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Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052

2016

Open to Public inspection

Department of the Treasury

► 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 2016 or tax year beginning , and ending Name of foundation Employer identification number Pure Edge, Inc. 45-3182571 Number and street (or P O box number if mail is not delivered to street address) Telephone number (see instructions) Room/suite 109 Royal Palm Way 760-845-8341 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here FL 33480 Palm Beach Initial return of a former public charity G Check all that apply Initial return 1 Foreign organizations, check here Amended return Final return 2 Foreign organizations meeting the X Name change 85% test, check here and attach computation Address change H Check type of organization X Section 501(c)(3) exempt private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation J Accounting method Cash X Accrual I Fair market value of all assets at If the foundation is in a 60-month termination under section 507(b)(1)(B), check here Other (specify) end of year (from Part II, col (c), 295,496 line 16) ▶ \$ (Part I. column (d) must be on cash basis) (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (b) Net investment (c) Adjusted net for charitable expenses per books amounts in columns (b), (c), and (d) may not necessarily equal purposes the amounts in column (a) (see instructions)) cash basis only) 1,802,419 1 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ▶ I If the foundation is **not** required to attach Sch B 17 17 17 3 Interest on savings and temporary cash investments Dividends and interest from securities 5a Gross rents h Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Stmt 1 -1,010 6a h Gross sales price for all assets on line 6a 0 Capital gain net income (from Part IV, line 2) 0 Net short-term capital gain 0 Income modifications 10a Gross sales less returns and allowances Less Cost of goods sold OGDEN. U Gross profit or (loss) (attach schedule) C Stmt 2 8,000 8,000 11 Other income (attach schedule) 17 1,809,426 8,017 12 Total. Add lines 1 through 11 386,892 333,262 13 Compensation of officers, directors, trustees, etc. 576,894 495,963 14 Other employee salaries and wages 154,752 154,752 -15 Pension plans, employee benefits 57,360 57,360 Legal fees (attach schedule) See Stmt 3 16a Stmt 4 36,412 36,412 Accounting fees (attach schedule) Stmt 5 8,000 Other professional fees (attach schedule) 710,728 696,728 C cha 2C بر 17 Interest <u>18</u> Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion Stmt 6 1,962 78,447 20 78,447 Occupancy 721 722 186,638 179,530 Travel, conferences, and meetings Operating and 121,594 121,594 Printing and publications 23 123 124 Stmt 7 99,170 3,073 96,097 Other expenses (att sch) Total operating and administrative expenses. 0 2,357,219 11,073 2,303,775 Add lines 13 through 23 245,750 25 Contributions, gifts, grants paid 245,750 Total expenses and disbursements. Add lines 24 and 25 2,602,969 0 11,073 2,549,525 26 27 Subtract line 26 from line 12 -793,543 Excess of revenue over expenses and disbursements 17 Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

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G7 4Form 990-PF (2016)

