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EXTENDED TO NOVEMBER 15, 2016 Return of Private Foundation 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 separate instructions is at www.irs.gov/form990pf.

| For | calendar year 2015 or tax year beginning | | , and ending | | |
|---------------------------------|--|---------------------------------------|---------------------------|--|--|
| Nar | ne of foundation | | | A Employer identificatio | n number |
| | AMES AND DOROTHY BAER FOUR | | | 65-641939 | 7 |
| | nber and street (or P O box number if mail is not delivered to street a | ddress) | Room/suite | B Telephone number | 100 |
| | 203 BAYSHORE DRIVE #1502 | | L | 305-852-27 | |
| - | or town, state or province, country, and ZIP or foreign po AMPA, FL 33629 | stal code | | C If exemption application is | pending, check here |
| | Check all that apply. Initial return | Initial return of a fo | ormer public charity | D 1. Foreign organization | s, check here |
| | Final return | Amended return | | | |
| | Address change | Name change | | Foreign organizations m check here and attach c | eeting the 85% test, omputation |
| H C | Check type of organization: X Section 501(c)(3) exe | empt private foundation | | E If private foundation st | atus was terminated |
| | | Other taxable private founda | ation | under section 507(b)(1 |)(A), check here |
| I Fa | ur market value of all assets at end of year J Accountin | | Accrual | F If the foundation is in a | |
| - | rom Part II, col (c), line 16) | ner (specify) | | under section 507(b)(1 |)(B), check here |
| | | | | | (4) |
| € Pa | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
| ⊋> —_ | 1 Contributions, gifts, grants, etc., received | 49,741. | | N/A | |
| N. | 2 Check If the foundation is not required to attach Sch B | | | | <u> </u> |
| <u>></u> | 3 Interest on savings and temporary cash investments | 8. | 8. | | STATEMENT 1 |
| <u> </u> | 4 Dividends and interest from securities | 31,494. | 31,494. | | STATEMENT 2 |
| | 5a Gross rents | | | | |
| <u>1</u>] | Net rental income or (loss) | 42,331. | | | |
| ž s | 6a Net gain or (loss) from sale of assets not on line 10 6 Gross sales price for all 8 42,331. | 42,331. | | | |
| SCANNED NUV Revenue | 7 Capital gain net income (from Part IV, line 2) | | 42,331. | | |
| % & | 8 Net short-term capital gain | | | | |
| | 9 Income modifications | · · · · · · · · · · · · · · · · · · · | | | |
| | Gross sales less returns and allowances | | | | |
| | b Less Cost of goods sold | | | | |
| | c Gross profit or (loss) | | | | |
| | 11 Other income | 402 554 | F2 022 | ļ | |
| —f= | 12 Total Add lines 1 through 11 | 123,574. | 7.3,833. | | 0. |
| ì | 13 Compensation of officers directors, trustees, etc | | 0. | | |
| ١. | 14—Other-employee-salaries and wages 15 Pension plans, employee beneuts | | | | <u> </u> |
| Se | Fig. Legal Gees 2 1 2016 STMT 3 | 750. | 375. | | 375. |
| bens | b Accounting fees STMT 4 | 2,965. | 1,483. | | 1,482. |
| | | | | | |
| Æ. | 17_Interest | | | | |
| Operating and Administrative.Ex | 18 Taxes STMT 5 | 177. | 177. | | 0. |
| nist | 19 Depreciation and depletion | | | | |
| Ē | 20 Occupancy | _ | | | |
| Ă | 21 Travel, conferences, and meetings | | | | |
| a | 22 Printing and publications | 3,591. | 3,485. | | 106. |
| ting | 23 Other expenses STMT 6 | 3,391. | 3,403. | | 100. |
| era | 24 Total operating and administrative expenses Add lines 13 through 23 | 7,483. | 5,520. | | 1,963. |
| Ö | 25 Contributions, gifts, grants paid | 134,000. | | | 134,000. |
| | 26 Total expenses and disbursements. | | | | |
| | Add lines 24 and 25 | 141,483. | 5,520. | | 135,963. |
| _ | 27 Subtract line 26 from line 12: | | | | |
| | Excess of revenue over expenses and disbursements | <17,909. | | | <u> </u> |
| | b Net investment income (if negative, enter -0-) | | 68,313. | | |
| 7-22- | c Adjusted net income (if negative, enter -0-) | | <u> </u> | N/A | |
| 5235 11-2 | 01 4-15 LHA For Paperwork Reduction Act Notice, see i | instructions. | | | Form 990-PF (2015) |

2015.04030 JAMES AND DOROTHY BAER FOUN F1026__1

JAMES AND DOROTHY BAER FOUNDATION 65-6419397 Form 990-PF (2015) Beginning of year End of year Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (c) Fair Market Value (a) Book Value (b) Book Value 1 Cash - non-interest-bearing 2,539,291. 2,521,382. 2,705,702. 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts 4 Pledges receivable ▶ Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment; basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 2,539,291. 2,521,382. 2,705,702. 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 21 Mortgages and other notes payable 22 Other liabilities (describe 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. or Fund Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted ightharpoonsFoundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 1,000,000. 1,000,000 28 Paid-in or capital surplus, or land, bldg., and equipment fund 1,539,291. 1,521,382 29 Retained earnings, accumulated income, endowment, or other funds 2,539,291. 2,521,382 30 Total net assets or fund balances 2,539,291. 2,521,382 31 Total liabilities and net assets/fund balances 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 2,539,291 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) 2,521,382. Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 2,521,382.Form **990-PF** (2015)

