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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

Open to Public Inspection

Form 990-PF (2016)

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.

For calendar year 2016 or tax year beginning , and ending Name of foundation A Employer identification number Bewkes Family Foundation 51-0390209 Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) 6001 Highway A1A, PMB 8307 772-234-1596 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here Vero Beach FL 32963-1014 G Check all that apply. Initial return Initial return of a former public charity 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the Address change Name change 85% test, check here and attach computation 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 I Fair market value of all assets at J Accounting method X Cash Accrual If the foundation is in a 60-month termination end of year (from Part II, col. (c), under section 507(b)(1)(B), check here Other (specify) 47,780 line 16) ▶ \$ (Part I, column (d) must be on cash basis) (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per purposes the amounts in column (a) (see instructions)) books (cash basis only) 1 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ► |X| If the foundation is **not** required to attach Sch. B 3 Interest on savings and temporary cash investments Dividends and interest from securities 5a Gross rents Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 0 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances Less Cost of goods sold Ç Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 0 Operating and Administrative Expenses OGDEN! Other employee salaries and wages 14 Pension plans, employee benefits 15 Legal fees (attach schedule) See Stmt 1 167 167 167 Stmt 2 3,750 3,750 Accounting fees (attach schedule) 3,750 Other professional fees (attach schedule) 17 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications Other expenses (att sch) 24 Total operating and administrative expenses. Add lines 13 through 23 3,917 3,917 3,917 Contributions, gifts, grants paid 42,875 42,875 26 Total expenses and disbursements. Add lines 24 and 25 46,792 3,917 3,917 42,875 27 Subtract line 26 from line 12. -46,785 Excess of revenue over expenses and disbursements 0 Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)

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- 1	Part II	Ralance Sheets	Attached schedules and amounts in the description colu	ımn	Beginning of year	Ena o	year
_			should be for end-or-year amounts only (See Instruction	ns)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	-		24 - 25		
1	2	Savings and temporary cas	h investments		94,565	47,780	47,780
	3	Accounts receivable					
		Less: allowance for doubtfu	il accounts >				
Ì	4	Pledges receivable]	,	
	_	Less. allowance for doubtfu	il accounts >				
	5	Grants receivable					
	6		ers, directors, trustees, and other				
		disqualified persons (attach	schedule) (see			1	
- 1	_	instructions)	_				
1	7	Other notes and loans receivable (att.		0			
ł	_	Less allowance for doubtful accounts ▶					
ध्र	8	Inventories for sale or use					
Assets	9	Prepaid expenses and defe					
	10a	-	overnment obligations (attach schedule)				
	b	Investments – corporate sto					
ı	C	Investments – corporate bo	· · · · · · · · · · · · · · · · · · ·				
	11	Investments – land, buildings, and equi					
		Less accumulated depreciation (attach	•				
	12	Investments – mortgage loa					
	13	Investments – other (attach					
	14	Land, buildings, and equipment basis					
		Less accumulated depreciation (attach	n sch)				
	15	Other assets (describe)			
	16	Total assets (to be comple	-		04 565	45 500	45 500
\dashv		instructions Also, see page			94,565	47,780	47,780
	17	Accounts payable and accr	ued expenses				
တ္သ	18	Grants payable					
쁦	19	Deferred revenue	to take a conduction of the conduction of th				
回	20		ors, trustees, and other disqualified persons				
Liabilities	21	Mortgages and other notes paya	•	,		-	
	22	Other liabilities (describe)	0		
\dashv	23_	Total liabilities (add lines foundations that follow S		▶ X	 		
S			ough 26 and lines 30 and 31.	A			
nces	24				94,565	47,780	
티	24 25	Unrestricted Temporarily restricted			34,303	47,700	
Net Assets or Fund Bala	26	Permanently restricted					
2	20		follow SFAS 117, check here				
리		and complete lines 27 thr					
히	27	Capital stock, trust principa	_				
욂	28		r land, bldg., and equipment fund		<u> </u>		
SS	29		ilated income, endowment, or other funds				
۲	-30	Total net assets or fund b			94,565	47,780	
割	31	Total liabilities and net as	·				
	•	instructions)	(605		94,565	47,780	
╗	Part I		nges in Net Assets or Fund Balar	nces	<u> </u>		
_			at beginning of year - Part II, column (a), I		st agree with		
		f-year figure reported on pri		•	-	1	94,565
2		amount from Part I, line 27a	•			2	-46,785
3		increases not included in lir				3	
4		ines 1, 2, and 3				4	47,780
5		eases not included in line 2 ((itemize) ▶			5	
_6		· · · · · · · · · · · · · · · · · · ·	at end of year (line 4 minus line 5) - Part II	l, column (b), line 30	6	47,780
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	Enter the appropriate amount in each col	umn for each year, see the instructions be			
•	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution ratio (col (b) divided by col (c))
	2015	32,600	45,530		0.716011
	2014	79,150	51,038		1.550805
	2013	139,355	38,694		3.601463
	2012	119,690	74,238		1.612247
	2011	61,394	74,729		0.821555
4	Total of line 1, column (d) Average distribution ratio for the 5-year b number of years the foundation has been Enter the net value of noncharitable-use	in existence if less than 5 years	, or by the	3 4	8.302081 1.660416 64,282
5	Multiply line 4 by line 3		.	_5_	106,735
6	Enter 1% of net investment income (1% of	of Part I, line 27b)		6	
7	Add lines 5 and 6			7	106,735
8	Enter qualifying distributions from Part XI	I, line 4 check the box in Part VI, line 1b, and com	plete that part using a 1% tax rate So	8 ee the	42,875