	art I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year
_		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing	889,556	231,254	231,254
- }	2	Savings and temporary cash investments	163,255	2,911	2,911
	3 _	Accounts receivable ► 3,963			
- }		Less allowance for doubtful accounts ▶		3,963	3,963
1	4	Pledges receivable ▶			
- }		Less allowance for doubtful accounts ▶		·	
	5	Grants receivable			
- 1	6	Receivables due from officers, directors, trustees, and other			
-		disqualified persons (attach schedule) (see	į į		
		instructions)			
- }	7	Other notes and loans receivable (att. schedule)			
		Less allowance for doubtful accounts ▶ 0			
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges	22,909	31,874	31,874
Š	10a	Investments – U S and state government obligations (attach schedule)	<u> </u>		
ĺ	b	Investments – corporate stock (attach schedule)			
1	С	Investments – corporate bonds (attach schedule)			
- [11	Investments – land, buildings, and equipment basis			
ſ		Less accumulated depreciation (attach sch) ▶			
- (12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
- }	14	Land, buildings, and equipment basis ▶ 23,822			
ľ		Less accumulated depreciation (attach sch) ► Stmt 8 5,904	1,010	17,918	
- 1	15	Other assets (describe See Statement 9)	ļ	7,576	7,576
	16	Total assets (to be completed by all filers – see the			
+		instructions Also, see page 1, item I)	1,076,730	295,496	295,496
- 1	17	Accounts payable and accrued expenses	44,021	56,330	
ς,	18	Grants payable			
Liabilities	19	Deferred revenue	<u> </u>		
<u>ā</u>	20	Loans from officers, directors, trustees, and other disqualified persons			
끮	21	Mortgages and other notes payable (attach schedule)	 +		
	22	Other liabilities (describe)	44 021	F.C. 220	
+	23	Total liabilities (add lines 17 through 22)	44,021	56,330	
S		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
9	24	Unrestricted	1,032,709	220 166	
a	25	Temporarily restricted	1,032,709	239,166	
B	26	Permanently restricted			
믿	20	Foundations that do not follow SFAS 117, check here			
괴		and complete lines 27 through 31.			
6	27	Capital stock, trust principal, or current funds	{		
Net Assets or Fund Balances	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds			
Į,	30	Total net assets or fund balances (see instructions)	1,032,709	239,166	
ž	31	Total liabilities and net assets/fund balances (see			
		instructions)	1,076,730	295,496	
F	art I	,			<u> </u>
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 30 (mu	st agree with		
		of-year figure reported on prior year's return)	J	1 1	1,032,709
2		amount from Part I, line 27a		2	-793,543
3	Othe	r increases not included in line 2 (itemize) ▶		3	
4	Add I	ines 1, 2, and 3		4	239,166
		eases not included in line 2 (itemize) ▶		_ 5_	
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	239,166

Form 990-PF (2016) Pure Edge, Inc. Capital Gains and Losses for Tax on Investment Income (b) How acquired (a) List and describe the kind(s) of property sold (e.g., real estate, (c) Date acquired (d) Date sold P - Purchase 2-story brick warehouse, or common stock, 200 shs MLC Co) (mo, day, yr) (mo , day, yr) D - Donation N/A b d е (f) Depreciation allowed (a) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) (e) plus (f) minus (g) plus expense of sale b d Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col (h) gain minus col (k), but not less than -0-) or (i) Adjusted basis (k) Excess of col (i) (i) F M V as of 12/31/69 Losses (from col (h)) as of 12/31/69 over col (j), if any b C d е If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income Part V (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income) If section 4940(d)(2) applies, leave this part blank. N/A Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part Enter the appropriate amount in each column for each year, see the instructions before making any entries (a) (d) (b) (c) Base period years Distribution ratio Adjusted qualifying distributions Net value of noncharitable-use assets Calendar year (or tax year beginning in) (col (b) divided by col (c)) 2015 2014 2013 2012 2011 2 Total of line 1, column (d) 2 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 3 4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5 5 Multiply line 4 by line 3 5 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 7 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions

Form	990-PF (2016) Pure Edge, Inc. 45-3182571		_	F	age
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 − see instructions)				
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
b		1			
	here ▶ and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of				
	Part I, line 12, col (b))			
2	rando de la companya	2			
3	-	3			
4		4			(
5	·····	5			(
6	Credits/Payments				
а	2016 estimated tax payments and 2015 overpayment credited to 2016				
b	Exempt foreign organizations – tax withheld at source				
С	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld 6d 6d				
7		7			
8		8			
9		9			
10	· · · · · · · · · · · · · · · · · · ·	0			
11		1			
	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		<u> </u>	Yes	No
_	participate or intervene in any political campaign?		<u> 1a</u>		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				
	Instructions for the definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
_	published or distributed by the foundation in connection with the activities				
C C	Did the foundation file Form 1120-POL for this year?		1c		X
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
е	on foundation managers \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		1		~
-	If "Yes," attach a detailed description of the activities		2		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		3	¥	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	,	5	X	
	If "Yes," attach the statement required by General Instruction T See Statemen	t 10	J		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	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 X	(V	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	CA, CT, FL, MA, NC, NY, SC, TX, IN	ė			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	x	<u>_</u>
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 2016 or the taxable year beginning in 2016 (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 Stmt 11	<u> </u>	10	_X_	