523511 11-24-15

| (a) List and descri | be the kind(s) of property sold (e gehouse; or common stock, 200 sh | g., real estate, | - Income | (b) | How ac - Purcl - Dona | quired hase ition | | acquired lay, yr) | (d) Date sold (mo., day, yr) |
|---|---|--|--------------------------------------|----------------|-----------------------------|-------------------------|--------------|-------------------------------|------------------------------------|
| 1a | | | | | | | | | |
| b SEE ATTACHED | STATEMENT | | | <u> </u> | | | | | |
| <u> </u> | | | | <u> </u> | | | | | |
| _d | | | _ | ├- | | | . | | |
| | | 1 | | Щ, | | | | | <u> </u> |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | 100 | st or other basis expense of sale | | | · | | ain or (loss s (f) minus | |
| a | | | ···· | | | | | | |
| b | | | | | | | | | |
| C | | <u> </u> | | | - | | | | |
| d | | | | | | | | | 10 221 |
| e 42,331. | | the foundation | 10/04/00 | | | | | | 42,331. |
| Complete only for assets showing | | | | | | | | col. (h) gain not less tha | |
| (i) F.M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | | cess of col. (i) col. (j), if any | | ı | | | (from col. (| |
| a | | | | | | | | | |
| b | | | | | | | | | |
| С | | | | | | | | | |
| d | | | | | | | | | |
| e | | | | | | | | | 42,331. |
| 2 Capital gain net income or (net cap | ital loss) { If gain, also entering ital loss), enter -0 | er in Part I, line D- in Part I, line | 7 7 | } | 2 | | | | 42,331. |
| 3 Net short-term capital gain or (loss | ` | | | 1 | | | | | |
| If gain, also enter in Part I, line 8, c | | (0). | |) | | | | | |
| If (loss), enter -0- in Part I, line 8 | nder Section 4940(e) for | | | | 3 | | | N/A | · |
| If section 4940(d)(2) applies, leave thi Was the foundation liable for the secti If "Yes," the foundation does not qualif | on 4942 tax on the distributable ar y under section 4940(e). Do not co | omplete this pa | rt. | | | | | | Yes X No |
| Enter the appropriate amount in ea | ach column for each year; see the i | instructions be | fore making any e | ntries | | | | | |
| (a) Base period years Calendar year (or tax year beginning | (b) g in) Adjusted qualifying dis | stributions | Net value of no | . (c) nchar | ritable- | use assets | - | Dıstrıt (col. (b) dıv | oution ratio rided by col. (c)) |
| 2014 | | 22,743. | | | | 3,797 | | | .043467 |
| 2013 | | 39,834. | | | | 2,213 | | | .034000 |
| 2012 | | 76,944. | | | | 7,493 | | | .048469 |
| 2011 | | 70,290. | | _1 | <u>, 55</u> | 3,013 | • | | .045260 |
| 2010 | - 6 | 3,062. | | 1 | <u>,42</u> | 5,422 | ٠ | | .044241 |
| 2 Total of line 1, column (d) | | | | | | | 2 | | .215437 |
| 3 Average distribution ratio for the 5- the foundation has been in existence | | on line 2 by 5, | or by the number | of ye | ars | | 3 | | .043087 |
| 4 Enter the net value of noncharitable | e-use assets for 2015 from Part X | line 5 | | | | | 4 | | 2,816,265. |
| 5 Multiply line 4 by line 3 | • • • • • • • • • • • • • • • • • • • | , | | | | | 5 | | 121,344. |
| ,, | | | | | | | | | |
| 6 Enter 1% of net investment income | e (1% of Part I, line 2/b) | | | | | | 6 | | 683. |
| 7 Add lines 5 and 6 | | | | | | | 7 | | 122,027. |
| 8 Enter qualifying distributions from If line 8 is equal to or greater than I See the Part VI instructions. | • | e 1b, and comp | lete that part using | g a 19 | % tax r | ate. | 8 | | 135,963. |
| 522521 11-24-15 | | | | | | | | | orm 990-PF (2015 |

