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

2015

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

For ca	<u>lenda</u>	r year 2015, or t	ax year beginnin	g	, 2015	, and ending		,	
THE	EDW.	ARDS FAMIL	Y FOUNDATIO)N			Α	Employer identification nur 94-3302319	nber
317	RAM	ONA RD VALLEY, C					В	Telephone number (see inst	ructions)
		,				ı	С	If exemption application is	nending check here
G Cho	eck a	Il that apply:	Initial return	ſ	Initial return of a form	mer nublic charity	_		
-			Final return	Ì	Amended return	nor public onanty	D	1 Foreign organizations, chec	k here
			Address chang		Name change			2 Foreign organizations meet here and attach computation	ing the 85% test, check
H Cho		pe of organization	on: X Sect		1(c)(3) exempt private f	foundation private foundation	_	·	Ļ
I Fair		et value of all assets			counting method X C		Ε	If private foundation status under section 507(b)(1)(A)	, check here
(fro	m Part	'II, column (c), line 1	6)		Other (specify)		F	If the foundation is in a 60	-month termination =
► \$				(Part I	, column (d) must be or	n cash basis)		under section 507(b)(1)(B)	
rait	E co sa	olumns (b), (c), a	total of amounts ii and (d) may not i nounts in column	neces-	(a) Revenue and expenses per books	(b) Net investmer income	nt	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1		s, etc, received (attach sched	ule).	105,000.				
ಡಾ	2	Ck ►if the four	ndation is not required to att	ach Sch B					
20%	3	-	emporary cash investments		45,000.	45,00	Ο.	45,000.	\$
် က သ	4 5a	Dividends and interest fro Gross rents	om securities				_		
		Net rental income or (loss)			,			*	*
₹ R E	6 6	Net gain or (loss) from sa Gross sales price for							,
` <u>V</u>	7	assets on line 6a		20	,× 4,	,			*
EXUE	8	Net short-term capital	ome (from Part IV, line al gain	2)	تى ئ				
JUNION	9	Income modification	s.		\$5 65 3 71				
~ -	102	returns and allowances			5. 65				
5	t	Less Cost of goods sold			ŗ	¥.			
	l	Gross profit or (loss) (atta	•			R'r 3			, x
	11	Other income (attack	n schedule)						*
	12	Total. Add lines 1	through 11		150,000.	45,00	0.	45,000.	
	13	Other employee sala	icers, directors, trustee	s. etc	0.				
	15	Pension plans, empl	~						
A		Legal fees (attach so	=						
D M I		 Accounting fees (attage) Other prof fees (attage) 	,	it 1	750.	75	0.		
0 N	17	Interest			,				
PERA	18	Taxes (attach schedule)(se	,	m 2.	10 192.	19	2.		
ÄÄ	19	Depreciation (attach schedule) and deple		no 2	0.73				
I V	20	Occupancy		υ , t	12				
	21 22	Travel, conferences, Printing and publicat	-	••••					
A E N X D P	23	Other expenses (atta			\" \" \" \" \" \" \" \" \" \" \" \" \" \			_	
E N S			<u>ee Statemer</u>	<u>nt 3</u>	60.	6	0.		
S E S	24	Total operating and expenses. Add lines	13 through 23		1,002.	1,00	2		
•	25	Contributions, gifts, grants	s paid Part	ΧV	87,599.	1,00			87,599
	26	Total expenses and Add lines 24 and 25			88,601.	1,00	2.	0.	87,599
	27	Subtract line 26 from Excess of revenue of							
		and disbursements			61,399.		_	<u> </u>	
	l		me (if negative, enter	•		43,99	8.		
	ıC	. Adiusted net incomi	 (if negative, enter -0- 	1				45 000	