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****	irt VII-A Statements Regarding Activities (continued)				
				Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled	ed entity within the	ì		
	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 found	dation or a disqualified	ł		
	person had advisory privileges? If "Yes," attach statement (see instructions)		12		X
13	Did the foundation comply with the public inspection requirements for its annual ret	urns and exemption application?	13	X	
	Website address www.pureedgeinc.org				
14	The books are in care of ▶ Brianne Jablow	Telephone no ▶ 910-	-679-	-865	7
	1900 Eastwood Road, Suite 5				
	Located at Wilmington	NC ZIP+4 ► 284	03		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form	1041 – Check here			▶ [
	and enter the amount of tax-exempt interest received or accrued during the year	▶ 15			
16	At any time during calendar year 2016, did the foundation have an interest in or a s	ignature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?		16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If	f "Yes," enter the name of			
	the foreign country			_	
Pa	art VII-B Statements Regarding Activities for Which Form 47	20 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception	on applies.		Yes	No
1a	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	on? Yes 🗶 No	.]		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it f				
	disqualified person?	Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified per	rson? Yes X No	,		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified personal compensation to the compensation tof the compensation to the compensation to the compensation to the				
	(5) Transfer any income or assets to a disqualified person (or make any of either a				
	the benefit or use of a disqualified person)?	Yes X No			
	(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	,		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exce	eptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instri		1b		X
	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 t	than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2016?		1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the form	oundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			1	
а	And the second of the second o	es 6d and			
	6e, Part XIII) for tax year(s) beginning before 2016?	Yes X No	,	1	
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			1	
b	Are there any years listed in 2a for which the foundation is not applying the provisi	ons of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If app	plying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement – see instructions)	N/2	A 2b		<u> </u>
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed i	n 2a, list the years here			
	▶ 20 , 20 , 20 , 20				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business of				
	at any time during the year?	Yes X No	,		
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purcha	se by the foundation or		1	
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or long		l		
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or				
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, i	to determine if the			
	foundation had excess business holdings in 2016)	N/Z	A 3b		
4a		ardize its charitable purposes?	4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 19			1	
	charitable purpose that had not been removed from jeopardy before the first day of	of the tax year beginning in 2016?	4b		X
	<u> </u>		_ 0	QN_PI	=

orm	990-PF (2016) Pure Eage, 1			185211			Pag	ge 6
Pa	rt VII-B Statements Regardii	ng Activities for Which Fo	orm 4720 May Be R	equired (conti	inued)			_
5a	During the year did the foundation pay or	incur any amount to			_			
	(1) Carry on propaganda, or otherwise at	tempt to influence legislation (see	ction 4945(e))?	Y	es 🗓 No			
	(2) Influence the outcome of any specific	public election (see section 4955	5), or to carry on,					
	directly or indirectly, any voter registr	ation drive?		Y	es X No	- 1		
	(3) Provide a grant to an individual for tra	avel, study, or other similar purpo:	ses?	Y	es 🗓 No			
	(4) Provide a grant to an organization oth	ner than a charitable, etc , organiz	ation described in					
	section 4945(d)(4)(A)? (see instruction	ons)		Y	es X No			
	(5) Provide for any purpose other than re	eligious, charitable, scientific, liter	ary, or educational					
	purposes, or for the prevention of cru	elty to children or animals?		Y	es 🗓 No			
b	If any answer is "Yes" to 5a(1)-(5), did ar	ny of the transactions fail to qualif	y under the exceptions de	escribed in				
	Regulations section 53 4945 or in a curre	nt notice regarding disaster assis	tance (see instructions)?		N/A	5b		
	Organizations relying on a current notice	regarding disaster assistance che	eck here		▶ 🔲			
С	If the answer is "Yes" to question 5a(4), o				_			
	because it maintained expenditure respons			N/A 🗌 Y	es No			
	If "Yes," attach the statement required by		d)	_	_			
6a	Did the foundation, during the year, recei	ve any funds, directly or indirectly	, to pay premiums			- 1		
	on a personal benefit contract?			Y	'es X No			
b	Did the foundation, during the year, pay p	premiums, directly or indirectly, or	n a personal benefit contr	act?		6b		X
	If "Yes" to 6b, file Form 8870							*******
7a	At any time during the tax year, was the f	oundation a party to a prohibited	tax shelter transaction?	∏ Y	es X No			
	If "Yes," did the foundation receive any pr			tion?	N/A	7b		
Pa	rt VIII Information About Of	ficers, Directors, Trustees	s, Foundation Mana	gers, Highly	Paid Employe	ees,		
	and Contractors							
1 L	ist all officers, directors, trustees, foun	dation managers and their con	npensation (see instruct	tions).				
			(b) Title, and average	(c) Compensation	(d) Contributions to			
	(a) Name and a	ddress	hours per week	(If not paid,	employee benefit plans and deferred		ense acco allowance	
			devoted to position	enter -0-)	compensation			
Se	e Statement 12							
						<u> </u>		
2	Compensation of five highest-paid em	ployees (other than those inclu	uded on line 1 – see inst	ructions). If non	e, enter			
	"NONE."							
			(b) Title, and average		(d) Contributions to	/al Eve	ense acco	
	(a) Name and address of each employee p	oald more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred		ense acco allowance	
			devoted to position	_	compensation			
Cl	ıı Kım	Palm Beach	Chief Operat					
10	9 Royal Palm Way	FL 33480	40.00	225,000	7,500			0
Mı	chael Corke	Palm Beach	Director of					
10	9 Royal Palm Way	FL 33480	40.00	118,872	0			0
							_	
							_	
					<u></u>		_	
Tota	I number of other employees paid over \$5	0,000			•	-[4