| form 990-PF (2015) JAMES AND DOROTHY BAER FOUNDATION JAMES AND DOROTHY BAER FOUNDATI | • | | 65-641939 | 7 Page 4 |
|--|--|--|------------------------|-------------------|
| 18 Exempt operating Councidations state interest. District or Indian order determation interest. District order order order order and an accordance of the councidations state meet the section 4940(s) requirements in Party, check here. All other domestic foundations enter 2% of line 27th. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 2% of line 27th. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 2% of line 27th. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 3% of Part I, line 12, col. (b). All other domestic foundations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 4% of Part I, line 12, col. (b). Tak sead on inevalment income. Subtract line 4 from line 3.1 fazor or less, enter -0- Codestic Payments. Expert foreign organizations - tax withheld at source Expert or undergourness and 20 14 overpayment crucial to 2015 Expert or undergourness and 20 14 overpayment or line 10 feel (Form 8808) Extra doe. If the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of the secondaries and the load of the amount o | TOTALDA | TTON | 65-041505 | ructions) |
| 18 Exempt operating Councidations state interest. District or Indian order determation interest. District order order order order and an accordance of the councidations state meet the section 4940(s) requirements in Party, check here. All other domestic foundations enter 2% of line 27th. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 2% of line 27th. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 2% of line 27th. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 3% of Part I, line 12, col. (b). All other domestic foundations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 4% of Part I, line 12, col. (b). Tak sead on inevalment income. Subtract line 4 from line 3.1 fazor or less, enter -0- Codestic Payments. Expert foreign organizations - tax withheld at source Expert or undergourness and 20 14 overpayment crucial to 2015 Expert or undergourness and 20 14 overpayment or line 10 feel (Form 8808) Extra doe. If the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of the secondaries and the load of the amount o | DOROTHY BAER FOUNDA | 10(a), 4940(b), 4940(e), o | 7 4946 - 300 1110 | |
| 18 Exempt operating Councidations state interest. District or Indian order determation interest. District order order order order and an accordance of the councidations state meet the section 4940(s) requirements in Party, check here. All other domestic foundations enter 2% of line 27th. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 2% of line 27th. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 2% of line 27th. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 3% of Part I, line 12, col. (b). All other domestic foundations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 4% of Part I, line 12, col. (b). Tak sead on inevalment income. Subtract line 4 from line 3.1 fazor or less, enter -0- Codestic Payments. Expert foreign organizations - tax withheld at source Expert or undergourness and 20 14 overpayment crucial to 2015 Expert or undergourness and 20 14 overpayment or line 10 feel (Form 8808) Extra doe. If the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of the secondaries and the load of the amount o | Form 990-PF (2015) JAMES PART Income (Section 45) | enter "N/A" on line 1. | | 1 |
| 18 Exempt operating Councidations state interest. District or Indian order determation interest. District order order order order and an accordance of the councidations state meet the section 4940(s) requirements in Party, check here. All other domestic foundations enter 2% of line 27th. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 2% of line 27th. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 2% of line 27th. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 3% of Part I, line 12, col. (b). All other domestic foundations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 4% of Part I, line 12, col. (b). All other domestic foundations enter 4% of Part I, line 12, col. (b). Tak sead on inevalment income. Subtract line 4 from line 3.1 fazor or less, enter -0- Codestic Payments. Expert foreign organizations - tax withheld at source Expert or undergourness and 20 14 overpayment crucial to 2015 Expert or undergourness and 20 14 overpayment or line 10 feel (Form 8808) Extra doe. If the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of these 3 and 8, enror of hair line 7, enter amount owed Tax does in the load of the secondaries and the load of the amount o | Part VI Excise 1 ax Baseu on section 4940(d)(2), check here | accessary-see instructions) | | 683. |
| Date of failing of Underloans that meet the section 494(6); requirements in Fail Viviance of Part I, line 27). Deneste Counters conditions enter 2% of the 27% 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-) 3 Ad line's 1 and 2 5 Tax based on Investment Income: Subtract line 4 from ine 3. If zero or less, enter -0- 5 Tax based on Investment Income: Subtract line 4 from ine 3. If zero or less, enter -0- 6 Creents-Pyments; 2 15 setimated tax Pyments and 2014 overpayment credited to 2015 6 Exempt foreign organizations - Lax withhold at source 7 Tax paid with application for extension of time to the (Form 8868) 8 Exempt foreign organizations - Lax withhold at source 7 Tax paid with application for extension of time to the (Form 8868) 8 Tax disc. If the last of lines 5 and 8 is more than line 7, enter amenut oved 9 Tax disc. If the last of lines 5 and 8 is more than line 7, enter amenut oved 10 Powrpayment. If line 7 is more than the total of times 5 and 8, either than the total or times 5 and 8, either than the total or times 5 and 8, either than the total or times 5 and 8, either than the total or times 5 and 8, either than the total or times 5 and 8, either than the total or times 5 and 8, either than the total or times 5 and 8, either than the total or times 5 and 8, either than the total or times 5 and 8, either than the total or times 5 and 8, either than the total or times 5 and 8, either than the total or times 5 and 8, either than the total or times 5 and 8, either than the total or times 5 and 8, either than the total or times 5 and 8, either than the total or times 5 and 8, either than the total or the section of the extension or times 10 to 9 c. Credited to 2015 estimated tax. 1 | 1a Exempt operating foundations described in scotton | X and enter 1% | <u> </u> | |
| All other domestor boundations enter 2% of time 27b. Exempt to treat productions only. Others enter -0-) 2 Tax under section 511 (domestic section 4947(4)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 4 Subbit A (income) tax (domestic section 4947(4)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3, it zero or less, enter -0- 6 Codds-Payments: 2 2015 estimated as payments and 2014 overpayment credited to 2015 5 Exempt foreign organizations - tax withheld at source. 1 Tax based with application for extension of time to file (Form 886) 5 Exempt foreign organizations - tax withheld at source. 1 Tax based with application for extension of time to file (Form 886) 6 Exempt foreign organizations - tax withheld at source. 1 Total crodits and payments. And lines 5 and 8 is more than line 7, enter amount over a control of the second organization or settlems of the second organization or settlems or the second organization orga | Date of ruling or determination | l l | | 1 |
| All other domestor boundations enter 2% of time 27b. Exempt to treat productions only. Others enter -0-) 2 Tax under section 511 (domestic section 4947(4)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 4 Subbit A (income) tax (domestic section 4947(4)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3, it zero or less, enter -0- 6 Codds-Payments: 2 2015 estimated as payments and 2014 overpayment credited to 2015 5 Exempt foreign organizations - tax withheld at source. 1 Tax based with application for extension of time to file (Form 886) 5 Exempt foreign organizations - tax withheld at source. 1 Tax based with application for extension of time to file (Form 886) 6 Exempt foreign organizations - tax withheld at source. 1 Total crodits and payments. And lines 5 and 8 is more than line 7, enter amount over a control of the second organization or settlems of the second organization or settlems or the second organization orga | b Domestic foundations that meet the section 4940(0) 104-11 | and of Port I line 12, col. (b). | | ō. |
| 2 Tax wade (secund) and (somestic section 4947(a)(1) busts and taxable foundations only, Others enter-0-) 5 Add unes 1 and 2 5 Author (somes) (somestic section 4947(a)(1) busts and taxable foundations only, Others enter-0-) 5 Tax based on investment income Subtract line 4 from line 3, if yero or less, enter-0-) 6 Credits/Payments: 2 015 estimated tax payments and 2014 overpayment credited to 2015 6 Exempt Ortegen organizations - tax withheld at source 6 Tax paid with application for centers on of time to the (form 8888) 6 Exempt Ortegen premarks and current on the control of the center of | of Part I, line 27b | 4% 01 Part 1, 1110 (2) | | 683. |
| 2 Tax wade (secund) and (somestic section 4947(a)(1) busts and taxable foundations only, Others enter-0-) 5 Add unes 1 and 2 5 Author (somes) (somestic section 4947(a)(1) busts and taxable foundations only, Others enter-0-) 5 Tax based on investment income Subtract line 4 from line 3, if yero or less, enter-0-) 6 Credits/Payments: 2 015 estimated tax payments and 2014 overpayment credited to 2015 6 Exempt Ortegen organizations - tax withheld at source 6 Tax paid with application for centers on of time to the (form 8888) 6 Exempt Ortegen premarks and current on the control of the center of | All other domestic foundations enter 2% of time 2131 trusts and taxable foundations only | Omers enter 9) | L | |
| Subtitle A (income) bax (domestic section 4947(a)(1) trusts and backets on the section of the s | 2 Tax under section 511 (domestic section 4947(a)(1) | Others enter -0-) | | 683. |
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| 6 Are the requirements of section 508(e) (relating to sections 4941 invogers to any 1 invogers to any | 5 Was there a liquidation, termination, dissolution, the General Instruction T | | | 1 1 1 |
| 6 Are the requirements of section. ■ By language in the governing instrument, or ■ By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state state. ↑ By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state state. ↑ By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state state. ↑ 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 ★ But a state states to which the foundation reports or with which it is registered (see instructions) ★ But a state is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) ★ But a state is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) ★ But a state is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) ★ But a state is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) ★ But a state is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) ★ But a state is a state in the state in the state is a state in the state in th | If "Yes," attach the statement required by community and through 4945 |) satisfied eldior. | | |
| By state legislation that effectively amends the governing instrument so distinct the state legislation that effectively amends the governing instrument? 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 8a Enter the states to which the foundation reports or with which it is registered (see instructions) FL 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) 8b X FL 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) g ach state as required by General Instruction G? If "No," attach explanation g ach state as required by General Instruction given the meaning of section 4942(j)(3) or 4942(j)(5) for calendar | 6 Are the requirements of section 508(e) (relating to | detany directions that conflic | t with the state law | 6 X |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year. 8a Enter the states to which the foundation reports or with which it is registered (see instructions) FL 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) 8b X 8b X 9 X 10 A state as required by General Instruction G? If "No," attach explanation 11 A state as required by General Instruction G? If "No," attach explanation 12 A state as required by General Instruction G? If "No," attach explanation to the Part XIV | | | | |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year. 8a Enter the states to which the foundation reports or with which it is registered (see instructions) FL 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) 8b X 8b X 9 X 10 A state as required by General Instruction G? If "No," attach explanation 11 A state as required by General Instruction G? If "No," attach explanation 12 A state as required by General Instruction G? If "No," attach explanation to the Part XIV | By state legislation that effectively afficials the government. | amplete Part II, col (c |), and Part XV | h-1-1- |
| 8a Enter the states to which the foundation reports or with which it is registered. FL 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) 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) 8b X 9 X 10 X | remain in the governing instrument? | if "Yes," complete that | | |
| 8a Enter the states to which the foundation reports or with which it is registered. FL 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) 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) 8b X 9 X 10 X | 7 Did the foundation have at least \$5,000 in assets 250 | turations) | | |
| b if the answer is "Yes" to line 7, has the foundation furnished a copy of office of the answer is "Yes" to line 7, has the foundation G? If "No," attach explanation of each state as required by General Instruction G? If "No," attach explanation 1 | th umin ii is i buistor o - | \ = | | |
| b if the answer is "Yes" to line 7, has the foundation furnished a copy of office of each state as required by General Instruction G? If "No," attach explanation of each state as required by General Instruction G? If "No," attach explanation 1 | 8a Enter the states to which the foundation reports of them. | and the Attorney General (or de | esignate) | 8b X |
| of each state as required by | | | | |
| of each state as required by | h If the answer is "Yes" to line 7, has the foundation G? If "No," attach expla | nation | 942(j)(5) for calendar | |
| 9 Is the foundation claiming status as a private operations for Part XIV)? If "Yes," Complete, and addresses year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," attach a schedule listing their names and addresses Form 990-PF (2015) 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses Form 990-PF (2015) | of each state as required by | Lata Dart XIV | | 10 X |
| year 2015 or the taxable year beginning in 2016 (starting the tax year? if "Yes," attach a schedule listing tree. The schedule listing tree is the schedule listing tree is the schedule listing tree. | 9 Is the foundation claiming status as a private operation of the part XI | V)? If "Yes, Complete their names af | nd addresses | Form 990-PF (2015 |
| 10 Did any persons become substantial continuous 3 | year 2015 or the taxable year beginning in 2015 (300 thing the tax year? If "Yes | s," attach a schedule listing their hands | | LOUIN 200 * - (|
| IV TO COMPANY OF THE PROPERTY | 10. Did any persons become substantial contributors desired | | | |
| - | 10 | | | |