Parí	300 7	Balance Sheets	column should be for end-of-year amounts only	Beginning of year		nd o	
			(See instructions)	(a) Book Value	(b) Book Valu		(c) Fair Market Value
	1	Cash — non-interest	-	142,183.	147,2	03.	
	2	•	ary cash investments				
	3	Accounts receivable Less: allowance for					
			doubtiui accounts -				
	4	Pledges receivable Less: allowance for	doubtful coccupts				
	5	Grants receivable				_	
	1		and disasters twisters and other		<u>. </u>		
	6	disqualified persons (atta	cers, directors, trustees, and other ch schedule) (see instructions).				
	7	Other notes and loans rec					
ŝ		Less: allowance for		647,998.	534,3	77.	
A S S E T	8	Inventories for sale					
Ţ	9	Prepaid expenses a	· ·				-
S		obligations (attach s	· · · · · · · · · · · · · · · · · · ·				
	l	b Investments — corporate	· · · · · · · · · · · · · · · · · · ·				·
		c Investments — corporate	· · · · · · · · · · · · · · · · · · ·				
	11	Investments – land, equipment: basis	buildings, and				
		Less accumulated deprec (attach schedule)	nation •				
	12	Investments - morte	gage loans				
	13	Investments - other	(attach schedule) Statement 4		170,0	00.	159,960.
	14	Land, buildings, and	equipment: basis►				
		Less: accumulated deprec (attach schedule)	eration				
	15	Other assets (descri	be ►				
	16	Total assets (to be see the instructions	completed by all filers — Also, see page 1, item I)	790,181.	851,5	80.	159,960.
Ļ	17	Accounts payable ar	nd accrued expenses				
À	18	Grants payable					·
В	19	Deferred revenue					
Ļ	20	•	tors, trustees, & other disqualified persons.				
÷	21	* *	s payable (attach schedule)				
- 1	22	Other liabilities (des	cribe)				!
	23		lines 17 through 22)	0.		0.	-
		Foundations that fo and complete lines	llow SFAS 117, check here. X 24 through 26 and lines 30 and 31.				
NF	24	Unrestricted		790,181.	851,5	80.	
Ë U T N	25	Temporarily restricted	ed				
D	26	Permanently restrict					
ASSETSN		Foundations that do and complete lines	o not follow SFAS 117, check here 27 through 31.				
E L T A	27	Capital stock, trust p	orincipal, or current funds .				
ŚÑ	28	Paid-in or capital surplus	, or land, bldg., and equipment fund				
O E	29	Retained earnings, accum	ulated income, endowment, or other funds			·	
ŔŠ	30	Total net assets or f	fund balances (see instructions) .	790,181.	851,5	80.	
	31	Total liabilities and (see instructions)	net assets/fund balances	790,181.	851,5		
Pan		Analysis of Chan	iges in Net Assets or Fund Balance	es			
1	Tota end-	I net assets or fund b of-year figure reporte	alances at beginning of year - Part II, colu d on prior year's return)	ımn (a), line 30 (must aç	gree with	1	790,181.
2	Ente	er amount from Part I,	line 27a			2	61,399.
3	Other	increases not included in li	ne 2 (ıtemize) ►			3	,
4	Add	lines 1, 2, and 3				4	851,580.
5		ases not included in line 2				5	
6_	Tota	I net assets or fund b	alances at end of year (line 4 minus line 5)	– Part II, column (b), II	ne 30	6	851,580.

(a) List and descri	be the kind(s) of property sold (e.g , ruse; or common stock, 200 shares ML	eal estate.	(b) How acquired P — Purchase D — Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a N/A		 _			
b					
С					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa		(h) Gain o (e) plus (f) r	r (loss) minus (g)
а					
b					
С					
е					
	owing gain in column (h) and owned b	by the foundation on 12/31		(I) Gains (Co	
(i) F.M.V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col. (j), if any		gain minus col. (k), an -0-) or Losses (
a					
b					
С					
d					
е					
2 Capital gain net income or (enter in Part I, line 7 ter -0- in Part I, line 7	_ 2		
Net short-term capital gain o	or (loss) as defined in sections 1222(5)) and (6):		 	
If gain, also enter in Part I, I in Part I, line &	ine 8, column (c) (see instructions). If	f (loss), enter -0-	_		
	er Section 4940(e) for Reduce	d Tax on Net Investo		<u> </u>	
	section 4942 tax on the distributable a ualify under section 4940(e) Do not c		base period?	XYes	No
1 Enter the appropriate amount	in each column for each year, see the ins	structions before making any	entries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as	ssets (col	(d) Distributio . (b) divided by	n ratio col. (c))
2014					
2013					
2012		· · · · · · · · · · · · · · · · · · ·			
2011				<u> </u>	
2010					
		<u> </u>			
2 Total of line 1, column (d)			2		
	the 5-year base period — divide the filting has been in existence if less than		the 3		
4 Enter the net value of nonch	naritable-use assets for 2015 from Par	t X, line 5	4	<u> </u>	
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investment	income (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		
8 Enter qualifying distributions	s from Part XII, line 4		8		

