

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



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

OMB No 1545-0052

Open to Public Inspection

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.

			and ending		<del></del>		
Nan	ne of fou	undation			A Empl	oyer identification number	
G:	roa	s Family Foundation, Inc.			65	-0644401	
		d street (or P O box number if mail is not delivered to street address)	<del></del>	Room/suite	<del></del>	hone number (see instruction	<u> </u>
		7 Deering Bay Drive, #141	į.	Roomsake		5 - 252 - 2436	5)
		, state or province, country, and ZIP or foreign postal code	<del></del>			<del></del>	. [-
M:	iam	iFL 33158			C If exe	mption application is pending,	check here
3 C	heck a	all that apply Initial return Initial retu	rn of a former public	charity	D 1 F	oreign organizations, check he	ere ►
		Final return Amended	return		2 Fc	oreign organizations meeting t	he
		Address change Name cha	ange		II.	% test, check here and attach	_
1 C	heck t	type of organization X Section 501(c)(3) exempt private	foundation	<del></del>	E If privi	ate foundation status was tern	nunated upder
_			le private foundation		1 .	n 507(b)(1)(A), check here	►
		ket value of all assets at J Accounting method		crual	F If the	foundation is in a 60-month te	rmination
		ear (from Part II, col (c), Other (specify)	<u> </u>	orda.	1	section 507(b)(1)(B), check h	
	e 16) l		be on cash basis )		1		
	rt I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	1	·		(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net inco		(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see instructions))	books				(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)					
Ì	2	Check ► X if the foundation is <b>not</b> required to attach Sch B	<u></u>				
Į	3	Interest on savings and temporary cash investments	<u> </u>				
ļ	4	Dividends and interest from securities	8,16	2	8,162	8,162	
}	5a	Gross rents	ļ				
흵	_	_Net rental income or (loss)					
Ē-	6a	Net gain or (loss) from sale of assets not on line 10 _ Stmt 1	29,02	1			
Revenue	b	Gross sales price for all assets on line 6a 39,685		<del></del>			
<u>د</u>	7	Capital gain net income (from Part IV ine & EIVED		<del>-  </del>	10,030		
1	8	Net short-term capital gain	ПЯ			0	
ĺ	9	Income modifications	<u> </u>				
-	10a	Gross sales less returns and allowances NOV 1 7 2016	<del>-  </del>				
-	b	Less Cost of goods sold	<del>                                     </del>	<del></del>			
1	С 11	Gross profit or (loss) (attach schedule)GDEN, UT Other income (attach schedule)	<del>                                     </del>	-			·····
- }	12	Total. Add lines 1 through 11	37,18	3	18,192	8,162	
	13	Compensation of officers, directors, trustees, etc.		0	10,194	0,102	
xpenses	14	Other employee salaries and wages	<del></del>	<del>`</del>		<del></del>	
2	15	Pension plans, employee benefits	}	+		<del></del>	
<u>5</u>	16a	Legal fees (attach schedule)		<del>                                     </del>			<del></del>
ii	b	Accounting fees (attach schedule) Stmt 2	2,40	0	2,400		
<u> </u>	c	Other professional fees (attach schedule)	2,10	+	-, -00		<del></del>
a	17	Interest		+		<del></del>	<del></del>
<u> </u>	18	Taxes (attach schedule) (see instructions) Stmt 3	62'	7	627		
<u> </u>	19	Depreciation (attach schedule) and depletion	<u>~</u>	+		<del></del>	
and Administrative E	20	Occupancy	<del></del>	<del>                                     </del>			
۲	21	Travel, conferences, and meetings	<del></del>	1			
	22	Printing and publications		1			
<u>ت</u>	23	Other expenses (att sch)  Stmt 4	1,924	4	1,924		
Ē	24	Total operating and administrative expenses.		1	- · ·		
perating		Add lines 13 through 23	4,95	1	4,951	0	0
be	25	Contributions, gifts, grants paid	34,90!				34,905
<b>9</b>	26	Total expenses and disbursements. Add lines 24 and 25	39,850	<del></del>	4,951	0	34,905
	27	Subtract line 26 from line 12					
}	a	Excess of revenue over expenses and disbursements	-2,673	3		İ	
	b	Net investment income (if negative, enter -0-)			13,241		
- 1	c	Adjusted net income (if negative, enter -0-)				8,162	**************************************
or P		work Reduction Act Notice, see instructions.					Form 990-PF (2015)
AA	-ро	, , , , , , , , , , , , , , , , , , , ,				$\mathcal{Q}$	~ <i>(20</i>