Part VI instructions

	990-PF (2016) Bewkes Family Foundation	51-0390209			1	Page 4
<u> Pa</u>	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940	(e), or 4948 – see instruction	s)			
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 nec	cessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1			
	here ▶ ☐ and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter	r 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-)	2			0
3	Add lines 1 and 2		3			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	y Others enter -0-)	4			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	-	5			0
6	Credits/Payments					
а	2016 estimated tax payments and 2015 overpayment credited to 2016	6a 79	<u>o</u>			
b	Exempt foreign organizations – tax withheld at source	6b	_			
C	Tax paid with application for extension of time to file (Form 8868)	6c	_			
d	Backup withholding erroneously withheld	6d	_ _			
7	Total credits and payments Add lines 6a through 6d		7			<u>790</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is a	attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	>	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpa		10			790
11_	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶	790 Refunded ▶	11			
	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	
	participate or intervene in any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political pur	poses (see				
	Instructions for the definition)?			_1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copi	ies of any materials		- i]
	published or distributed by the foundation in connection with the activities.					
С	Did the foundation file Form 1120-POL for this year?			1c	ļ	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during					
	(1) On the foundation > \$ (2) On foundation managers			1	ł	İ
е	Enter the reimbursement (if any) paid by the foundation during the year for political expe	enditure tax imposed		- [
_	on foundation managers > \$			•	İ	İ
2	Has the foundation engaged in any activities that have not previously been reported to t	the IRS?		2	ļ	X
_	If "Yes," attach a detailed description of the activities.			İ		
3	Has the foundation made any changes, not previously reported to the IRS, in its govern					l
4-	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy			3		<u>X</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the	year?	37/3	4a		X
b 5	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A			7.
9	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
6	If "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	d oithor				
•	By language in the governing instrument, or	u elitiei		İ		
	By state legislation that effectively amends the governing instrument so that no mand	atony directions that				ĺ
	conflict with the state law remain in the governing instrument?	atory unections that		6	x	
- ₇	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," of	complete Part II col (c) and D	art VV	- 0	X	 -
8а	Enter the states to which the foundation reports or with which it is registered (see instru		antav		<u> </u>	
-	DE	onoria) F				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to t	he Attorney General				
~	(or designate) of each state as required by General Instruction G? If "No," attach explan	•		8b	x	
9	Is the foundation claiming status as a private operating foundation within the meaning of			-00	<u> </u>	
•	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions					
	complete Part XIV	7 101 1 GILMIY): 11 1 GO,		9		x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a	schedule listing their			-	
	names and addresses	concours noung then		10		x
	THE PARTY OF THE P			Form 99	0-PF	
						1=0.07

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X

3b

N/A

foundation had excess business holdings in 2016)

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

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?

