е	Excess from 2015 30, 323	L			- 000 DE

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

factors N/A

DAA

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3 Grants and Contributions Paid During the	Year or Approved for Fu	ıture Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		·
a Paid during the year See Attached Schedule				
				32,600
Total			▶ 3a	32,600
<ul><li>b Approved for future payment</li><li>N/A</li></ul>				
Total			▶ 3b	

### **Bewkes Family Foundation** EIN Number: 51-0390209

FYE: 12/31/15

### FEDERAL STATEMENTS

### Part XV Supplementary Information

3 Grants and Contributions Paid During the Ye			<del></del>	
Recipient	If recipient is an individual,	1	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			
Alliance to Protect Nantucket	None	Private	Unrestricted	\$5,000
4 Barnstable Road				
Hyannis, MA 02601		1		
American Cancer Society	None	Private	Unrestricted	\$200
PO Box 13600				
Tampa, FL 33681				
Boys & Girls Club of IRC	None	Private	Unrestricted	\$1,000
1729 17th Ave				
Vero Beach, FL 32960-3641				
Class of 74 Memorial Scholarship	None	Private	Unrestricted	\$500
100 W 10th Street, Ste 1109				
Wilmington, DE 19801				
Dasie Bridgewater Hope Ctr	None	Private	Unrestricted	\$700
PO Box 701483		ł		
Wabasso, FL 32970				
Dana Farber Cancer Institute	None	Private	Unrestricted	\$200
450 Brookline Avenue				·
Boston, MA 02215				
Founders Society Northshore Lid Health Sys.	None	Private	Unrestricted	\$500
125 Community Drive				<b>4</b> 000
Great Neck, NY 11021				
Hancock Comm Christmas	None	Private	Unrestricted	\$150
PO Box 1070	140.110	l' ilvato	Omeomotod	<b>\$150</b>
Hancock, MA 01237		1		
Harroson, W. C. 1207				
Harvest Food & Outreach Ctr	None	Private	Unrestricted	\$500
1360 28thSt				
Vero Beach, FL 32960				
Indian River Land Trust	None	Private	Unrestricted	\$1,000
80 Royal Palm Pointe, Ste. 301				
Vero Beach, FL 32960				

**Bewkes Family Foundation** EIN Number: 51-0390209

FYE: 12/31/15

### FEDERAL STATEMENTS

## Part XV Supplementary Information

3. Grants and Contributions Paid During the Year	ar or Approved for Future	Payment		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Indian River Volunteer Ambulance Squad PO Box 2240 Vero Beach, FL 32963	None	Private	Unrestricted	\$100
JI Community Service League 600 Indian Harbor Road Vero Beach, FL 32963	None	Private	Unrestricted	\$1,500
Musician Aid Society of NY PO Box 179 Hamilton, NY 13346	None	Private	Unrestricted	\$1,000
National Park Foundation PO Box 17394 Baltimore, MD 21298-9450	None	Private	Unrestricted	\$100
National Park Foundation 1110 Vermont Ave NW Washington, DC 20005	None	Private	Unrestricted	\$200
New Canaan Congregational Church 23 Park Street New Canaan, CT 06840	None	Private	Unrestricted	\$900
Norwalk Maritime Center 10 N Water Street Norwalk, CT 06854	None	Private	Unrestricted	\$2,500
Outward Bound USA 910 Jackson Street Goldon, CO 80401	None	Private	Unrestricted	\$250
Sankaty Head Foundation PO Box 875 Siasconset, MA 02564	None	Private	Unrestricted	\$250
Save Our Sound 4 Barnstable Road Hyannis, MA 02601	None	Private	Unrestricted	\$8,500

Bewkes Family Foundation EIN Number: 51-0390209

FYE: 12/31/15

### FEDERAL STATEMENTS

## Part XV Supplementary Information

3 Grants and Contributions Paid During the Year	ear 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			
Small Friends on Nantucket, Inc. POBox 2826 Nantucket, MA 02584	None	Private	Unrestricted	\$150
Sconset Trust PO Box 821 Siasconset, MA 02564	None	Private	Unrestricted	\$500
Smile Train PO Box 96231 Washington, D.C. 20090-6231	None	Private	Unrestricted	\$500
The Trustees of Reservations 572 Essex Street Beverly, MA 01915	None	Private	Unrestricted	\$1,000
United Way of Indian River County 1836 14th Avenue Vero Beach, FL 32960	None	Private	Unrestricted	\$2,500
VNA Hospice 1110 35th Lane Vero Beach, Fl 32960	None	Private	Unrestricted	\$1,000
Vero Beach Museum of Art 3001 Riverside Park Drive Vero Beach, FL 32963	None	Private	Unrestricted	\$1,500
WXEL PBS PO Box 6607 West Palm Beach, FL 33405-6607	None	Private	Untestricted	\$200
WPBT2 14901 Northeast 20th Avenue Miami, FL 33181	None	Private	Unrestricted	\$200
Total	L.,		<u> </u>	\$22 GOO
Total				\$32,600