Forn	1 990-PF (2015) THE EDWARDS FAMILY FOUNDATION 94-3302319		Pa	ge 4
Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instruction	ıs)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter: (attach copy of letter if necessary – see instrs)			
ŧ	Domestic foundations that meet the section 4940(e) requirements in Part V,		88	30.
	check here ► and enter 1% of Part I, line 27b			
•	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		88	30.
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-		8.8	30.
6	Credits/Payments:		- 00	
ä	a 2015 estimated tax pmts and 2014 overpayment credited to 2015			
	Exempt foreign organizations — tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld 6d			
7				$\overline{}$
8				<u>0.</u>
		-		4.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	$\overline{}$	88	34/
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11 1025	Enter the amount of line 10 to be: Credited to 2016 estimated tax			
لكاكل	Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			<u>No</u>
	participate or intervene in any political campaign?	1 a		<u>X</u>
ŀ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes			
	(see Instructions for the definition) ³	1 b		X
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		i	
	Did the foundation file Form 1120-POL for this year?	1 c		X
•	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation \$\ 0 (2) On foundation managers \$\ 0 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
•	foundation managers			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		v
-	If 'Yes,' attach a detailed description of the activities			X
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	2		Ţ
Α.	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3	-+	<u>X</u>
	of 'Yes,' has it filed a tax return on Form 990-T for this year?	4a		<u>X</u>
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	4 b	_N/2	
3	· · · · · · · · · · · · · · · · · · ·	3		Х
c	If 'Yes,' attach the statement required by General Instruction T	i	1	
О	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or		1	
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 	6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV	7	X	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶		Ŷ	
	N/A			
ŧ	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		į	
	(or designate) of each state as required by General Instruction G? If 'No,' attach explanation .	8 b	Х	_
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	9	X	
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10		<u></u>

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rai	Statements Regarding Activities (continued)		_			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)			11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified pers advisory privileges? If 'Yes,' attach statement (see instructions)	on had		12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption	applicat	ion?	13	_X	
	Website address • N/A					
14	The books are in care of ► GLORIA S EDWARDS Telephone	no ►	650-8	51-7	720	
	Located at ► 317 RAMONA RD PORTOLA VALLEY CA ZIP + 4 ►	9402	28			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here			N/Ā	•	
	and enter the amount of tax-exempt interest received or accrued during the year	<u> </u>	15			N/A
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority bank, securities, or other financial account in a foreign country?	over a		16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country			14.44 12.		
Pai	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.			1	Yes	No
1 a	During the year did the foundation (either directly or indirectly):	_			9 8 g c	138
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	XNo	*		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	─ □Yes	XNo		* 4	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	_	_			
	for the benefit or use of a disqualified person)?	Yes	X No	4		
	(6) Associate and management to a consumer of the 12 (Free extreme Object Medical States		_		. W.	***
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination	_				***
	of government service, if terminating within 90 days.)	Yes	X No	1,25	:	
Ŀ	olf any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)	_		5		
		?		1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here	•		4		
•	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?			1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			17.1	i de	* 3
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 before 2015?	_				
		Yes	X No			1
	If 'Yes,' list the years ► 20 , 20 , 20 , 20					
ŧ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942 (all years listed, answer 'No' and attach statement — see instructions)	(a)(2) a)(2) to		2 b	N.	/A
(If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years	nere		250		T. je
	► 20 , 20 , 20 <u>, 20 </u> .				ું સુધ્યું દ	1
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business	_			44	
	enterprise at any time during the year?	Yes	X No		4-14-2 1	
ŀ	olf 'Yes,' did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			184		2.4
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approve by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or	d				
	(3) the lapse of the 10-, 15-, or 20-year first phase holdings error? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.)			ATTES .	N. Kar	Para vis
	determine if the foundation had excess business holdings in 2015.)	•		3ь	N	/A
4 8	Did the foundation invest during the year any amount in a manner that would jeopardize its					۱
	charitable purposes?	•	•	4a		Х
ı	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?			<u> </u>	siji k	Х
RΔΔ			··· ··	rm 99	DE /	