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<u>Pa</u>		arding Activities for Which Form	<u>n 4720 May Be R</u>	Required (con	tinued)		
5a	During the year did the foundation pa	ay or incur any amount to [.]			_		į
		se attempt to influence legislation (sectio	• • •		Yes X No		ĺ
	(2) Influence the outcome of any sp	ecific public election (see section 4955), o	or to carry on,		_		
	directly or indirectly, any voter re	-			Yes X No	1 1	
	(3) Provide a grant to an individual f	or travel, study, or other similar purposes	?		Yes 🗓 No		
	(4) Provide a grant to an organization	n other than a charitable, etc., organization	on described in				1
	section 4945(d)(4)(A)? (see instr	ructions)			Yes 🗓 No		
	(5) Provide for any purpose other th	an religious, charitable, scientific, literary,	or educational	. –			
	purposes, or for the prevention of	f cruelty to children or animals?			Yes 🗓 No		
b	If any answer is "Yes" to 5a(1)-(5), d	lid any of the transactions fail to qualify u	nder the exceptions d	lescribed in	_		
	Regulations section 53.4945 or in a	current notice regarding disaster assistan	ce (see instructions)?	?	N/A	5b	
	Organizations relying on a current no	otice regarding disaster assistance check	here		▶ 🗍		
C	If the answer is "Yes" to question 5a	(4), does the foundation claim exemption	from the tax			1	
	because it maintained expenditure re	esponsibility for the grant?		N/A	Yes No	1 1	
	If "Yes," attach the statement require	ed by Regulations section 53.4945–5(d).		_	_	1 1	
6a		eceive any funds, directly or indirectly, to	pay premiums			-	
	on a personal benefit contract?	· · · · · · · · · · · · · · · · · · ·		Π,	Yes X No		
b	Did the foundation, during the year, p	pay premiums, directly or indirectly, on a j	personal benefit contr	ract?		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	shelter transaction?		Yes X No	i l	
		ny proceeds or have any net income attri		tion?	N/A	7b	
Pa	rt VIII Information About	Officers, Directors, Trustees, F	oundation Man	agers, Highly	Paid Employ	ees,	
	and Contractors					•	
1 L	ist all officers, directors, trustees,	foundation managers and their compe	nsation (see instruc	tions).			
			(b) Title, and average	(c) Compensation	(d) Contributions to		
	(a) Name	and address	hours per week	(If not paid,	employee benefit plans and deferred		ense account, allowances
			devoted to position	enter -0-)	compensation	J Outer a	IIIOMAIICES
E.	Garrett Bewkes, Jr.	Vero Beach	Pres. Treas.				
51	Marker Way,	FL 32963	2.00	0	٥		0
		· · · · · · · · · · · · · · · · · · ·					
2	Compensation of five highest-paid	l employees (other than those included	d on line 1 – see ins	tructions). If non	e, enter	***************************************	
	"NONE."			·			
			(b) Title, and average		(d) Contributions to		
	(a) Name and address of each emplo	yee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		nse account, allowances
			devoted to position		compensation	Ouiei e	mowalloes
NO	NE						
				L		1_	
							
						1	
			_				
Total	number of other employees paid ove	r \$50 000		<u>'</u>	•		0

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Part VIII Information About Officers, Directors, Trustees, Fou	undation Managers, Highly Paid En	nployees,
and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see in	estructions) If none onter "NONE"	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(a) Componention
NONE	(b) Type of service	(c) Compensation
· · · · · · · · · · · · · · · · · · ·		
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 statistical informating organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ation such as the number of	Expenses
1 N/A		
	İ	
2		
2		· · · · · · · · · · · · · · · · · · ·
4		
D. LIVE		
Part IX-B Summary of Program-Related Investments (see ins		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 3 1 N/A	2	Amount
,		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	<u> </u>	Form 990-PF (2016)
		Form 33U-FF (2016)