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Part VIII Information About Officers, Directors, Trust and Contractors (continued)	lees, Foundation Managers, Highly Paid E	
3 Five highest-paid independent contractors for professional service	ces (see instructions). If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		
Total number of others receiving over \$50,000 for professional services		•
Part IX-A Summary of Direct Charitable Activities		
		
List the foundation's four largest direct charitable activities during the tax year. Include relevant sta organizations and other beneficiaries served, conferences convened, research papers produced, e		Expenses
1 See Statement 13		
		847,583
2 See Statement 14		
		00 75
		28,750
3		
4		
Part IX-B Summary of Program-Related Investments	s (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2	Amount
1 N/A		
2		
•	1	
All other program-related investments See instructions		
3		
		ì
Tatal Add lang 4 through 2	•	
Total. Add lines 1 through 3		

Form 990-PF (2016)

2,549,525

3b

4

5

Cash distribution test (attach the required schedule)

Adjusted qualifying distributions. Subtract line 5 from line 4

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

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

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

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

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

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TT 1 1 1 1 1 1	urt XIII Undistributed Income					
			(a)	(b)	(c)	(d)
1	Distributable amount for 2016 from Part 2	ΚI,	Corpus	Years prior to 2015	2015	2016
	line 7					
2	Undistributed income, if any, as of the en	d of 2016		,		
а	Enter amount for 2015 only					
b	Total for prior years 20 , 20	, 20				
3	Excess distributions carryover, if any, to	2016				
а	From 2011	<u> </u>				
b	From 2012					
С	From 2013					
d	From 2014					
е	From 2015					
f	Total of lines 3a through e					
4	Qualifying distributions for 2016 from Par	t XII,				
	line 4 ▶ \$ 2,549,525	ľ				
	Applied to 2015, but not more than line 2					
b	Applied to undistributed income of prior y	ears			ļ	
	(Election required – see instructions)					
С	Treated as distributions out of corpus (El	ection				
	required – see instructions)					
	Applied to 2016 distributable amount					_
	Remaining amount distributed out of corp		2,549,525			
5	Excess distributions carryover applied to					<u> </u>
	(If an amount appears in column (d), the	same				
_	amount must be shown in column (a))					
6	Enter the net total of each column as					
	indicated below:		0 540 505			
	Corpus Add lines 3f, 4c, and 4e. Subtrac		2,549,525	<u> </u>		
D	Prior years' undistributed income Subtra	ct				
_	line 4b from line 2b	tod				<u> </u>
C	Enter the amount of prior years' undistrib income for which a notice of deficiency h					
	been issued, or on which the section 494					
	tax has been previously assessed	12(a)	j		ļ	
ч	Subtract line 6c from line 6b Taxable					
u	amount – see instructions					
e	Undistributed income for 2015 Subtract	line				
·	4a from line 2a Taxable amount – see					
	Instructions					
f		lines				
	4d and 5 from line 1. This amount must be					
	distributed in 2017					1
7	Amounts treated as distributions out of c	orpus				
	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 2011	not				
	applied on line 5 or line 7 (see instruction	ıs)				
9	Excess distributions carryover to 2017	7.				
	Subtract lines 7 and 8 from line 6a	l				
10	Analysis of line 9					
а	Excess from 2012					
b	Excess from 2013					
С	Excess from 2014					
d	Excess from 2015					
e	Excess from 2016					