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| orm 990-PF (2015) UAMES AND DOROTHI DITER TOURDISTEET | 419397 | 1 | Page 5 |
|--|------------|----------------|---------------|
| Part VII-A Statements Regarding Activities (continued) | | 124 | - |
| | | Yes | No |
| 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of | | | x |
| section 512(h)(13)? If "Yes." attach schedule (see instructions) | _ 11 | ┼ | ^ |
| 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges | 7 40 | | x |
| If "Yes." attach statement (see instructions) | 12 | x | _ |
| 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | 1 ^ | <u> </u> |
| Website address N/A | - 050 7 | 7700 | |
| 14. The books are in care of ► JAMES & DOROTHY BAER Telephone no. ► 30: | 3-834-4 | 1 1 0 9 | |
| located at ▶ 3203 BAYSHORE DRIVE #1502, TAMPA, FL | ▶33629 | , | |
| 15. Section 4947(a)(1) ponexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | • | T / 3 | • |
| and enter the amount of tax-exempt interest received or accrued during the year | | N/A | |
| 16 At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, | _ | _∣Yes | No |
| securities, or other financial account in a foreign country? | 16 | <u></u> | X |
| See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the | | | |
| foreign country | | | ┸ |
| Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1. During the year did the foundation (either directly or indirectly): | _ | 、 | |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person? |] No | | |
| (a) Porrow maney from lend maney to or otherwise extend credit to (or accept it from) | } | Ì | 1 |
| a disqualified person? |] No | | |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? |] No | | 1 |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? |] No | 1 | 1 |
| (4) Pay compensation to, or pay of reimburse the expenses of, a disqualified person (or make any of either available | | 1 | 1 |
| |] No | | |
| for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" | | | |
| If the foundation agreed to make a grant to or to employ the official for a period after | | Ì | |
| if the foundation agreed to make a grant to bit to employ the official for a period after |] No | | |
| termination of dovernment service, it terminating within 30 days. | _ | | 1 |
| b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations N | /A 16 |) | 1 |
| section 53 494 I(d)-3 of in a current house regarding disaster assistance (see monotone). | | | 1 |
| 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 | 10 | ; | X |
| before the first day of the tax year beginning in 2015? | | | 1 |
| 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation | ŀ | | 1 |
| defined in section 4942(j)(3) or 4942(j)(5)): | | | - |
| a 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 Yes | ∏ No I | - | |
| Defore 2015? | | | - |
| If "Yes," list the years | | | |
| 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 | I/A 21 | \ | - |
| statement - see Instructions.) | '' | +- | - |
| c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | ļ | | - (|
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | - | |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Yes Y | 77 No. | | |
| during the year? | ן טאונב | | -} |
| 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)(/)) to dispose | <i>'</i> | 1 | - |
| 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, | ļ | _ - | - |
| Form 4720, to determine if the foundation had excess business holdings in 2015.) | \sqrt{A} | - | ╌ |
| 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | <u> </u> | a | |
| 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? | | 90-P | 2 |