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4

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

42,875

4

5

_ <u>Pa</u>	art XIII Undistributed Income (see instructions)				
		·	(a)	(b)	(c)	(d)
1	Distributable amount for 2016 from Part XI	,	Corpus	Years prior to 2015	2015	2016
	line 7					3,214
2	Undistributed income, if any, as of the end	of 2016:				
а	Enter amount for 2015 only					
	Total for prior years: 20 , 20	. 20				
3	Excess distributions carryover, if any, to 20					
	From 2011	57,658				
h	From 2012	116,398	1			
c	From 2013	137,420	İ			
ď		76,598	1			
_		30,323				
			418,397			
	Total of lines 3a through e	<u>-</u>	410,397			
4	Qualifying distributions for 2016 from Part	XII,				
- —	line 4 ▶ \$ 42,875					
	Applied to 2015, but not more than line 2a	-				
þ	Applied to undistributed income of prior ye	ars				
	(Election required – see instructions)	<u> </u>				
С	Treated as distributions out of corpus (Elec	ction				
	required – see instructions)	<u>_</u>				
d	Applied to 2016 distributable amount	<u>_</u>				3,214
е	Remaining amount distributed out of corpu	s	39,661			·
5	Excess distributions carryover applied to 2	016				
	(If an amount appears in column (d), the sa	ame				
	amount must be shown in column (a).)					
6	Enter the net total of each column as					
	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e. Subtract	line 5	458,058			
b	Prior years' undistributed income Subtract					
	line 4b from line 2b					
С	Enter the amount of prior years' undistribut	ed				
	income for which a notice of deficiency has					
	been issued, or on which the section 4942	1				
	tax has been previously assessed	(-'				
d	Subtract line 6c from line 6b. Taxable	j	··· · · · · · · · · · · · · · · · · ·			
_	amount – see instructions					
	Undistributed income for 2015. Subtract lin					
·	4a from line 2a Taxable amount – see					
	instructions					
f	Undistributed income for 2016 Subtract lin					
'	4d and 5 from line 1. This amount must be	_				
	distributed in 2017					0
7						
7	Amounts treated as distributions out of cor	·				
	to satisfy requirements imposed by section					
	170(b)(1)(F) or 4942(g)(3) (Election may be	•				
_	required—see instructions)				<u></u>	
8	Excess distributions carryover from 2011 n					
	applied on line 5 or line 7 (see instructions)	57,658			
9	Excess distributions carryover to 2017.					
	Subtract lines 7 and 8 from line 6a	<u> </u>	400,400			· · · · · · · · · · · · · · · · · · ·
10	Analysis of line 9					
а	Excess from 2012	116,398				
b	Excess from 2013	137,420	}			
C	Excess from 2014	76,598				
d	Excess from 2015	30,323	}			
<u>e</u>	Excess from 2016	39,661				
						000 DE

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raue		٠

Pa	rt XIV Private Operating Fou	indations (see in	structions and Par	rt VII-A. question 9)	1 age 10			
1a	If the foundation has received a ruling or								
	foundation, and the ruling is effective for 2016, enter the date of the ruling								
b	Check box to indicate whether the found		_	hed in section 1	942(j)(3) or 494	2(j)(5)			
2a	Enter the lesser of the adjusted net	Tax year	ling loundation descri	Prior 3 years	942([)(3) 01 494	T			
	income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total			
		(4) 2010	(5) 2010	(0) 2014	(4) 2010				
	investment return from Part X for								
	each year listed	· <u>-</u>				 			
b	85% of line 2a								
C	Qualifying distributions from Part XII,		,						
	line 4 for each year listed								
d	Amounts included in line 2c not used directly								
	for active conduct of exempt activities								
е	Qualifying distributions made directly								
	for active conduct of exempt activities.								
	Subtract line 2d from line 2c								
3	Complete 3a, b, or c for the								
	alternative test relied upon								
а	"Assets" alternative test – enter								
	(1) Value of all assets								
	(2) Value of assets qualifying under								
	section 4942(j)(3)(B)(i)								
b	"Endowment" alternative test – enter 2/3								
	of minimum investment return shown in								
	Part X, line 6 for each year listed								
С	"Support" alternative test – enter.								
U	` '								
	(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)								
	(3) Largest amount of support from								
	an exempt organization								
	(4) Gross investment income			<u> </u>					
Pa	rt XV Supplementary Inforn	nation (Complete	this part only if	the foundation ha	ad \$5,000 or more	e in assets at			
	any time during the ye	ear – see instruc	tions.)		_				
1	Information Regarding Foundation Ma	nagers:							
а	List any managers of the foundation who	have contributed mor	e than 2% of the total	contributions received	by the foundation				
	before the close of any tax year (but only	if they have contribute	ed more than \$5,000)	(See section 507(d)(2)	.)				
	E. Garrett Bewkes, J	ſr.							
b	List any managers of the foundation who	own 10% or more of t	the stock of a corporat	ion (or an equally large	portion of the				
	ownership of a partnership or other entity) of which the foundat	ion has a 10% or grea	ter interest	•				
	N/A	•	J						
	Information Regarding Contribution, G	Grant. Gift. Loan. Sch	olarship. etc Progra	ams:					
	Check here ▶ X if the foundation only				oes not accept				
	unsolicited requests for funds If the foun		•	_	•				
	other conditions, complete items 2a, b, c		anto, etc. (see mondet	ions, to individuals of c	ngamzations ander				
			of the person to whom	applications should be	addragad				
d	The name, address, and telephone numb $\mathbf{N/A}$	oei oi e-man address (or the herson to whom	applications should be	auurcastu.				
	N/A								
	—								
b	The form in which applications should be	submitted and inform	ation and materials the	ey should include.					
	N/A								
С	Any submission deadlines:								
	N/A								
d	Any restrictions or limitations on awards,	such as by geographi	cal areas, charitable fi	elds, kinds of institution	ns, or other				
	factors:								
	N/A								