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

N/A

factors N/A

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Part XV Supplementary Information (c. 3 Grants and Contributions Paid During th		Future Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year Broome Street Academy 121 Ave of the Americas New York NY 10013	N/A	PC Program Imple	mentation	31,000
Harlem Village Academy 2351 First Avenue New York NY 10035	n/A	PC Program Imple	mentation	25,000
The Fund For Public Schoo 52 Chambers Street New York NY 10007	N/A	PC Program Imple	mentation	131,250
Reach Prep 1 Dock Street, #100 Stanford CT 06902	N/A Afte	PC r school pilo	t program	5,000
Newark Yoga Movement P.O. Box 172 Millburn NJ 07041	N/A Pilot	PC program imple	mentation	5,000
Yokids 500 North Washington St Alexandria VA 22314	N/A Afte	PC r school pilo	t program	5,000
University of Houston 4800 Calhoun Road Houston TX 77004	N/A	PC Researc	h support	21,250
Total	<u> </u>		▶ 3a	223,500
b Approved for future payment N/A				
	<u> </u>		L	

▶ 3b

Total

Part XVI-	A Analysis of Income-Producing Admounts unless otherwise indicated		d business income	Excluded	by section 512, 513, or 514	
•		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions.)
	service revenue				·	
	tructor Services	-				8,000
		-		+		
		_				
		-		+		
_		-				
f		- 			·	
_	and contracts from government agencies			+		
	hip dues and assessments				-	17
	n savings and temporary cash investments					
	and interest from securities income or (loss) from real estate			1		···
	financed property					
	ebt-financed property	<u> </u>		_		
	I income or (loss) from personal property	—	-			
	estment income					
	oss) from sales of assets other than inventory			+		-1,010
•	ne or (loss) from special events					
	offit or (loss) from sales of inventory					
	enue a					
b			-	7 - 1		
е						
12 Subtotal	Add columns (b), (d), and (e)			0	0	7,007
13 Total. Ad	d line 12, columns (b), (d), and (e)				13	7,007
	et in line 13 instructions to verify calculations)					
Part XVI-	B Relationship of Activities to the	Accomplishm	ent of Exempt	Purpose	s	
Line No. ▼	Explain below how each activity for which incom accomplishment of the foundation's exempt put					
1a	Program Instructor					
						
						
						
						
						
						
	 					
	+				-	
	 					
						
	+					
	1					
						
						
			 			

Form 990-F	PF (2016) P 1	ure Edg	e, Ind	c.		45-3182	571		Page	e 13
Part XV	/II Infor	mation Re	garding	Transfers To	and Transac	tions and Relations	ships With Noncha	ritable	9	
1 Did th				gage in any of the	e following with a	ny other organization de	scribed	T	Yes	No
in sec	ction 501(c) o					n section 527, relating to				
_	izations?	ropodina fou	adation to a	noncharitable ex	romet organizati	an of:		1	- 1	
(1) C	1		iluation to a					1a(1)		x
٠,,	asn ther assets		••					1a(2)	$\neg +$	$\overline{\mathbf{x}}$
	transactions			• • • • • • • • • • • • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •		1.2(2)		
(1) Sa	ales of asset	s to a noncha	ntable exen	npt organization				1b(1)		<u>x</u>
(2) Pi	urchases of a	assets from a	noncharitat	ole exempt organı	zation			1b(2)		<u> </u>
(3) R	ental of facilit	iles, equipmer	nt, or other a	assets				1b(3)		<u>X</u>
		nt arrangemer						1b(4)		<u>X</u>
(5) Lo	oans or Ioan (guarantees .				.,.,,		1b(5)		X
(6) Pe	erformance o	f services or r	nembership	or fundralsing so	olicitations			1b(6)		<u>X</u>
c Sharir	ng of facilities	s, equipment,	mailing lists	s, other assets, or	paid employees	·		1c		<u> </u>
						olumn (b) should always				
						n. If the foundation recelv				
value	in any transa	ction or sharl	ng arranger	ment, show in col	umn (d) the valu	e of the goods, other ass	-			
(a) Line n	o (b) A	mount involved	(c) Nam	e of noncharitable exe	mpt organization	(d) Description of tran	sfers, transactions, and sharing a	rrangeme	ents	
N/A			ļ							
			ļ							
						ļ 				
			<u> </u>							
			 _							
	}_									
			 -							
			 							