ParitVIIIB Statements Regarding Activiti		4720 May Be Req	uired (cc	ntinue	d)			
5a During the year did the foundation pay or incu	r any amount to:			_	_			
(1) Carry on propaganda, or otherwise attemp	_			Yes	X N	0		
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registra		4955); or to carry		Yes	XN	o		
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?		Yes	XN	0		
(4) Provide a grant to an organization other the in section 4945(d)(4)(A)? (see instructions	nan a charitable, etc, or i)	ganization described		Yes	XN	0		
(5) Provide for any purpose other than religion educational purposes, or for the prevention				Yes	XN	lo	1	
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to d a current notice regard	qualify under the excep ling disaster assistance	tions	_	_			7 /3
Organizations relying on a current notice rega	rding disaster assistanc	e check here		•	· 🗍		b]	N/A
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	the foundation claim existing the state of the grant?	emption from the	N/A	Yes		lo	The state of the s	
If 'Yes,' attach the statement required by Regi	ulations section 53 4945	5-5(d).		_		i		
6a Did the foundation, during the year, receive ar on a personal benefit contract?		,	•	Yes	XN			
b Did the foundation, during the year, pay premi	iums, directly or indirec	tly, on a personal bene	fit contract	?		6	ь	X
If 'Yes' to 6b, file Form 8870 7 a At any time during the tax year, was the found	dation a party to a prohi	ibited tax shelter transa	ction?	Yes	XN	lo		*
b If 'Yes,' did the foundation receive any procee				∟	N		' b	-
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manag	gers, Hig	hly Pa			es,	
and Contractors	<u> </u>							
1 List all officers, directors, trustees, foundation			 _					
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	plans a	ibutions yee bene nd defer ensation	efit red	(e) Expe	ense ac r allowa	
ROSSER B EDWARDS JR	PRES	0.			0.			0.
1232 BERNAL DR BURLINGAME, CA 94010	0							
2 Compensation of five highest-paid employees (or	ther than those included	on line 1 – see instructio	ns). If none	enter 'N	ONE.'			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	plans a	butions ee bene nd defer ensation	efit red	(e) Expe	ense ac r allowa	
None			оср			_		
					\dashv			
				_				
	•							
	<u></u>	<u></u>	<u></u>		\perp			
Total number of other employees haid over \$50 000	_							0

	and Contractors (continued)		
3	Five highest-paid independent contractors for professional services (see instruction	ns). If none, enter 'NONE.'	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Non	e		
	-		
			<u> </u>
Total	number of others receiving over \$50,000 for professional services.	_	0
Pari	Summary of Direct Charitable Activities		
1			
organiz	e foundation's four largest direct charitable activities during the tax year. Include relevant statistical informat ations and other beneficiaries served, conferences convened, research papers produced, etc	ion such as the number of	Expenses
1	NONE		<u> </u>
2			
3			
		- 	
4			
7			
<u>li Eln</u>	Summary of Program-Related Investments (see instructions)		
Descr	tibe the two largest program-related investments made by the foundation during the tax year	r on lines 1 and 2.	Amount
1			
	<u>N/A</u>		
2			
All of	ther program-related investments. See instructions		<u> </u>
3			
-			
Total.	Add lines 1 through 3	•	0.
BAA			Form 990-PF (2015)

Par	Minimum Investment Return (All domestic foundations must complete this part. F see instructions.)	oreign foui	ndations,
а	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes: Average monthly fair market value of securities	1 a	
b	Average of monthly cash balances	1 b	
C	Fair market value of all other assets (see instructions)	1 c	-
d	Total (add lines 1a, b, and c)	1 d	0.
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation) 1 e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	Ō.
6	Minimum investment return. Enter 5% of line 5	6	0.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper	ating found	
	and certain foreign organizations check here ► X and do not complete this part.)		
1	Minimum investment return from Part X, line 6 N/A	1	
2a	Tax on investment income for 2015 from Part VI, line 5.		
Ь	Income tax for 2015 (This does not include the tax from Part VI)		
	Add lines 2a and 2b	2 c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
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	
Par	Qualifying Distributions (see Instructions)	l l	
1 a	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1 a	87,599.
b	Program-related investments — total from Part IX-B	1 b	0.,,055.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	.
3 a	Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required)	3 a	
b	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	87,599.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	87,599.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the forqualifies for the section 4940(e) reduction of tax in those years	oundation	