	matracions/	JOT, UTJ	23/,022;	
	Part 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 agree wi	ıth		
	end-of-year figure reported on prior year's return)		1	296,56
2	Enter amount from Part I, line 27a		2	-2,67
3	Other increases not included in line 2 (itemize) ▶		3	
4	Add lines 1, 2, and 3		4	293,89
5	Decreases not included in line 2 (itemize) ▶ See Statement 7		5	42,09
	Total net assets or fund halances at end of year (line 4 minus line 5) - Part II, column (b), line 30		( c (	251 79

Form 990-PF (2015)

Form 990-PF (2015) Gross Fam			65-064440	<u> </u>	Page 3
(a) List and describe th	Losses for Tax on Investme e kind(s) of property sold (e.g., real estate, se, or common stock, 200 shs MLC Co.)	nt income	(b) How acquired P – Purchase	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a Capital Gain Dist	ribution		D – Donation	<del> </del>	<del> </del>
b					
c					
d	<del></del>			<b></b>	<del> </del>
<u>e</u>			<u> </u>	<del>}</del>	<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis		n or (loss) f) minus (g)
a 10,030					10,030
_b				<del> </del> -	
<u>c</u>				<b></b>	
d				<del> </del>	<del></del>
e Complete only for assets showing gain	n in column (h) and owned by the for	Indation on 12/31/6	<u> </u>	<del> </del>	
Complete only for assets showing gain	(j) Adjusted basis				⊢(h) gain minus t less than -0-) <b>or</b>
(i) F M V as of 12/31/69	as of 12/31/69		s of col (ı) (j), ıf any		rom col (h))
a			<del></del>	<del> </del>	10,030
b					
С					
d					
e	- <u></u>			 	<del></del>
2 Capital gain net income or (net capita	I loss) If gain, also enter in F	· · · · · · · · · · · · · · · · · · ·		}	
	[ If (loss), enter -0- in F			2	10,030
3 Net short-term capital gain or (loss) a		_			
If gain, also enter in Part I, line 8, colu	ımn (c) (see instructions) If (loss), ei	nter -0- ın			
Part V Qualification Under	Section 4940(e) for Reduce	ad Toy on Notal	las contract la ci	3	
(For optional use by domestic private four				Jille	
		a) tax on het mvest	ment income )		
If section 4940(d)(2) applies, leave this pa	irt blank				N/A
Was the foundation liable for the section 4	1942 tax on the distributable amount	of any year in the b	ase period?		Yes No
If "Yes," the foundation does not qualify u	nder section 4940(e) Do not complete	te this part			
1 Enter the appropriate amount in each	column for each year, see the instru	ctions before makir	ng any entries		
(a) Base penod years	(b)		(c)	Dia	(d)
Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value	of noncharitable-use asse		tribution ratio divided by col. (c))
2014					
2013					
2012	<del></del>				
2011					
2010					
0 Tabal at land 4 and and 60					
2 Total of line 1, column (d)				2	
3 Average distribution ratio for the 5-year		ie 2 by 5, or by the			
number of years the foundation has be	een in existence it less than 5 years			3	
4 Enter the net value of noncharitable-u	se assets for 2015 from Part Y line	5			
4 Litter the net value of nonchantable-u	se assets for 2013 from Fait A, line .	,		4	<del></del>
5 Multiply line 4 by line 3				5	
o manpy mio 4 by mio 5				-	<del></del>
6 Enter 1% of net investment income (1	% of Part I. line 27b)			6	
	, – <del>-</del> ,			<del>                                    </del>	
7 Add lines 5 and 6				7	
				- <del> </del>	
8 Enter qualifying distributions from Par	t XII, line 4			8	
If line 8 is equal to or greater than line	7, check the box in Part VI, line 1b,	and complete that	part using a 1% tax	rate See the	
Part VI instructions					
			<u> </u>	<del></del> _	Form 990-PF (2015)