			 							
						<u> </u>				
descri	bed in sectio	*	Code (oth	ed with, or related er than section 5		tax-exempt organizations ction 527?	I	Yes	s X	No
		organization		(b) Type of	organization	(c)	Description of relationship			
N/A										
Une	der penalties of	perjury, I declare	that I have exa	amined this return, Incl	luding accompanying	schedules and statements, and n of which preparer has any kno	to the best of my knowledge and	i belief, it	is true,	
"	rect, and comple	ste, Deckaretton o	properor (our	ci dizzi laxpayor, is be	1960 Off all Interplete	or White property has any rate	May the IRS disc			
ign	\sim						with the preparer (see instructions)			No
iere			*	4	1		(age mandedons)	<u>. ப.</u>	<u>" П</u>	INO
			14	/ las		31 17	reasurer & D	irec	ctor	<u>:</u>
	Signature of off	licer or trustee	7 _)	Date	Title				
F	nnt/Type prepar	er's name			Preparer's algratu	re /	Date	T	Check	7 #
					1 Uha	Sun	}		self-emplo	yed
aid C1	harles I	. Earney	, CPA		Charles L	. Earney, CPA	06/30			
reparer	mm's name 🕨				L.L.P.		PTIN POO	085	685	
se Univ	im's address ▶			ry Cutof:		250	Flrm's EIN ▶ 56-	<u> 1719</u>	839	,
			ngton		405-8364			-256		
								m 990		

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.irs.gov/form990.

OMB No 1545-0047

Employer identification number

Name of the organization		Employer identification number				
Pure Edge, In	c.	45-3182571				
Organization type (check on	· · · · · · · · · · · · · · · · · · ·					
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					
	covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e See				
General Rule						
	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5 property) from any one contributor. Complete Parts I and II. See instructions for determinate on the contributions.					
Special Rules						
regulations under sec 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support test ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Pathat received from any one contributor, during the year, total contributions of the greater the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts	art II, line of (1)				
contributor, during th	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from an ie year, total contributions of more than \$1,000 exclusively for religious, charitable, scient al purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, a	ıfic,				
contributor, during th contributions totaled during the year for al	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from an eyear, contributions exclusively for religious, charitable, etc., purposes, but no such more than \$1,000. If this box is checked, enter here the total contributions that were received exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the stothis organization because it received nonexclusively religious, charitable, etc., contributed during the year.	eived he				
-	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Foi					

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization --- Pure Edge, Inc.

Employer identification number 45-3182571

Part I	Contributors (See instructions). Use duplicate copies of P	art I if additional space is ne	eded.
(a) <u>.</u> No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Paul and Sonia Jones 1300 S. Ocean Blvd. Palm Beach FL 33480	s 1,774,410	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Wanderlust Festival, LLC 300 West 6th Street, Suite 2100 Austin TX 78701	s 12,387	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	BTIG, LLC 600 Montgomery St., 6th Floor San Francisco CA 94111	\$ 10,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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)

45-3182571

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Federal Statements

Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets

	Descri	ption			How Received	Who So	Date Acquired	ť
Date Sold	 Sale Price		Cost		Expense	Depreciation	Net Gain / Loss	_
Artwork 5/01/16	\$	\$	1,010	\$	Purchase	\$	\$ 3/27/13 -1,010	3
Total	\$ 	0 \$	1,010	_	0	\$ 0	\$ -1,010	

Statement 2 - Form 990-PF, Part I, Line 11 - Other Income

Description

	Revenue per Books	Net Investment Income	Adjusted Net Income
Instructor Services			
	\$ 8,000	\$	\$ 8,000
Total	\$ 8,000	\$0	\$ 8,000