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| orm 990-PF (2015) JAMES AND DOROTHY BAER F | | | <u>05-04193</u> | 9/ | Page 6 |
|--|---|--|--|--------|--------------------|
| Part VII-B Statements Regarding Activities for Which I | orm 4720 May Be F | Required (contin | ued) | | |
| 5a During the year did the foundation pay or incur any amount to: | | | | | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | 1 4945(e))? | Ye | es X No | 1 | 1 ' |
| (2) Influence the outcome of any specific public election (see section 4955); o | r to carry on, directly or indire | | | | ; |
| any voter registration drive? | | | es X No | 1 | -\ |
| (3) Provide a grant to an individual for travel, study, or other similar purposes | ? | Y | es 🗶 No | ŀ | |
| (4) Provide a grant to an organization other than a charitable, etc., organization | n described in section | | | - | |
| 4945(d)(4)(A)? (see instructions) | | Ye | es 🛣 No | - 1 |] ; |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | or educational purposes, or f | | | Į. | l |
| the prevention of cruelty to children or animals? | | Ye | es X No | ļ | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und | der the exceptions described i | ın Regulations | | | ; |
| section 53.4945 or in a current notice regarding disaster assistance (see instru | ctions)? | | N/A | 5b | <u> 1 — </u> |
| Organizations relying on a current notice regarding disaster assistance check h | ere | | | Ī | Τ. |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi | rom the tax because it mainta | ined | ł | ł | 1 |
| expenditure responsibility for the grant? | N | I/A 🔲 Ye | es 🔲 No | | i ' |
| If "Yes," attach the statement required by Regulations section 53 494 | 5-5(d) | | | Ì | 1 |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to | pay premiums on | | | | 1 : |
| a personal benefit contract? | | Y6 | es X No | | - |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | ersonal benefit contract? | | 1. | 6b | X |
| If "Yes" to 6b, file Form 8870. | | | | | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | helter transaction? | Ye | es X No | , , | · |
| b If "Yes," did the foundation receive any proceeds or have any net income attribu | itable to the transaction? | | N/A | 7b | \top |
| Part VIII Information About Officers, Directors, Trust | ees, Foundation Ma | nagers, Highly | / | | |
| Paid Employees, and Contractors | , | | | | |
| List all officers, directors, trustees, foundation managers and their | compensation. | | | | |
| | (b) Title, and average hours per week devoted | (c) Compensation | (d) Contributions to employee benefit plans and deferred | (e) Ex | pense nt, other |
| (a) Name and address | to position | (If not paid, enter -0-) | and deferred compensation | allow | ances |
| JAMES F. BAER | TRUSTEE | | | | |
| 3203 BAYSHORE DRIVE #1502 | | | | | |
| TAMPA, FL 33629 | 0.00 | 0. | 0. | | 0. |
| SUSAN L. BURNS | TRUSTEE | | | | |
| 77 RIVIERA DRIVE | | | | | |
| TAMPA, FL 33606 | 0.00 | 0. | 0. | | 0. |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Compensation of five highest-paid employees (other than those inc | | enter "NONE." | | | |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Ex | pense nt, other |
| (a) Name and address of each employee paid more than \$50,000 | devoted to position | (c) Compensation | and deferred compensation | allow | ances |
| NONE | | | | _ | |
| | | | L ' | | |
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| ······································ | | | | | |
| | | | | | |
| Total number of other employees paid over \$50,000 | L | | | | 0 |

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Form **990-PF** (2015)

| Form 990-PF (2015) JAMES AND DOROTHY BAER FOUNDATION | | <u>-6419397</u> | Page 7 |
|---|--|-----------------|-----------------|
| Part VIII Information About Officers, Directors, Trustees, Foundate Paid Employees, and Contractors (continued) | tion Managers, Highly | | |
| 3 Five highest-paid independent contractors for professional services. If none, enter | | | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) C(| ompensation |
| NONE | (b) Type of service | - (0) 00 | , inperioditori |
| NONE | -√ | ł | |
| | | | |
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| | - | | |
| Total number of others receiving over \$50,000 for professional services | <u> </u> | • | 0 |
| Part IX-A Summary of Direct Charitable Activities | | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statist | tical information such as the | 7 | |
| number of organizations and other beneficiaries served, conferences convened, research papers prod | luced, etc. | Expens | ses |
| 1 N/A | | | |
| | | 7 | |
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| 3 | | | |
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| 4 | | | |
| | |] | |
| | | <u> </u> | |
| Part IX-B Summary of Program-Related Investments | | | |
| Describe the two largest program-related investments made by the foundation during the tax year on | lines 1 and 2. | Amoui | лt |
| 1 <u>N/A</u> | | | |
| | · · · · · · · · · · · · · · · · · · · | | |
| · · · · · · · · · · · · · · · · · · · | , | | |
| 2 | <u> </u> | | |
| | | _ | |
| | | | |
| All other program-related investments. See instructions | | | |
| 3 | | _ | |
| | <u> </u> | _ | |
| | | | |

Total. Add lines 1 through 3

Form **990-PF** (2015)

| P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou | ndations | , see instructions) |
|----------|---|-----------------------|-----------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| a | Average monthly fair market value of securities | 1a | 2,834,442. |
| b | | 1b | 2,834,442. 24,710. |
| C | Fair market value of all other assets | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 2,859,152. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) 1e 0 • |]] | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 2,859,152. |
| 4 | Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 42,887. |
| 5 | Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 2,816,265. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 140,813. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here i and do not complete this part.) | id certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 140,813. |
| 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.) | | |
| C | Add lines 2a and 2b | 2c | 683. |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 140,130. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 140,130. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7_ | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 140,130. |
| <u>P</u> | Qualifying Distributions (see instructions) | | |
| ١. | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | l a | 135,963. |
| a | Program-related investments - total from Part IX-B | 1b | 133,303. |
| 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. | ┝╧┼ | |
| | Suitability test (prior IRS approval required) | 3a | |
| a b | | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 135,963. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | ┝╌┼╌ | |
| ٠ | income. Enter 1% of Part I, line 27b | 5 | 683. |
| 6 | Adjusted qualifying distributions Subtract line 5 from line 4 | 6 | 135,280. |
| · | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of | | |
| | Note: The amount of the unit be used in fact v, column (b), in subsequent years when calculating whether the foundation (| ₁ umico II | 5. 110 00000H |

Form **990-PF** (2015)