	1990-PF (2015) GLOSS FAMILY FOUNDATION, INC. 65-0644401			F	<u>age 4</u>		
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)	<del></del>					
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				265		
	here ▶						
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-)				0		
3	Add lines 1 and 2				265		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0		
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				265		
6	Credits/Payments						
а	2015 estimated tax payments and 2014 overpayment credited to 2015						
b	Exempt foreign organizations – tax withheld at source 6b						
C	Tax paid with application for extension of time to file (Form 8868)						
d	Backup withholding erroneously withheld 6d						
7	Total credits and payments Add lines 6a through 6d	İ					
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.	<del> </del>					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<del>†                                    </del>			265		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10	$\vdash$			203		
11	Enter the amount of line 10 to be. Credited to 2016 estimated tax ▶ Refunded ▶ 11	<del> </del>					
	rt VII-A Statements Regarding Activities	<u> </u>					
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?							
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see							
	Instructions for the definition)?		4 h		x		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		1b				
	published or distributed by the foundation in connection with the activities						
С	Did the foundation file Form 1120-POL for this year?				х		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		1c				
-	(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?		,		х		
_	If "Yes," attach a detailed description of the activities	-	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	İ	3		х		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	ŀ			X		
b	- · · · · · · · · · · · · · · · · · · ·	N/A	4a 4b				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	~, ~	5	_	x		
	If "Yes," attach the statement required by General Instruction T	ŀ	- 5				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		1				
	conflict with the state law remain in the governing instrument?	İ		v			
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	}	6	X			
	Enter the states to which the foundation reports or with which it is registered (see instructions)		7	^			
	None						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	ĺ					
~	(or designate) of each state as required by General Instruction G? If "No," attach explanation  See Stmt 8	ŀ	0.		v		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	}	8b		X		
-	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"	ŀ	1				
	complete Part XIV		ا ۲		v		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	}	9		<u> </u>		
	names and addresses	l	40		v		
	names and addresses 10 X						

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?

Form 990-PF (2015)