Part XIII Undistributed Income (see instr	uctions)	N/A		
	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
Distributable amount for 2015 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2015:			· · · · · · · · · · · · · · · · · · ·	
a Enter amount for 2014 only				
b Total for prior years: 20, 20, 20				
3 Excess distributions carryover, if any, to 2015			<u> </u>	
a From 2010				
b From 2011				
c From 2012.				
d From 2013				
e From 2014		_		
f Total of lines 3a through e				
4 Qualifying distributions for 2015 from Part				
XII, line 4: ► \$				
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required – see instructions)				
d Applied to 2015 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2015				
(If an amount appears in column (d), the same amount must be shown in column (a))				
Same amount must be shown in column (a)				
6 Enter the net total of each column as				
indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b 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				
d 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				
f 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. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:				
a Excess from 2011 .				
b Excess from 2012 .				
c Excess from 2013		}		
d Excess from 2014				
e Excess from 2015				

the trace operating to a make					
1 a If the foundation has received a ruling or dete is effective for 2015, enter the date of the	rmination letter that if	t is a private operatir	ng foundation, and th		10/10/98
b Check box to indicate whether the foundat	•	rating foundation de	escribed in section	X 4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year	- Constitution at	Prior 3 years	11 13 12()(0) 01	131207(0)
income from Part I or the minimum investment return from Part X for	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
each year listed	0.	\.,\	(0) = 1 1	(4)	0.
b 85% of line 2a .					0
 Qualifying distributions from Part XII, line 4 for each year listed 	87,599.	80,400.	92,900.	78,200.	339,099
d Amounts included in line 2c not used directly for active conduct of exempt activities		· · ·	·	<u> </u>	0.
 Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 	87,599.	80,400.	92,900.	78,200.	339,099
3 Complete 3a, b, or c for the alternative test relied upon:	,			-,	
a 'Assets' alternative test — enter:					
(1) Value of all assets.		790,181.			790,181.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i).					0.
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed				-	
c 'Support' alternative test — enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)				<u> </u>	
(3) Largest amount of support from an exempt organization					
(4) Gross investment income		-			
Pant XV Supplementary Information	(Complete this	part only if the	foundation had	\$5,000 or more	in
assets at any time during th		structions.)			
1 Information Regarding Foundation Manag		00/ -645- 1-1-1			
a List any managers of the foundation who have close of any tax year (but only if they have None	e contributed more the	an 2% of the total co han \$5,000) (See s	ntributions received t section 507(d)(2))	by the foundation bet	ore the
b List any managers of the foundation who own	10% or more of the	stock of a corporation	o (or an equally large	nortion of the owner	ship of
a partnership or other entity) of which the None	foundation has a 10	% or greater intere	st.	portion of the owner	
2 Information Regarding Contribution, Gran	nt. Gift. Loan. Schol	arship, etc. Program	ms:		
Check here ► X if the foundation only ma requests for funds. If the foundation make	kes contributions to p	reselected charitable	e organizations and d	loes not accept unso nizations under oth	licited er conditions,
a The name, address, and telephone number or	e mail address of th	e nerson to whom an	onlications should be	addressed	
a the hame, address, and telephone humber of	C-mail address of th	e person to whom ap	prications should be	addressed.	
b The form in which applications should be s	submitted and inforr	nation and material	ls they should inclu	de:	
c Any submission deadlines:		·			
y					
d Any restrictions or limitations on awards, s	such as hy goograph	ucal areas short-	la fields kinds of t	netitutione er ether	factors
a rity restrictions of inflications on awards, s	sacii as by geograpi	iisai areas, Chanlat	de neius, kinus Ul I	nadiations, or other	iaciois.