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Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year See Attached Schedule				42,87
Total			▶ 3ā	42,875
b Approved for future payment				
N/A Total			▶ 3b	

_	Part XVI-A	Analysis of Income-Producing Act	ivities				
En	ter gross amo	ounts unless otherwise indicated	Unrelate	ed business income	Exclude	d by section 512, 513, or 514	(8)
			(a)	(b)	(c) Exclusion	(d)	Related or exempt
1	Program ser	rvice revenue	Business code	Amount	code	Amount	function income (See instructions)
·	_				 		
	b				<u> </u>		
	с						
	d						
	е						
	f						
	-	d contracts from government agencies			ļ		
2		dues and assessments			1		
3		avings and temporary cash investments			 		
4		nd interest from securities			14	7	
- 5		come or (loss) from real estate:	- 		_		
		anced property			-		 :
6		t-financed property					 -
	Other investi	come or (loss) from personal property		, <u>-</u>			
8		s) from sales of assets other than inventory					
9		or (loss) from special events					
		or (loss) from sales of inventory			 		·····
		ue. a					
	c						
	е						
12	Subtotal Ad-	d columns (b), (d), and (e)		<u> </u>		7	0
		ne 12, columns (b), (d), and (e)				13	
		in line 13 instructions to verify calculations)					
	Part XVI-B	Relationship of Activities to the Ac					
	Line No. ▼	Explain below how each activity for which income accomplishment of the foundation's exempt purpo					
_	N/A			, promong remove		(Coo mondo	
						··· -	
_			_				
_							
_							
_			 				
				 			
_				_			
				_			
							
_	—			· ·			
	-						·
_						<u> </u>	
_							
_							

Part XVII	Information Regarding	Transfers To a	nd Transactions and	d Relationships W	ith Noncharitable
	Exempt Organizations			-	

		Exompt Organize	4610113								
1 Did the organization directly or indirectly engage in any of the following with any other organization described								⁄es	No		
		01(c) of the Code (other	er than section	on 501(c)(3) organ	ızations) or in se	ction 527, relating to	political				
	organization					_		}			
		om the reporting found	ation to a no	oncharitable exemp	ot organization o	f					
	(1) Cash							1	a(1)		<u>X</u>
	(2) Other as							1	a(2)		X
	Other transa										•
		assets to a noncharit		_					b(1)		X
		ses of assets from a no of facilities, equipment,			On				b(2)		$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$
		rsement arrangements		9612					b(3)		X
		r loan guarantees	•					<u> </u>	b(4) b(5)		X
	• •	ance of services or me	embershin o	r fundraisına solici	tations			_	b(6)	\dashv	X
		acilities, equipment, m	-	_					1c		$\frac{x}{x}$
		r to any of the above is				nn (b) should always	show the fa				<u></u>
		goods, other assets, o		-		• •					
		transaction or sharing	_		-						
) Line no	(b) Amount involved		e of noncharitable exemp				ensactions, and sharing arran	gements	3	
N/A					,						
					, ,,			· ·			
										-	
										_	
											
		ation directly or indirec	•			. •	S		1	(==)	
		section 501(c) of the	=	than section 501(c	c)(3)) or in sectio	n 527?		L.	Yes	X	No
b		nplete the following sc	hedule								
N1		i) Name of organization		(b) Type of o	rganization		(c) Descrip	tion of relationship			
1/	/A										
											