| • | TIV DATE I | TAGNUO | ION | | | 19371 | |
|--|---------------------------------------|-------------|------------------|----------|-------------|-----------|----------------------|
| n 990-PF (2015) JAMES AND DORO | THY BACK I | | | | | | |
| 199011 (see instr | ructions) | | | Γ | (c) | 20 | |
| art XIII Undistributed income | (a) | Years Drif | b) or to 2014 | <u> </u> | 2014 | | |
| | Corpus | 10010 | | | | 1 | 10,130. |
| Distributable amount for 2015 from Part XI, | | | | | | | 1 |
| _ | | | | - | 133,147. | | |
| Undistributed income, if any, as of the end of 2015 | | | | | | | , |
| a Enter amount for 2014 only | | | 0 | | | | |
| b Total for prior years: | | <u> </u> | | + | | | • |
| ,, to 2015; | | 1 | | 1 | | | |
| 3 Excess distributions carryover, if any, to 2015: | | | | | | 1 | |
| aFrom 2010 | | 1 | | 1 | | } | |
| bFrom 2011 | | | | 1 | | 1 | |
| c From 2012 | | | | | | \ | |
| dFrom 2013 eFrom 2014 | (| j. | | | | 1 | |
| 4 Total of lines 3a through e | | | | \ | | 1 | |
| 1 | | 1 | | | 133,147 | <u>. </u> | |
| | | | | | | | _ |
| - 11 0014 but not mole man me - | | - 1 | | 0. | | | |
| | | | | | | | |
| relaction redilited - Sec monage | | 0. | | | | | 2,816. |
| c Treated as distributions out of corpus | | | | | | | |
| (Election required - see instructions) d Applied to 2015 distributable amount | · · · · · · · · · · · · · · · · · · · | 0. | | | | | 0. |
| - marrat digitililigo out of a c | | 0. | | | | | I |
| Excess distributions carryover applied to 2015 Excess distributions carryover applied to 2015 (if an amount appears in column (d), the same amount | | | | } | | } | |
| (if an amount appears in column (b), the same must be shown in column (a)) | | 1 | | 1 | | - 1 | |
| & Enter the net total of each column as | | | | \ | | | |
| | | 0. | | | | \ | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | | 1 | | 0. | | | |
| b Prior years' undistributed income. Subtract | L | | | | | 1 | |
| line 4b from line 2b c Enter the amount of prior years' c enter the amount of prior years' | | 1 | | | | | |
| c Enter the amount of prior years undistributed income for which a notice of | | 1 | | 0. | | | |
| undistributed income for which deficiency has been issued, or on which the section 4942(a) tax has been previously- | | | | | ·\ | | |
| | | | | 0 | .\ | | |
| d Subtract line 6c from line 60. Taxable | | | | | | | |
| | | | | | | 0. | |
| Language for VIII4. Judiace mile | | | | | | \ | |
| | | 1 | | | | 1 | 137,314 |
| 4a from line 2a Taxable and the fundistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must | : } | | | | | | |
| | <u></u> | | | | | 1 | |
| be distributed in 2016 7 Amounts treated as distributions out of | 1 | 1 | | | 1 | 1 | |
| | | 1 | | | | | |
| 170(h)(1)(F) 0F 4942(9)(C) (200 | 1 | 0. | | | | | |
| rod - CAP IIISII UCIIONO) | | | | | | | |
| a Excess distributions carryover nomination | | 0. | | | | 1 | |
| | | | | | | + | |
| Tuesda distributions carryover to 20 | \ | 0. | | | | 1 | |
| Subtract lines 7 and 8 from into 32 | | 1 | | | | 1 | |
| 10 Analysis of line 9: | | } | | | | } | |
| a Excess from 2011 | | | l | | - 1 |] | |
| b Excess from 2012 | | | | | | | 500 DE 10 |
| c Excess from 2013 dExcess from 2014 | | | | | | | Form 990-PF (|
| e Excess from 2015 | | | | | ND DOROTHY | | -orm E1026 |
| B EXCESS II OIL | | | 10 | | | DAER ' | ROOM ETGGG- |

| Part XV Supplementary Information | | | | |
|--|--|----------------------|----------------------------------|-----------------------------|
| 3 Grants and Contributions Paid During the You | | 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 | Purpose of grant or contribution | Amount |
| | or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| | } | | | |
| | | | | |
| AMERICAN CENTER FOR LAW & JUSTICE | NONE | 1 | GENERAL PURPOSE GRANT | |
| PO BOX 90555 | | | | |
| WASHINGTON, DC 20090 | ļ <u>.</u> | <u> </u> | | 5,000 |
| | 1 | | | |
| | | | | |
| DRESS FOR SUCCESS | NONE | ļ | GENERAL PURPOSE GRANT | |
| 1600 NW 3RD AVE. | | | | |
| MIAMI, FL 33136 | | | | 10,500 |
| | | | | |
| HIRSHBERG FOUNDATION FOR PANCREATIC | NONE | | GENERAL PURPOSE GRANT | |
| CANCER RESEARCH | | | | |
| 2990 SOUTH SEPULVEDA BLVD., SUITE 300C | } | | | |
| LOS ANGELES, CA 90064 | | | | 10,000 |
| · | | | | |
| JUNIOR ACHIEVEMENT OF WEST CENTRAL | NONE | | GENERAL PURPOSE GRANT | |
| FLORIDA | NONE | | GENERAL FORFOSE GRANT | |
| 13805 58TH STREET NORTH, STE 2-140 | | | | |
| CLEARWATER, FL 33760 | | <u> </u> | | 25,000 |
| | | | | |
| | | | | |
| MAGDALENE INC | NONE | | GENERAL PURPOSE GRANT | |
| BOX 6330B | \ | | 1 | |
| NASHVILLE, TN 37235 | L | <u> </u> | | _10,000 |
| ·· | TINUATION SHEE | <u>क्र(S)</u> | ▶ 3a | 134,000 |
| b Approved for future payment | Ì | | | |
| | | | | |
| NONE | 4 | | , | |
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| <u> </u> | | | <u> </u> | |
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| | | | | |
| Total | L | <u> </u> | N 01 | |
| Total | | | <u> </u> | 0 rm 990-PF (2015 |

| Part XVI-A | Analysis | of Income | -Producing | Activities |
|------------|----------|-----------|------------|-------------------|
|------------|----------|-----------|------------|-------------------|

| Enter gross amounts unless otherwise indicated. | Unrelated | ousiness income | | by section 512, 513, or 514 | (e) |
|---|-----------------|-----------------|--------------------|-----------------------------|-------------------|
| • | (a) Business | (b) | (C) Exclu- | (d) | Related or exempt |
| 1 Program service revenue: | code | Amount | sion code | Amount | function income |
| a | | | | | |
| b | | | | | |
| C | | | | | |
| d | | | | | |
| e | | | | | |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | | | |
| investments | | | 14 | 8. | |
| 4 Dividends and interest from securities | | | 14 | 31,494. | |
| 5 Net rental income or (loss) from real estate: | <u> </u> | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | <u> </u> | | | | |
| 6 Net rental income or (loss) from personal | 1 | | | | |
| property | | | | | <u></u> |
| 7 Other investment income | | | <u> </u> | | |
| 8 Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | 18 | 42,331. | <u>-</u> |
| 9 Net income or (loss) from special events | <u> </u> | | | | |
| 10 Gross profit or (loss) from sales of inventory | <u> </u> | | | | |
| 11 Other revenue; | | | | | |
| a | | | | | |
| <u> </u> | - | | | | · |
| d | | | | | |
| u | | | | | |
| 12 Subtotal Add columns (b), (d), and (e) | | | . | 73,833. | 0. |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | <u>/•1 1 </u> | 13 | 73,833. |
| (See worksheet in line 13 instructions to verify calculations.) | | | | 13 | 73,033. |
| Part-XVI-B Relationship of Activities to | | | | | |

| Line No. ▼ | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). | | | | | |
|---------------|---|--|--|--|--|--|
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| 523621 11-24- | 15 Form 990-PF (20 | | | | | |

| Pa | rt XVII | Information Regarding Transfers To and Transactions and Relationsh | ps With Noncharitable | |
|----|--------------|--|-----------------------|--------|
| | | Exempt Organizations | | |
| 1 | Did the orga | anization directly or indirectly engage in any of the following with any other organization described in section | 501(c) of | 'es No |