Page **12** 

Part XVI-A Analysis of Income-Producing Ac	tivities				
inter gross amounts unless otherwise indicated		ed business income	Exclude	d by section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
1 Program service revenue					(See instructions )
a	_		<u> </u>		_
b			ļ		
c	_				
d	_		ļ		
e	_				
f	_		ļ		
g Fees and contracts from government agencies			<u> </u>		
2 Membership dues and assessments			ļ <u> —</u>		<u> </u>
3 Interest on savings and temporary cash investments			1 4		
4 Dividends and interest from securities		-	14	4	
5 Net rental income or (loss) from real estate		<u> </u>	<del> </del>		
a Debt-financed property			<del> </del>		
b Not debt-financed property			<del> </del>		-
6 Net rental income or (loss) from personal property			+	-	
7 Other investment income			<del> </del>		
8 Gain or (loss) from sales of assets other than inventory			+		
Net income or (loss) from special events     Cross profit or (loss) from sples of inventory			<del>                                     </del>		
Other revenue. 2  Other revenue. 2			+		
1 Other revenue a			†		
b			<del> </del>		
cd	_	-	<del>                                     </del>	· <del></del>	
e	_		1		
2 Subtotal Add columns (b), (d), and (e)		(		4	0
3 Total. Add line 12, columns (b), (d), and (e)					0 4
See worksheet in line 13 instructions to verify calculations )				_	
Part XVI-B Relationship of Activities to the A	ccomplishme	ent of Exempt Pu	rposes		
Line No. Explain below how each activity for which income accomplishment of the foundation's exempt purp					s )
N/A	0000 (00.15. 0.15.7. 5	, p			- ,
•					
					<del></del>
		·			<del></del>
		- ·-			
					<del>.</del>
	_				<del></del>
ì					
					- 000 PE

Part 2		Information Rega Exempt Organiza	_	nsfers To and	Transaction	s and Relationships V	Vith Noncharitable		<u>.                                     </u>	
1 D				in any of the follow	wing with any other	er organization described			Yes	No
	-	= = = = = = = = = = = = = = = = = = =						<b>i</b>	163	
		•	than section	30 I(C)(3) Organiza	auons) or in secu	on 527, relating to political				
•	ganızatıon			. h						
		m the reporting founda	tion to a none	charitable exempt	organization of					v
	) Cash							1a(1)		<u>X</u>
	) Other as							1a(2)		X
<b>b</b> Ot	her transa	ctions								
(1)	) Sales of	assets to a noncharital	ole exempt or	ganization				1b(1)		<u>-x</u>
(2)	) Purchas	es of assets from a nor	ncharitable ex	empt organization	1			1b(2)		<u>X</u>
(3)	) Rental o	f facilities, equipment, o	or other asset	s				1b(3)		_X_
(4)	) Reimbur	sement arrangements						1b(4)		_X_
(5)	) Loans or	loan guarantees						1b(5)		<u> </u>
(6)	) Performa	ance of services or mei	mbership or fi	undraising solicitat	tions			1b(6)		_X_
c Sh	naring of fa	cilities, equipment, mai	ling lists, othe	er assets, or paid e	employees			1c		_X_
<b>d</b> If t	the answer	to any of the above is	"Yes," compl	ete the following s	chedule Column	(b) should always show the	faır market			
						e foundation received less that				
						e goods, other assets, or ser				
	ine no	(b) Amount involved		e of noncharitable exem			sfers, transactions, and sharing a	rrangeme	nts	
N/A		· · · · · · · · · · · · · · · · · · ·								
.,										
							· · · · · · · · · · · · · · · · · · ·			
		_								
							<del></del>			
			_							
							<del>.</del>			
2a Is	the founda	ation directly or indirect	ly affiliated wi	th, or related to, or	ne or more tax-e	cempt organizations		_		
de	escribed in	section 501(c) of the C	ode (other th	an section 501(c)(	(3)) or in section (	527?		Ye	s X	No
b If	"Yes," con	plete the following sch	edule			· -				
		a) Name of organization		(b) Type of o	organization	(c)	Description of relationship			
N/	A									
							<u>.</u>			
						dules and statements, and to the be which preparer has any knowledge	est of my knowledge and belief, i	i is true,		
	Correct, at	id complete Declaration of p	reparer (outer ur	an taxpayer) is based t	on an imormation of w	mich preparer has any knowledge	May the IRS disc			
Sign			1	,	•	1	with the preparer			¬ I
Here				./	<i>(</i> )	11, 1,	(see instructions	)° <b>X</b>	Yes _	No
		3 Janes	X Me	wheen	// L.3	1/6/16 N P:	res. Treas.			
	Signa	ature of officer or trustee	1		Date	Title				
	<del></del>	pe preparer's name		<del></del>	Preparer's signatu	u 1 1-	Date		Ob :::	$\Box$ .
	''''''	to brahavar a riding		/	1	1011. 15	5510		Check self-em	
Paid	אבת י	P. Curtis, C.I	<b>Σ</b>		/VL	uli mib	05/0	4/16	5511-611	,
Prepare	er 🗀	<u> </u>		ler & Ass	sociates	PA		0123	847	;
Use On	ly Firm's r			al Drive				-274		
	Firm's a		Beach,			. V <u>~</u>	770	2-23		
		AGTO	neacm,	EU 3290	<u> </u>			Eom 99		