3	Grants and Contributions Paid During the Ye	ar or Approved for Fut	ure Paymen	ıt	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of		Amount
	Name and address (home or business)	substantial contributor	recipient		
	Paid during the year				
See	Statement 5		<u> </u>		
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	Total			► 3a	87,599.
p	Approved for future payment				
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		L			<u></u>
	Total			> 31	ol

nter gross amounts unless otherwise indicated	Unrelated	d business income	Excluded	by section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions.)
a			<u> </u>		
b					
ď	+				
e	 				
f	+				_ -
g Fees and contracts from government agencies	1				
2 Membership dues and assessments.		· · · · · · · · · · · · · · · · · · ·			
3 Interest on savings and temporary cash investments			1	45,000.	
4 Dividends and interest from securities			1		
5 Net rental income or (loss) from real estate:	A. 48. 1844				
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory	 		<u> </u>		
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory	Castolio Maria	The state of the s		* ***	
11 Other revenue:	55 Cal (1997)	* * A * * * * * * * * * * * * * * * * *	3.2 Vi.	4.5 1.42 3 (7)	
a b					
<u> </u>	 				
d	+		 		
e					
12 Subtotal Add columns (b), (d), and (e)	CH1901 2		1136	45,000.	
13 Total. Add line 12, columns (b), (d), and (e)	2 - 1 - Andrews 77			13	45,000
See worksheet in line 13 instructions to verify calculate	tions)			_	
DarkWI De Bolationship of Activities to the	- Accompli	chmont of Evomo	t Durns		
Relationship of Activities to the	e Accompi	Sillient of Exemp	crurpo)5 C 5	
Line No. Explain below how each activity for which accomplishment of the foundation's exemp	income is repo	rted in column (e) of F	art XVI-	A contributed importantly	y to the
▼ accomplishment of the foundation's exemp	ot purposes (ot	her than by providing f	unds for	such purposes). (See in	istructions.)
N/A					
		_ _			
					
i i					

Form 990-PF (2015) THE EDWARDS FAMILY FOUNDATION 94-3302319 • Part Will Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

								Yes	No
desci	he organization dire ribed in section 501 ing to political orgar	(c) of the Code (engage in any of the following other than section 501(c)(3) o	g with any rganization	other organizations) or in section 5	n 527,	1	res	No
a Trans	sfers from the repo	rting foundation to	o a noncharitable exempt org	anization o	of:		ì .		
(1)	Cash						1 a (1)		X
(2)	Other assets						1 a (2)		X
	r transactions:								
` .	Sales of assets to a				•		16(1)		<u>X</u>
• •			table exempt organization			•	1 b (2)		X
	Rental of facilities, e	•	er assets				1 b (3)		X
` '	Reimbursement arra	3				•	1 b (4)		<u>X</u>
• • •	oans or loan guara		h 6 d				1 b (5)		X
• •			hip or fundraising solicitations				1 b (6)	\vdash	X
C Silai	ing of facilities, equ	пртвент, тапту і	ists, other assets, or paid em	pioyees			_ 1 c	[<u>.</u>	<u> </u>
the g	oods, other assets, o	r services given by	' complete the following sche the reporting foundation. If the show in column (d) the value	foundation	received less than	ı faır market value	e in	ue of	
(a) Line no.			of noncharitable exempt organization	_ `	d) Description of tran			ngement	
N/A	(-)	(4)	<u> </u>	<u> </u>	, ,	,		3	
								-	
	 								
					<u> </u>				
	 								
	 				 -				
				-			<u> </u>		
	 								
	 								
									
2a Is the desc	foundation directly or the foundation for the following th	or indirectly affiliate (c) of the Code (ed with, or related to, one or mo	re tax-exer or in section	npt organizations on 527?		. Ye	• X	No
b If 'Ye	es,' complete the fo	llowing schedule.			_				
	(a) Name of organ	iization	(b) Type of organiza	ition	(с) Description of	relationship		
N/A									
					 				
	<u> </u>								
					 -				
	der negatives of neguror 1	declare that I have eva	mined this return, including accompany	ına echedulee	and statements and to	n the best of my know	ledge and helief	it is true	
cor	rect, and complete Decla	ration of preparer (other	r than taxpayer) is based on all information	ation of which	preparer has any know	ledge			·•
Sign		\Box	1.5	,,			May the this retu	rn with th	he
Here	Ulle		7 6-5-	16	PRES		preparer (see ips	ructions)	pelow
	Signature of officer or trust		Date		Title		<u> x</u>	Yes	No
	Print/Type prepare		Preparer's signature		Date	Check X	1		
Paid	JERRY L L		JERRY L LARSE	<u> </u>	l	self-employed	P0005	<u>7432</u>	
Prepare			Tax Service			Firm's EIN > 94	1727090		
Use Onl	y Firm's address		welling Blvd.						
	<u> </u>	Hayward,	CA 94541			Phone no. (5	<u>10) 276-</u>		
BAA .							Form 9 9	10-PF ((2015)

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, 990-PF) and its instructions is at www.irs.gov/form990.