X

4b

	1 990-PF (2015) Gross Family			J6444U1			Pa	ige <b>b</b>	
P	art VII-B Statements Regarding	Activities for Which Form	4720 May Be F	Required (cont	inued)	······································		<del></del>	
5a	During the year did the foundation pay or in								
	(1) Carry on propaganda, or otherwise atte	mpt to influence legislation (section	4945(e))?	<u> </u>	res X No				
	(2) Influence the outcome of any specific p	ublic election (see section 4955), or	to carry on,						
	directly or indirectly, any voter registrati	on drive?			res 🗓 No				
	(3) Provide a grant to an individual for trave	el, study, or other similar purposes?		_ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	res 🗓 No				
	(4) Provide a grant to an organization other	r than a charitable, etc , organizatio	n described in						
	section 4945(d)(4)(A)? (see instructions	5)		□ \( \bullet \)	res X No				
	(5) Provide for any purpose other than relig	gious, charitable, scientific, literary,	or educational	_	<del></del>				
purposes, or for the prevention of cruelty to children or animals?									
b	If any answer is "Yes" to 5a(1)-(5), did any	of the transactions fail to qualify un	der the exceptions of	described in					
	Regulations section 53 4945 or in a current	notice regarding disaster assistance	e (see instructions)	?	N/A	5b			
	Organizations relying on a current notice re	garding disaster assistance check h	nere		▶ 🗍				
С	If the answer is "Yes" to question 5a(4), does	es the foundation claim exemption f	rom the tax						
	because it maintained expenditure respons	ibility for the grant?		N/A	res No				
	If "Yes," attach the statement required by R	egulations section 53 4945-5(d)							
6a	Did the foundation, during the year, receive	any funds, directly or indirectly, to j	pay premiums						
	on a personal benefit contract?		•		res X No				
b	Did the foundation, during the year, pay pre	miums, directly or indirectly, on a p	ersonal benefit cont	ract?		6b		X	
	If "Yes" to 6b, file Form 8870							***************************************	
7a	At any time during the tax year, was the fou	indation a party to a prohibited tax s	helter transaction?		res X No				
	If "Yes," did the foundation receive any prod			ction?	N/A	7b			
		ers, Directors, Trustees, F				ees.			
	and Contractors	,				•			
1 L	ist all officers, directors, trustees, founda	ntion managers and their compen	sation (see instruc	ctions).					
			(b) Title, and average	(c) Compensation	(d) Contributions to				
	(a) Name and addre	ess	hours per week	(If not paid,	employee benefit plans and deferred		ense aco r allowan		
			devoted to position	enter -0-)	compensation	Other	allowali	U62	
Re	nee Gross	Miami	President						
13	647 Deering Bay Dr., #141	FL 33158	1.00	0	0			0	
An	drew Gross	Coral Gables	Director						
15	9 Madeira	FL 33134	0.10	0	٥			0	
Pe	ter Gross	Coral Gables	Director						
15	9 Madeira	FL 33134	0.10	0		1		0	
Pa	tricia Kalik	Manchester	Director						
14	5 Steinmetz Dr.	NH 03104	0.10	0	٥			0	
	Compensation of five highest-paid empl			tructions). If non	<u> </u>				
	"NONE."	•		,	,				
	····		(b) Title, and average		(d) Contributions to				
	(a) Name and address of each employee paid	more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		oense aco r allowan		
			devoted to position		compensation	Other	allowali	CC3	
NC	ONE								
						1			
						1			
Γota	I number of other employees paid over \$50,0	000		<u> </u>	1	_	$\top$	0	
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				· · · · · · · · · · · · · · · · · · ·	<u>_</u>	0-PF		

Form 990-PF (2015) Gross F	amily Foundation, Inc.	<u>65-0644401</u>	Page <b>7</b>
	bout Officers, Directors, Trustees, Found	dation Managers, Highly Paid E	mployees,
and Contractor  3 Five highest-paid independe	ors (continued)  nt contractors for professional services (see instru	uctions) If none enter "NONE"	
	nd address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	to data cos or datas persons para mora diam eco, oco	(b) Type of service	(c) compensation
Total number of others receiving over	r \$50,000 for professional services		<b>•</b>
Part IX-A Summary of	Direct Charitable Activities		
	ole activities during the tax year. Include relevant statistical information conferences convened, research papers produced, etc.	such as the number of	Expenses
1 N/A			
2			
3			
-			
4			
Part IX-B Summary of	Program-Related Investments (see instru	lotions)	<u> </u>
	stments made by the foundation during the tax year on lines 1 and 2	icuons)	Amount
1 N/A			Amount
•			
2			
All other program-related investments See ins	tructions		
3			
Table Addition of the control			<u> </u>
Total. Add lines 1 through 3			1

- Forn	1 990-PF (2015) Gross Family Foundation, Inc. 65-0644401		Page <b>8</b>
Pa	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign	n fou	
	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	376,755
b	Average of monthly cash balances	1b	8,722
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	385,477
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	0
3	Subtract line 2 from line 1d	3	385,477
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	5,782
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	379,695
6	Minimum investment return. Enter 5% of line 5	6	18,985
Pa	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	found	dations
	and certain foreign organizations check here ▶ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	18,985
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 )		
С	Add lines 2a and 2b	2c	265
3	Distributable amount before adjustments Subtract line 2c from line 1	3	18,720
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	18,720
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	18,720
Pa	art 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	34,905
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	34,905