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

Department of the Treasury Internal Revenue Service

Name of the organization

### **Schedule of Contributors**

Employer identification number

OMB No 1545-0047

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

Bewkes Family	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 private foundation			
	527 political organization			
Form 990-PF	X 501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a private foundation			
-	501(c)(3) taxable private foundation			
	vered by the General Rule or a Special Rule.			
Note. Only a section 501(c)(7), instructions	(8), or (10) organization can check boxes for both the General Rule and a Special Rule S	ee		
General Rule				
	ng Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,00 roperty) from any one contributor. Complete Parts I and II. See instructions for determining ibutions.			
Special Rules				
regulations under secti 13, 16a, or 16b, and th \$5,000 or <b>(2)</b> 2% of the	scribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> / <sub>3</sub> % support test of tons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II at received from any one contributor, during the year, total contributions of the greater of (1 amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I an scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any or	I, line I) id II		
	year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and II	II		
contributor, during the contributions totaled m during the year for an e	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 totaling \$5,000 or more during the year.			
990-EZ, or 990-PF), but it mus	s not covered by the General Rule and/or the Special Rules does not file Schedule B (Form tanswer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990 certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990).	0-EZ or on its		

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.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	E. Garrett Bewkes, Jr. 51 Marker Way  Vero Beach FL 32963	\$ 100,000	Person X Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		s	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		

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Family Foundation
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7767 Bewkes Family Foundation 51-0390209 FYE: 12/31/2015

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Page 1

	Charitable Purpose	\$	S
	Adjusted Net	1,040	1,040
al Fees		<sub>የ</sub>	w.
ine 16a - Leg	Net Investment	1,040	1,040
Part I, L	Nu	\$	s
- Form 990-PF, Part I, Line 16a - Legal Fees	Total	1,040	1,040
Statement 1 -		<b>የ</b>	\$
State	Description	Robin Lloyd, P.A,	Total

Charitable Purpose	S	\$
Adjusted Net	1,325 1,800	3,125
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Net Investment	1,325 1,800	3,125
<u>I</u>	φ	ς, V
Total	1,325	3,125
	ဟ	
Description	Curtis, Ward & Associates - Tax Elaine Meyers - Secretarial	Total

Statement 3 - Form 990-PF, Part I, Line 23 - Other Expenses

Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees

Charitable Purpose	<b>⇔</b>				\$
Adjusted Net			150		150
ent	⟨ <b>V</b> -		150		150 \$
Net Investment	<sub>የ</sub>				w
Total			150	320	470
<b>-</b>	Ś				w
Description		Expenses	Investment Fees	DE Filing Fee	Total

7767 Bewkes Family Foundation 51-0390209

**Federal Statements** 

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FYE: 12/31/2015

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

Name of Manager	 Amount
E. Garrett Bewkes, Jr.	\$ 100,000
Total	\$ 100,000