| the Cod | le (other than section 501(c) |)(3) organizations) o | r in section 52 | 7, relating to political orgai | nizations? | | | |
|-------------------|---|---------------------------|------------------|---------------------------------|-------------------------|---------------------------------------|------------------|--------------|
| a Transfe | ers from the reporting founda | ation to a noncharita | ble exempt or | ganization of: | | | l | |
| (1) Cas | sh | | | | | | 1a(1) | X |
| (2) Oth | ner assets | | | | | | 1a(2) | X |
| b Other tr | ansactions: | | | | | | | |
| (1) Sal | les of assets to a noncharital | ble exempt organiza | tion | | | | 1b(1) | X |
| (2) Pu | rchases of assets from a no | ncharitable exempt o | organization | | | | 1b(2) | X |
| (3) Rei | ntal of facilities, equipment, | or other assets | | | | | 1b(3) | X |
| (4) Rei | imbursement arrangements | | | | | | 1b(4) | X |
| | ans or loan guarantees | | | | | | 1b(5) | X |
| | rformance of services or me | mbership or fundrai | sing solicitatio | ns | | | 1b(6) | X |
| c Sharing | of facilities, equipment, ma | iling lists, other asse | ts, or paid em | ployees | | | 1c | X |
| d If the ar | nswer to any of the above is | "Yes," complete the | following sche | dule. Column (b) should al | ways show the fair | market value of the goods, of | her assets, | |
| or servi | ices given by the reporting fo | oundation. If the four | ndation receive | ed less than fair market vali | ue in any transactio | n or sharing arrangement, sh | ow in | |
| column | (d) the value of the goods, | other assets, or serv | ices received | | | | | |
| (a)Line no | (b) Amount involved | (c) Name of | noncharitable | exempt organization | (d) Description | n of transfers, transactions, and s | haring arrangem | ents |
| | | | N/A | | | | | |
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| | | | | | | | | |
| 2a Is the fo | oundation directly or indirect | lly affiliated with; or i | related to, one | or more tax-exempt organ | izations described | | | |
| ın sectio | on 501(c) of the Code (other | than section 501(c) | (3)) or in sect | ion 527 ? | | | Yes 🔀 | No |
| b If "Yes," | complete the following sche | edule. | | | | | | |
| | (a) Name of org | anization | | (b) Type of organization | | (c) Description of relationsh | ip | |
| | N/A | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
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| | | | | | | | | |
| | der penalties of perjury, I declare to belief, it is true, correct, and con | | | | | May | the IRS discuss | this |
| Sign K | Deller, it is true, correct, and con | | | (axpayer) is based on an inion | mation of which prepare | show | n with the prepa | rer str)? |
| Here | 2000H | 1200 m | | 11/10/16 | SIGNE | R | Yes | No |
| S | ignature of officer or trustee | | | Date | Title | | | |
| | Print/Type preparer's na | | Preparer's s | gnature | Date | Check If PTIN | | |
| | MIGUEL G. | FARRA, | Z | LATO | 19/-1. | self- employed | | |
| Paid | CPA | | SX: | | 10/3/16 | | 078938 | 3 |
| Prepare | THIN O HALLO P 22022 | RISON, BR | OWN, A | RGIZ & FARRA | , LLC | Firm's EIN ▶ 01-07 | 20052 | |
| Use Onl | - | | | | | <u> </u> | | |
| | | | | NUE, 18TH FI | JOOR | | | |
| | <u>MI</u> | AMI, FL 3 | 3131_ | | | | <u>373-55</u> | |
| | | | | | | For | m 990-PF | (2015) |

JAMES AND DOROTHY BAER FOUNDATION 65-6419397 PAGE OF Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (c) Date acquired (mo., day, yr.) (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo, day, yr.) 1a BESSEMER 9D7N88 P VARIOUS 12/31/15 b BESSEMER 9D7N88 P VARIOUS 12/31/15 c BESSEMER 9D3Q73 P VARIOUS 12/31/15 d BESSEMER 9D3Q73 12/31/15 P VARIOUS e BESSEMER 9D3Q92 VARIOUS 12/31/15 P BESSEMER 9D3Q92 VARIOUS 12/31/15 h m Π 0 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) <3,007.> <3,007.> 13,910. 13,910. <6,855.> <6,855.> 36,779. 36,779. <2,722. 4,226. <2,722.> 4,226. m n Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) (i) F M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any <3,007.> a 13,910. <u><6,855.</u>> <u>36,779.</u> $\overline{<2.722.}>$ 4,226. m n { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } 42,331. 2 Capital gain net income or (net capital loss) 2

If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8

Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)

N/A

| 3 Grants and Contributions Paid During the ' | | | | |
|---|--|--------------------------------------|--|--------|
| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| | or substantial contributor | Toopion | | |
| METROPOLITAN MINISTRIES, INC. | NONE | | GENERAL PURPOSE GRANT | |
| 2002 N FLORIDA AVE | | | | F 00 |
| TAMPA, FL 33602 | | | | 5,00 |
| THE FRANCISCAN CENTER SUN COAST POST TRAUMA RETREAT | NONE | | GENERAL PURPOSE GRANT | |
| 3010N. PERRY AVE | | | | |
| TAMPA, FL 33603 | | | | 35,00 |
| | | | | |
| THE FUND FOR AMERICAN STUDIES 1706 NEW HAMPSHIRE AVE NW | NONE | | GENERAL PURPOSE GRANT | |
| WASHINGTON, DC 20009 | | | | 3,00 |
| UCLA (DR. REBER'S PANCREATIC | NONE | | GENERAL PURPOSE GRANT | |
| RESEARCH) | | ļ | | |
| 405 HILGARD AVE. LOS ANGELES, CA 90095 | | | | 20,00 |
| | | <u> </u> | | |
| WHEELS OF SUCCESS | NONE | | GENERAL PURPOSE GRANT | |
| 5420 W. CYPRESS ST. | | | 1 | |
| TAMPA, FL 33607 | | | | 10,50 |
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| Total from continuation sheets | | | | 73,50 |

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ 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.lrs.gov/form990.