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Enter 1% of Part I, line 27b (see instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

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

Form **990-PF** (2015)

	990-PF (2015) Gross Family Foundational XIII Undistributed Income (see instructions	65-064440	Page <b>9</b>		
	urt XIII Undistributed Income (see instructions	(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part XI, line 7	Corpus	Years prior to 2014	2014	2015
2	Undistributed income, if any, as of the end of 2015				
	Enter amount for 2014 only				
	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2015				
	From 2010				
b		7			
c	From 2012	7 1			
d	From 2013	<b>-</b>			
۵	From 2014	7			
_	Total of lines 3a through e	7			
4	Qualifying distributions for 2015 from Part XII,				
•	line 4 ▶ \$ 34,905				
9	Applied to 2014, but not more than line 2a				
	Applied to undistributed income of prior years				
	(Election required – see instructions)				
_	Treated as distributions out of corpus (Election				
·	required – see instructions)				
	Applied to 2015 distributable amount	······································			18,720
	Remaining amount distributed out of corpus	16,185			
	Excess distributions carryover applied to 2015	20,200			
5	(If an amount appears in column (d), the same				
	amount must be shown in column (a) )				
	Enter the net total of each column as				
6					
	indicated below:	16,185			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	10/103			
E.	Prior years' undistributed income Subtract				
_	line 4b from line 2b				
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				
C	Subtract line 6c from line 6b Taxable				
	amount – see instructions				
e	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount – see				
	instructions				
Ť	Undistributed income for 2015 Subtract lines				
	4d and 5 from line 1. This amount must be				
_	distributed in 2016				
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)	-		,	-
8	Excess distributions carryover from 2010 not				
_	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016.	16 105			
	Subtract lines 7 and 8 from line 6a	16,185		<del>, ,</del>	
10	Analysis of line 9				
а	Excess from 2011	<del> </del>			
b	Excess from 2012	_			
С	Excess from 2013		1 1		1

16,185

Excess from 2014

Excess from 2015

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Recipient Purpose of grant or any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year See Statement 9 34,905 Total 34,905 **▶** 3a b Approved for future payment N/A Total ▶ 3b

C11	ter gross armo	ounts unless otherwise indicated	Uniterate	ed business income	EXCIDGE	1 by section 512, 513, or 514	(e)
	, December 201		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1	Program ser						<u> </u>
	а h						
	d						
	f						<del></del>
	g Fees an	d contracts from government agencies					
2	-	dues and assessments					
	•	avings and temporary cash investments					
		nd interest from securities			,		8,162
5	Net rental in	come or (loss) from real estate					······································
		anced property			1	• • • • • • • • • • • • • • • • • • •	
		t-financed property					
6		come or (loss) from personal property		Ì			
	Other invest						
		s) from sales of assets other than inventory					29,021
	•	or (loss) from special events					
		or (loss) from sales of inventory					
		ue a			<u> </u>		
					1		
			·				·
	е						
12	Subtotal Ad	d columns (b), (d), and (e)	-	0		0	37,183
		ne 12, columns (b), (d), and (e)			•	13	37,183
		in line 13 instructions to verify calculations)				_	·
F	art XVI-B	Relationship of Activities to the Ac	complishm	ent of Exempt P	urpose	s	
	Line No. ▼	Explain below how each activity for which income accomplishment of the foundation's exempt purpo					
	N/A	accompliant of the foundation of exempt purpo	7000 (01.101 1.114.	r by providing rando to	, осол р	sipocos) (Goo incircos	<u> </u>
	21,720			· · · · · · ·			
			· .			···	
			· · · · · · · · · · · · · · · · · · ·	······			
			<u>-</u>			···· - · · · · · · · · · · · · · · · ·	
		<del></del>	<del></del>			· · · · · · · · · · · · · · · · · · ·	·
				· · · · · · · · · · · · · · · · · · ·			
				<del></del>			·
				** ***			
-			<del></del>				
			<del></del>				
			***************************************	····			
	-			•			
		<del></del>			· ,-	<del></del>	· · · · · · · · · · · · · · · · · · ·
		<del></del>					
				<del></del>			
			<del></del>				· · · · · · · · · · · · · · · · · · ·
		***.					
		<del>-</del>		<del></del>			<del></del>
			<del></del>	<del></del>			<del></del>
-		<u> </u>				<del></del>	- 000 DE