2015

OMB No 1545-0047

Name of the organization Employer identification number THE EDWARDS FAMILY FOUNDATION 94-3302319 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule To ran organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

BAA 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)

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

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1 of

1 of Part I

Name of organization

THE EDWARDS FAMILY FOUNDATION

Employer identification number 94-3302319

11112 172	WARDS PARIED LOOKDITTON	174 3.	JOE 317
Pail	Contributors (see instructions). Use duplicate copies of Part I if additional space	is needed.	-
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROSSER B EDWARDS 317 RAMONA ROAD PORTOLA VALLEY, CA 94403-2514	\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ROSSER B EDWARDS JR 1232 BERNAL DR BURRLINGAME, CA 94010-5619	\$ <u>5,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ - -	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part If for noncash contributions.)

1 of Part II

THE EDWARDS FAMILY FOUNDATION

Name of organization

Employer identification number 94-3302319

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A	\$	
(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
	<u></u>	 \$	
	<u> </u>		<u> </u>

BAA

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

of Part III

Name of organization
THE EDWARDS FAMILY FOUNDATION

Employer Identification number 94-3302319

		12.1 0002020	
`an}∭	Exclusively religious, charitable, etc., contributions to organizations desc	ribed in section 501(c)(7), (8)	, ,
	or (10) that total more than \$1,000 for the year from any one contributor. Complete col	umns (a) through (e) and	•
	the following line entry. For organizations completing Part III, enter the total of exclusively re	eligious, charitable, etc.,	
	contributions of \$1,000 or less for the year (Enter this information once See instructions)	. > \$ N.	/ Z
	Use duplicate copies of Part III if additional space is needed	·	. 4

	Ose duplicate copies of Part III if additional	space is needed	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee

015	Fe	deral Sta	teme	nts			Page
	THE EDWARDS FAMILY FOUNDATION						94-33023
Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees							
TAX PREPREPORATION	Total	(a) Expense per Book \$ 75	s Ir ss 50. \$	(b) Net nvestmer Income 75		(c) justed Income 0.	(d) Charitable Purposes \$ 0.
Statement 2 Form 990-PF, Part I, Line 18 Taxes							-
EXCISE	Total	(a) Expense per Book \$ 19	s Ir ss 92. \$ 92. \$	(b) Net nvestmer Income 19		(c) justed Income	-
Statement 3 Form 990-PF, Part I, Line 23 Other Expenses							
FEES	Total	(a) Expense per Boo	es In	(b) Net nvestmer Income 6	it Ac	(c) ljusted Income 0.	(d) Charitable Purposes
Statement 4 Form 990-PF, Part II, Line 13 Investments - Other					***************************************		
				uation thod	Boo Val		Fair Market Value
Other Publicly Traded Sec FIDELITY INVESTMENTS	urities		- Cost		\$ 17	0,000. \$	159,960.
				Total	\$ 17	0,000.	159,960.