OMB No 1545-0047

Employer identification number

2015

Name of the organization

-- ----

| | DAMES AND DOROTHY BAER FOUNDATION | 65-641939/ |
|---|--|--|
| Organization type (chec | k 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 | |
| | n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru | ule See instructions |
| General Rule | | |
| | tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling any one contributor. Complete Parts I and II. See instructions for determining a contributor | |
| Special Rules | | |
| sections 509(a)(any one contribu | tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a utor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amou EZ, line 1. Complete Parts I and II | , or 16b, and that received from |
| year, total contr | tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from abutions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or education of cruelty to children or animals. Complete Parts I, II, and III | |
| year, contributio is checked, ente purpose Do not | tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from one exclusively for religious, charitable, etc., purposes, but no such contributions totaled mer here the total contributions that were received during the year for an exclusively religious to complete any of the parts unless the General Rule applies to this organization because able, etc., contributions totaling \$5,000 or more during the year | ore than \$1,000 If this box s, charitable, etc , |
| but it must answer "No" | n that is not covered by the General Rule and/or the Special Rules does not file Schedule I on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its F eet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF) | , |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

| TAMES | ΔND | DOBOTHA | BAER | FOINIDA | $T \cap T \cap X$ |
|-------|-------------|---------|------|---------|-------------------|

65-6419397

| Part I | Contributors (see instructions) Use duplicate copies of Part I if | additional appears a pooded | 3 041/33/ |
|-------------|---|-----------------------------|---|
| | · | | 1.0 |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | DOROTHY BAER IRREVOCABLE CLUT 3203 BAYSHORE DRIVE #1502 TAMPA, FL 33629 | s49,741. | Person X Payroll |
| (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 |
| (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 |
| 523452 10-2 | | \$Schedule R (Form | Person Payroll Noncash (Complete Part II for noncash contributions) 1990, 990-EZ, or 990-PF) (2015) |

Employer identification number

JAMES AND DOROTHY BAER FOUNDATION

65-6419397

| Part II | Noncash Property (see instructions) Use duplicate copies of Part II | ıf addıtıonal space is needed | |
|------------------------------|---|--|--------------------------------|
| (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 |
| | | _ _ _ \$ | |
| (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 |
| | | _ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | _ | |
| 523453 10-26 | · 15 | Schedule B (Form 9 | 990, 990-EZ, or 990-PF) (2015) |

| lame of org | anization | | Employer identification number |
|-----------------|--|---|---|
| AMES | AND DOROTHY BAER FOUND | ATION | 65-6419397 |
| Part III | Exclusively religious, charitable, etc., con the year from any one contributor. Complete | tributions to organizations described | d in section 501(c)(7), (8), or (10) that total more than \$1,000 for |
| | completing Part III, enter the total of exclusively religion | us, chantable, etc., contributions of \$1,000 or | or less for the year (Enter this info once) \$ |
| | Use duplicate copies of Part III if addition | nal space is needed | |
| (a) No. from | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| Part I | (2). 2. pose o. g | (6, 656 6, g.). | (a) 2000 paol of not give to more |
| | | | |
| | | | |
| 1 | | | |
| Γ | | (e) Transfer of gif | ft |
| | | | |
| į. | Transferee's name, address, a | nd ZIP + 4 | Relationship of transferor to transferee |
| | | | |
| | | | |
| ı | |] | |
| (a) No. | | | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | | | |
| | | | |
| - | | / \= | |
| | | (e) Transfer of gif | π |
| ļ | Transferee's name, address, a | nd ZIP + 4 | Relationship of transferor to transferee |
| | | | |
| J | | | |
| Ī | | | |
| (a) No | | , | |
| (a) No. from | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| Part I | | | |
| | | | |
| | | | |
| Ĺ | | | |
| | | (e) Transfer of gif | ft |
| 1 | | | |
| - | Transferee's name, address, a | nd ZIP + 4 | Relationship of transferor to transferee |
| | | | |
| | | | |
| 1 | | | |
| (a) No. | (In) Design on a faith | (a) Has at with | (d) December of how wife in held |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| 1 | | | |
| | | | |
| | | | |
| - | | (e) Transfer of gif | |
| | | (e) transfer of gir | n. |
| | Transferee's name, address, a | nd ZIP + 4 | Relationship of transferor to transferee |
| | | | |
| | | | |
| | | | |
| | | | |
| 23454 10-26- | 15 | | Schedule B (Form 990, 990-EZ, or 990-PF) (20 |

| FORM 990-PF IN | TEREST | ON | SAVIN | GS ANI | TEM | PORAI | RY (| CASH | IN | VESTMENTS | នា | PATEMENT | 1 |
|---|------------------|------------|------------|-------------------------|-----------------------|----------|----------------|----------------------|----------|------------------------------|-----|-------------------------------|-------------|
| SOURCE | | | | F | A) REVE ER B | NUE | | NET | IN | (B) VESTMENT COME | Ŋ | (C) ADJUSTED NET INCOME | 3 |
| BESSEMER TRUST BESSEMER TRUST BESSEMER TRUST SUNTRUST BANK - | - 3Q92 - 7N88 | ł | | | | 3 | 1. 2. 3. | | | 1. 2. 3. 2. | | | |
| TOTAL TO PART I | , LINE | 3 | | | | 8 | 3. | | | 8. | | | |
| FORM 990-PF | | DIVI | DENDS | AND I | NTER | EST I | FRON | 1 SEC | CUR: | ITIES | Sī | PATEMENT | 2 |
| SOURCE | | GRC AMC | SS OUNT | GA | PITAL LINS DEND | | REV | (A) /ENUI BOOF | | (B) NET INVE: MENT INC | | (C) ADJUSTE NET INCO | _ |
| BESSEMER TRUST 3Q73 BESSEMER TRUST | - - | 18 | 3,503. | | | 0. | 1 | L8,50 | 03. | 18,5 | 03. | | |
| 3Q92 BESSEMER TRUST 7N88 | | | 2,150. | | | o. o. | 1 | 2,15 10,84 | | 2,1 10,8 | | | |
| TO PART I, LINE | 4 | 31 | ,494. | | | 0. | 3 | 31,49 | 94. | 31,49 | 94. | | |
| FORM 990-PF | | | | I | ÆGAL | FEES | 5 | | | | SI | ATEMENT | 3 |
| DESCRIPTION | | | | (A) EXPENS PER BO | ES | | |) /EST- ICOME | | (C) ADJUSTEI NET INCOM | | (D) CHARITAE PURPOSE | |
| LEGAL FEES | | | | | 750. | | | 375 | <u> </u> | | | 37 | 75. |
| TO FM 990-PF, P | G 1, L | N 16 | 5A | | 750. | | | 375 | 5. | | | 37 | 75. |
| | | | | | | | | | = | | | | = |

| FORM 990-PF | ACCOUNTI | NG FEES | S | TATEMENT 4 |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| ACCOUNTING FEES | 2,965. | 1,483. | | 1,482. |
| TO FORM 990-PF, PG 1, LN 16B | 2,965. | 1,483. | | 1,482. |
| FORM 990-PF | TAX | ES | S | TATEMENT 5 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| FOREIGN TAXES | 177. | 177. | | 0. |
| TO FORM 990-PF, PG 1, LN 18 | 177. | 177. | | 0. |
| FORM 990-PF | OTHER E | XPENSES | S | TATEMENT 6 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| INVESTMENT EXPENSE | 3,591. | 3,485. | | 106. |
| TO FORM 990-PF, PG 1, LN 23 | 3,591. | 3,485. | | 106. |
| | | = | | |