Part )		n Regarding Ti				lationships Wi	ith Noncharitabl	е	<u>Pag</u>	ge 13
1 Did	the organization direc	rganizations	ige in any of the fol	lowing with:	ny other organiza	ution described			Yes	No
ın s	section 501(c) of the C		-	_						
_	anizations?		and a destate of							
	insfers from the report	ing foundation to a n	oncharitable exem	pt organizati	on of					v
• •	Cash Other assets							1a(1)		X
, ,	ner transactions							1a(2)		
	Sales of assets to a r	noncharitable exemp	t organization					1b(1)		x
• •	Purchases of assets	•	•	on				1b(2)		X
(3)	Rental of facilities, eq	juipment, or other as	sets					1b(3)		Х
(4)	Reimbursement arrar	ngements						1b(4)		Х
(5)	Loans or loan guaran	tees						1b(5)		X
	Performance of service	•	•					1b(6)		X
	aring of facilities, equip		•					1c		X
	ne answer to any of the									
	ue of the goods, other ue in any transaction o									
(a) Lir		1	ne of noncharitable exem				ansactions, and sharing arr	angemer	nts	
N/A				-		· · · · · · · · · · · · · · · · · · ·	<u>_</u>			
			·			·				
			****			·				
						<del></del>				
	····				<del></del>					
		<del></del>								<del></del>
20 10 1	ha favordation dispative		th. agrafatad to				<del></del>			
	he foundation directly of the condition				_	nizations	Γ	٦ v.	s X	No
	res," complete the following		man section sor(c	<i>5)</i> ( <i>5))</i>	5011011 327		L	Ye	:5 AL	] 140
	(a) Name of organiz		(b) Type of o	rganization	1	(c) Descrip	otion of relationship			
N/2	A									
				·						
		<del></del>					··· · · · · · · · · · · · · · · · · ·			
	Under penalties of perjury,	declare that I have exam	ined this return including	accompanyin	schedules and statem	sents and to the best of	my knowledge and heliof	ıt ıs tsıs		
	correct, and complete Dec	laration of preparer (other	than taxpayer) is based	on all information	on of which preparer ha	as any knowledge			-	<del></del> 1
Sign							May the IRS discu with the preparer s			
Here	K	( K	)				(see instructions)?	· 🔲 ,	Yes	No
	1 leno	1 / 4	24			Pres	ident			
	Signature of officer or to	rustee			Date	Title				
	Print/Type preparer's nam	е		Preparer's si	gnature		Date		Check	<u> </u>
Paid	_						1		self-em	
Preparer	Carol L. Sok				. Sokolow,	C.P.A.	11/03			
Use Only	Firm's name ►	Carol L. So						125		
•	Firm's address	9500 S. Dao Miami, FL			ce. /00		Firm's EIN ► 59-			
	<u> </u>	artent / Fli	22120-40	<u> </u>			Phone no 305	<u>- 22</u>	<u>/ - 3</u>	<u>, 00</u>