Statement 3 - Form 990-PF, Part I, Line 16a - Legal Fees

Description

	Total		Net Investment	Adjusted Net	 Charitable Purpose
General Legal Fees					
-	\$ 30,	000 \$		\$	\$ 30,000
Legal Review of Lease Agre					
		873			4,873
Copyright - App and Curri					
	22,	487			 22,487
Total	\$ 57,	360 \$	0	\$ 0	\$ 57,360

Statement 4 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description

		Total	Net Investment	Adjusted Net	Charitable Purpose
Accounting Services					
-	\$	13,071	\$	\$	\$ 13,071
Assurance and Tax Prep	Services				•
•		23,341			 23,341
Total	\$	36,412	\$	\$ (\$ 36,412

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Federal Statements

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Statement 5 - Form 990-PF, Part I, Line 16c - Other Professional Fees

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-		ıvı	
		_	

	Total	_	Net Investment		Adjusted Net		Charitable Purpose
Program Coord./Instructors/Mor	nit	_				_	
\$	170,961	\$		\$		\$	164,961
Rebranding Consulting Services	3						·
-	22,483						22,483
Payroll Processing Services							
	9,479						9,479
Yoga Instructors							
	411,062				8,000		403,062
Wellness Program Leaders							
	89,243						89,243
Research Measurement Tools							
	7,500	_		_			7,500
Total \$	710,728	\$_	0	\$_	8,000	\$_	696,728

Statement 6 - Form 990-PF, Part I, Line 19 - Depreciation

	Description			Date Acquired	Cost Basis	
Prior Year Depreciation	Method	Life_	Current Yea Depreciatio		estment ome	Adjusted Net Income
Computer Equipmen	t			1/01/13 \$	3	,940
\$ 3,940 S/	${f L}$	3	\$	\$	Ş	5
Artwork				3/27/13	1	,010
		3				
Furniture WIlming	ton			5/01/16	15	,791
s/	L	10	1,0	53		
Computer				5/01/16	4	,092
S/	L	3	9	09		
Total				\$	24	,833
\$ 3,940		,	\$ 1,9	62 \$	0 \$	0

Statement 7 - Form 990-PF, Part I, Line 23 - Other Expenses

_						
- 1)	29	rı	n	tı	0	n

	T	otal	Net Investment	Adjusted Net	Charita Purpo	
	\$		\$	\$	\$	
Expenses						
Insurance - Directors	s and Off					
Telephone/Internet		2,805			2	2,805
rerephone, internet		10,569			10	0,569

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Statement 7 - Form 990-PF, Part I, Line 23 - Other Expenses (continued)

_		4.5
Des	orin	tion
DC9	GHU	ווטווי

	Total	Net Investment	Adjusted Net	Charitable Purpose
Postage				
\$ Office and Program Suppli	4,571 les	\$	\$	\$ 4,573
Website Development	10,848			10,848
-	36,584			36,584
Computer Equipment	1,841			1,841
Administrative Fees	3,073		3,073	
Marketing	996		3,073	0.0
Fundraising				990
Miscellaneous Expense	998			998
<u>-</u>	6,475			6,475
Training	20,410			20,410
Total \$	99,170	\$ 0	\$ 3,073	\$ 96,097

Statement 8 - Form 990-PF, Part II, Line 14 - Land, Building, and Equipment

Des	:		
1 120	rri	m	ını.
	~ I	\sim L	

	Beginning Net Book		End Cost / Basis	Accumulated preciation		Net FMV
	\$ 1,010	\$_	23,822	\$ 5,904 \$	S	17,918
Total	\$ 1,010	\$_	23,822	\$ 5,904 \$	· · ·	17,918

Statement 9 - Form 990-PF, Part II, Line 15 - Other Assets

Description		Beginning of Year		End of Year	_	Fair MarketValue
Security Deposit	\$_		\$_	7,576	\$	7,576
Total	\$_	0	\$_	7,576	\$	7,576

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Statement 10 - Form 990-PF, Part VII-A, Line 5 - Description of Liquidation, Termination, Etc.