c

2015	Federal Sta	tements		Page 2	
	THE EDWARDS FAMILY FOUNDATION				
Statement 5 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year					
Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount	
ROCK CREEK ALLIANCE 1319 N DIVISION SANDPOINT ID 83864	NONE	PUBLIC	ASSISTANCE	\$ 4,000.	
BAYSHORE CHRISTIAN MINISTRIES 1001 BEECH STREET EAST PALO ALTO CA 94303	NONE	PUBLIC	ASSISTANCE	3,000.	
HOLT INTERNATIONAL CHILDR P O BOX 2880 EUGENE OR 97402	NONE	PUBLIC	ASSISTANCE	5,000.	
WHEAT RIDGE MINISTRIES ONE PIERCE SUITE 250E ITASCA IL 60143	NONE	PUBLIC	ASSISTANCE	2,000.	
CONCORDIA UNIVERSITY PORT 2811 N E HOLMAN STREET PORTLAND OR 97211	NONE	PUBLIC	ASSISTANCE	18,000.	
PV SCHOOL FOUNDATION 4575 ALPINE ROAD PORTOLA VALLEY CA 94028	NONE	PUBLIC	ASSISTANCE	400.	
LUTHERAN WORLD RELIEF 700 LIGHT STREET BALTIMORE MD 21230	NONE	PUBLIC	ASSISTANCE	10,000.	
LCMS WORLD MISSION 1333 S KIRKWOOD ROAD ST LOUIS MO 63177	NONE	PUBLIC	ASSISTANCE	2,000.	
BURLINGAME COMMUNITY FOR EDUCA P O BOX 117730 BURLINGAME CA 94011	NONE	PUBLIC	ASSISTANCE	250.	
YELLOWSTONE ASSOCIATION P O BOX 117 YELLOWSTONE WY 82190	NONE	PUBLIC	ASSISTANCE	1,000.	
JACKSON HOLE LAND TRUST 555 EAST BROADWAY SUITE 228 JACKSON WY 83001	NONE	PUBLIC	ASSISTANCE	1,500.	
MT SCOTT PARK LEARNING CENTER 6148 SE HOLGATE PORTLAND OR 97206	NONE	PUBLIC	ASSISTANCE	3,000.	

2015	Federal Sta	tements		Page
	THE EDWARDS FAMIL	Y FOUNDAT	ION	94-33023
Statement 5 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				
Name and Address	Donee <u>Relationshi</u> p	Found- ation <u>Status</u>	Purpose of Grant	Amount
RYAA FAMILY FOUNDATION 1290 CYPRESS STREET EAST PALO ALTO CA 94303	NONE	PUBLIC	ASSISTANCE	\$ 5,000
SAINT IGNATIUS COLLEGE 2001 37TH AVE SAN FRANCISCO CA 94116	NONE	PUBLIC	ASSISTANCE	4,00
TODAY'S YOUTH MATTERS 469 VALLEY WAY MILPITAS CA 95035	NONE	PUBLIC	ASSISTANCE	3,00
CONCORDIA EDUCATION FOUNDATION 1601 ST JOE RIVER DR FORT WAYNE IN 46805	NONE	PUBLIC	ASSISTANCE	1,00
LUTHERAN IMMIGRATION AND REFUGEE SERVICE 700 LIGHT STREET BALTIMORE MD 21230	NONE	PUBLIC	ASSISTANCE	4,00
CONCORDIA COLLEGE SELMA 1804 GREEN ST SELMA AL 36701	NONE	PUBLIC	ASSISTANCE	10,00
KINDERHAVEN P O BOX 2097 SANDPOINT ID 83864	NONE	PUBLIC	ASSISTANCE	50
EUREKA INSITUTE 513 OAK ST SANDPOINT ID 83864	NONE	PUBLIC	ASSISTANCE	3,00
CLEVELAND BASKETBALL 2401 ONTARIO SR CLEVELAND OH 44115	NONE	PUBLIC	ASSISTANCE	25
THIRD BOX 1933 DAVIS STREET SUITE 200-B SAN LEANDRO CA 94577	NONE	PUBLIC	ASSISSIANCE	4,00
ECHO THEATOR COMPANY 1515 SE 37TH AVE PORTLAND OR 97214	NONE	PUBLIC	ASSISTANCE	50
RENIALSSANCE ARTS ACADEMY 1800 COLORADO BLVD LAS ANGELES CA 90041	NONE	PUBLIC	ASSISTANCE	1,00

					Page 4
E EDWARDS FAMIL	Y FOUNDATI	ON		94	-3302319
Donee Relationship	Found- ation <u>Status</u>	Purpose Grant	of	Am	ount
NONE	PUBLIC	ASSISTANCE	:	\$	600
NONE	PUBLIC	ASSISTANCE			599
			Total	\$	87,599
	Relationship NONE	Donee ation Relationship Status NONE PUBLIC	Donee ation Purpose Relationship Status Grant NONE PUBLIC ASSISTANCE	Donee ation Purpose of Relationship Status Grant NONE PUBLIC ASSISTANCE NONE PUBLIC ASSISTANCE	Donee ation Purpose of Relationship Status Grant Ame NONE PUBLIC ASSISTANCE \$ NONE PUBLIC ASSISTANCE