Totals

Γ			Oth	or Notes and	d Loans Receiv	ahle		
Form	990-PF		Oill	ici mules all	201			
L	· · · · · · · · · · · · · · · · · · ·	For calenda	r year 2015, d	or tax year beginnin	g	, and ending		
Name	•						Employer Ide	entification Number
Gro	ss Family	y Foundat:	ion, In	nc			65-064	4401
For	m 990-PF	, Part II	, Line	7 - Addit	ional Inform	ation		
							15.1	
(1) I	Loan Rece	Name of be	orrower		<del>-  </del>	Relationship to disc	qualified persor	<u> </u>
(2)								
(3)								
(4)								
(5)	<del></del>				<u> </u>			
(6)	<del></del>	<del></del>		<del></del>	<del></del>			
<u>(7)</u>		<del></del>						
(8) (9)					<del></del>			
(10)					<del></del>	<del></del>		
	Original amoi borrowed		e of loan	Maturity date		Repayment terms		Interest rate
<u>(1)</u>				<u></u>				
(2)				<del> </del>			<del> </del>	
(3)							···	
(4) (5)			<del></del>	<u> </u>	-			
(6)			<del>-</del>			<del></del>		<del>                                     </del>
(7)							<del></del>	
(8)			·	_			<del></del>	
(9)								
(10)								
					<del> </del>			·····
	S	ecurity provided by	borrower			Purpose o	f loan	
(1)								
(2)				···				
(3)			<del></del>	<del></del>			-·. <u>-</u>	
<u>(4)</u>						· <del></del>		
( <u>5)</u> ( <u>6)</u>			<del></del>		<del></del>			
(7)								
(8)								
(9)								
(10)			~					
			<u></u>		<u> </u>	<u> </u>	······	
	Conside	eration furnished by	y lender		Balance due at beginning of year	Balance due a end of year	it Fa	ıır market value
(1)		<del></del>	<del></del>		237			
(2) (3)						<del> </del>		
(4)			<del></del>	<del></del>		<del> </del>		
( <u>5</u> )	<del></del>							
(6)								
(7)								
(8)		·			<del></del>	ļ		<del></del>
(9)		<del></del>						
(10)						<u></u>		

237

GROSSFAMILY Gross Family Foundation, Inc.

Federal Statements

FYE: 12/31/2015

65-0644401

## Form 990-PF - General Footnote

## Description

The delay for filing this tax return, is due to the death of the former CPA, Hillelene Lustig. The Foundation had difficulty in obtaining their records and information from the office of the deceased CPA. The records that were subsequently furnished from the estate's personal representative were incomplete and in disarray. It then took additional time to obtain the missing information in order to complete the annual accounting and to prepare this return. Please accept this return as timely filed and abate all applicable penalties due to just cause.

18,991 18,991 Gain / Loss <del>1</del>-3 Net Charitable Charitable Purpose Purpose **Depreciation** £V} Adjusted Net Adjusted Ω Net Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets Expense S. Statement 3 - Form 990-PF, Part I, Line 18 - Taxes S 167 399 2,400 627 2,400 Investment Investment 10,664 10,664 Federal Statements Set Set Cost Received s. 29,655 \$ Purchase How 29,655 2,400 167 399 627 2,400 61 Sale Price Total Total W ᡐ 2/09/15 Ω· GROSSFAMILY Gross Family Foundation, Inc. Date Sold 11/01/12 Date Acquired Description Indirect Accounting Fees Description Description Foreign taxes Federal income taxes Annual filing fee FYE: 12/31/2015 Whom Sold Celegene corp Total Total Total 65-0644401

,		Charitable Purpose	w w		Fair Market	\$ 28,090 27,112 53,608 8,212 27,216 89,955 15,572 14,552 15,478 \$ 359,821
	Sesi	Adjusted Net	0	Investments	Basis of Valuation	Market
ements	I, Line 23 - Other Expenses	Net Investment	95 1,829 1,924 \$	10b - Corporate Stock Investments	End of Year	\$ 13,283 20,834 33,227 9,372 14,998 64,758 15,572 28,124 3,860 5,610
Federal Statements	4 - Form 990-PF, Part II,	Total	95 1,829 1,924	, Part II, Line	Beginning of Year	\$ 37,322 29,235 27,547 9,067 14,998 69,457 16,230 10,663 50,834 27,722 \$ 293,075
GROSSFAMILY Gross Family Foundation, Inc. 65-0644401 FYE: 12/31/2015	Statement 4 - Form	Description	Expenses Dues and subscriptions Management advisory fee Total	Statement 5 - Form 990-PF	Description	Parametric Tx Managed fund Causeway Int'l Jensen Portfolio Pimco All Asset Vanguard Div Appreciation I Shares DJ Selective T Rowe Price Small Cap Celegene SPDR & S&P Dividend First Eagle GH06A Altria group Bristol Myers Squibb Total