Description

During the calendar year 2016 there was a substantial contraction, as defined in Regulations Sec. 1.6043-3 (d), of Pure Edge, Inc. The substantial contraction occurred as a result of the distribution during the tax year of more than 25% of the fair market value of the net assets of Pure Edge, Inc. at the beginning of the year.

The distributions were related to fulfillment of the Organization's mission and were not due to any plan of liquidation, disslution or termination.

Statement 11 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors

Name Address

City, State, Zip

Paul and Sonia Jones 1300 S. Ocean Blvd.
Palm Beach FL 33480

Part VIII Line 1 List of Officers Directors Trustee

Statement 12 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc.

Name and Address

	Title	Average Hours	Compensation	Benefits	Expenses
Anthony Buontempo	Treasurer &	0.50	0	0	0
109 Royal Palm Way	ileasulei a	0.30	O	0	O
Palm Beach FL 33480					
Deepak Chopra, MD	Director	0.50	0	0	0
109 Royal Palm Way	Director	0.30	O	O	U
Palm Beach FL 33480		•			
Kimberly Clarke	Director	0.50	0	0	0
109 Royal Palm Way					
P{alm Beach FL 33480					

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Statement 12 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc. (continued)

Name and Address

Address		- _			
	Title	Average Hours	Compensation	Benefits	Expenses
Peter Egoscue 109 Royal Palm Way Palm Beach FL 33480	Director	0.50	0	0	0
Janet Rienstra-Friesen 109 Royal Palm Way Palm Beach FL 33480	Director	0.50	0	0	0
Stedman Graham 109 Royal Palm Way Palm Beach FL 33480	Director	0.50	0	0	0
David Hirsch 109 Royal Palm Way Palm Beach FL 33480	Director	0.50	0	0	0
Paul Tudor Jones, II 109 Royal Palm Way Palm Beach FL 33480	Chairman & P	0.50	0	0	0
Sonia Jones 109 Royal Palm Way Palm Beach FL 33480	Director	0.50	0	0	0

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Statement 12 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc. (continued)

Name and Address

	Title	Average Hours	Compensation	Benefits	Expenses
Jeff Krasno 109 Royal Palm Way Palm Beach FL 33480	Director	0.50	0	0	0
Kelly Meyer 109 Royal Palm Way Palm Beach FL 33480	Director	0.50	0	0	0
Terry Brooks Grier 109 Royal Palm Way Palm Beach FL 33480	Executive Di	40.00	262,108	7,500	0
Eugene Ruffin 109 Royal Palm Way Palm Beach FL 33480	Past Exec Di	40.00	71,154	0	0
Justin Tuck 109 Royal Palm Way Palm Beach FL 33480	Director	0.50	0	0	0
Barbara Sexton Smith 109 Royal Palm Way Palm Beach FL 33480	Director	0.50	0	0	0

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Statement 12 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc. (continued)

Name and Address

	Title	Average Hours	Compensation	Benefits	Expenses
Lisa Holthouse					
109 Royal Palm Way	Director	0.50	0	0	0
Palm Beach FL 33480					
Suna Said	D:	0 50	0	0	0
109 Royal Palm Way	Director	0.50	0	0	0
Palm Beach FL 33480					

Statement 13 - Form 990-PF, Part IX-A, Line 1 - Summary of Direct Charitable Activities

Description

Health and Wellness Programs:
Pure Edge, Inc. has awarded grants to various schools
nationwide for the implementation of a health and wellness
program in public schools and further development of a
health and wellness curriculum.

Local educators are trained to teach Pure Edge, Inc. programs in public schools. The goal of the Foundation is to develop policies that make health and wellness an essential component of the education system.

In 2016 Pure Edge, Inc. expanded outreach efforts to schools and other nonprofit partners through a redesigned website - www.pureedgeinc.org - which offers schools free access to program-related curriculum and resources.

Statement 14 - Form 990-PF, Part IX-A, Line 2 - Summary of Direct Charitable Activities

Description

Research and Development Grants: Pure Edge Inc. supports research at various universities throughout the United States for the purpose of gathering solid evidence of the effectiveness of the Pure Edge, Inc. programs. This evidence will be used to inform national policy discussions and educate policymakers. 05213 Pure Edge, Inc.

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

Name of Manager		Amount		
Paul and Sonia Jones	\$	1,774,410		
Total	\$_	1,774,410		