, –

GROSSFAMILY Gross Family Foundation, Inc. **Federal Statements** 65-0644401 FYE: 12/31/2015 Statement 6 - Form 990-PF, Part II, Line 22 - Other Liabilities Beginning of Year End of Description Year Due to Officer 593 Total \$ 0 \$ 593 Statement 7 - Form 990-PF, Part III, Line 5 - Other Decreases Description Amount Adjustment have all equities \$ at cost basis 42,094 Total 42,094 Statement 8 - Form 990-PF, Part VII-A, Line 8b - Not Filing with Attorney General **Explanation** Description The State of florida does not require a copy of the tax return.

GROSSFAMILY Gross Family Foundation, Inc. 65-0644401 FYE: 12/31/2015

Federal Statements

		Amount		7,400	180	C U	000	200		200	C C	750	1,000		1,000		200	1	250		540	1	200	,	000'T	( L	450	000 6	) (n	005 0	1	250
		Purpose																														
	ļ		+ c 20 C	DOMACTON	Donation	1 1	Donation	Donation	,	Donation	-	Donation	Donation		Donation		Donation		Donation		DOnation	•	Donation		Donation		Donation	() () () ()	DOMECTON	nonation	DOMACTON	Donation
ובפו	Address	Status	gton Ave	ipoff Hall	       	Avenue	ond Avenue		Avenue		ch St		on Street	Carter Road		88th St		12th Ave		88th St		<b>o</b>		SW 95th Ave		Town Hall		cy Ave	7		reet (Rt 7)	
	A	Relationship	301 Washington Ave	Norman H. Lipoff Hall		1275 York Avenue	A001 NF 2m		333 7th Ave		5950 SW 88th	- !	30 Union S	358 George Carter	n	5950 SW 881		1475 NW 12		5950 SW 88		PO Box 3049		16201 SW 9		Lenox Town	•	2200 Liberty Ave	ע פיני מיניטי	6835 Ked Koad	39 South Street	
	Name	Address	Jewish Museum of Florida	Miami Beach fu 33139 University of Florida Hillel	Gainesville FL 32603	Memorial Sloane Kettering	New York NY 10065	DASH Mayelle School Miami FL 33137	Doctors Without Borders	New York NY 10001-5004	Temple Beth Am	Pinecrest FL 33156	Barrington Stage Company Pittsfield MA 01201	Jacobs Pillow Dance	Becket MA 01223	Temple Beth Am	Pinecrest FL 33156	UM Sylvestor Cancer Center	Miami FL 33136	Temple Beth Am	Pinecrest FL 33156	American Heart Association	Syracuse NY 13220-3049	DFYIT-Drug Free Youth In Town	Miami FL 33157	Lenox Scholarship Fund	Lenox MA 01240	Miami City Ballet	Miami Beach FL 33139	Baptist Health Foundation	The Berkehire Miseim	

თ

	_ <del></del>				
į	•	•	Amount	1,000 1,000 34,905	,
	ements	Statement 9 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)	Purpose	Donation Donation	
	lation, Inc. Federal Statements	orm 990-PF, Part XV, Line 3a - G	Relationship Status	1103 Biscayne Blvd 104 Walker St 3275 W Hillsboro Blvd.	
	GROSSFAMILY Gross Family Foundation, Inc. 65-0644401 FYE: 12/31/2015	Statement 9 - Fo	Address	Perez Art Museum Miami FL 33132 Ventfort Hall Lenox MA 01240 Israel Children's Center Deerfield Beach FL 33442 Total	

ļ