	-Under pen	alties of perjury, I declare th	at I have exami	I ned this return; including	g accompanying sch	ledules and statements, and	to the best of	my knowledge and belief, it is	true.		<u> </u>
		nd complete Declaration of p						May the IRS discuss	<u> </u>	70	
Sign		۾ مي	•	, (`			with the preparer sho			
Here			(Z			1-1.		(see instructions)?	Ye	s 🗌	No
1010		- pull	Bul's	us he	ا م	13/17	Pres	. Treas.			
	Signa	ature of officer or trustee		- / -	Date		Title	· IICab.	_		
						Date	\top		_		
	''''''	po propurer e tiente			1/1	1/1/1.		Date		heck [_ alf-emple	If
Paid	Ned I	P. Curtis, C.	P.A.		11/20	1/ (MID		04/27/			-Jou
Prepa	Firm's n			ller & Ass	sociates	, P.A.		PTIN POO1		47	
Use C	nlv			nal Drive				Firm's EIN ▶ 59-2		_	
			Beach,					Phone no 772 -			
				· -					990		

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FEDERAL STATEMENTS

Part XV Supplementary Information

3. Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual,	1	Purpose of grant or	
	show any relationship to	status of	contribution	Amount
Name and address (home or business)	any foundation manager	recipient		
ivame and address (nome of business)	or substantial contributor			
Bement School	None	Private	Unrestricted	\$1,57
94 Main Street				
Deerfield, MA 01342]			
Class of 74 Memorial Scholarship	None	Private	Unrestricted	\$50
100 W 10th Street, Ste. 1109				
Wilmington, DE 19801				
Community Foundation for Nantucket	None	Private	Unrestricted	\$50
PO Box 204 9 Bay Berry Court	1	ĺ	1	
Nantucket, MA 02554				
Dasie Bridgewater Hope Ctr	None	Private	Unrestricted	\$50
PO Box 701483		İ		
Wabasso, FL 32970				
Dana Farber Cancer Institute	None	Private	Unrestricted	\$20
450 Brookline Avenue	Ţ.	ļ	1	
Boston, MA 02215				
Doctors without Boarders USA	None	Private	Unrestricted	\$1,00
333 Seventh Ave.	Į		1	
New York, NY 10001				:
Gifford Youth Activity Center	None	Private	Unrestricted	1,00
4875 43rd Avenue				
Vero Beach, FL 32967				
Great Point Circle Trustees	None	Private	Unrestricted	1,00
572 Essex Street		<u> </u>	-	
Beverly, MA 01915		1	}	
Hancock Comm Christmas	None	Private	Unrestricted	\$20
PO Box 1070	1	1	1	ı
Hancock, MA 01237		1		
Harvest Food & Outreach Ctr	None	Private	Unrestricted	\$35
1360 28thSt	Ţ		J	
Vero Beach, FL 32960		1	1	

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Part XV Supplementary Information

3. Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	,	Foundation status of recipient	Purpose of grant or contribution	Amount
Historic Deerfield PO Box 321 Deerfield, Ma 01342	None	Private	Unrestricted	\$100
Indian River Community Foundation P.O. Box 643968 Vero Beach, FL 32963	None	Private	Unrestricted	2,500
Indian River Habitat for Humanity 4568 US Hyw #1 Vero Beach, FL 32967	None	Private	Unrestricted	1,200
Indian River Land Trust 80 Royal Palm Pointe, Ste. 301 Vero Beach, FL 32960	None	Private	Unrestricted	\$1,000
Indian River Shores Public Safety Officers Assco 6001 North A1A Indian River Shores, FL 32963	None	Private	Unrestricted	\$100
Jatson Chumig Education Corporation 1177 David Walk Decatur, GA 30033-3766	None	Private	Unrestricted	500
Mckee Botanical Garden 350 US Hyw #1 Vero Beach, FL 32962	None	Private	Unrestricted	500
Musician Aid Society of NY PO Box 179 Hamilton, NY 13346	None	Private	Unrestricted	\$1,000
Nantucket Cottage Hospital 57 Prospect Street Nantucket, MA 02554	None	Private	Unrestricted	\$1,000
Nantucket Land Council PO Box 502 Nantucket, MA 02254	None	Private	Unrestricted	\$250

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FEDERAL STATEMENTS

Part XV Supplementary Information

3. Grants and Contributions Paid During the Year or Approved for Future Payment

3. Grants and Contributions Paid During the Yea Recipient	If recipient is an individual,		Purpose of grant or	
·	show any relationship to	status of	contribution	Amount
	any foundation manager	recipient		
Name and address (home or business)	or substantial contributor	1		
Nantucket Shellfish Association	None	Private	Unrestricted	50
P.O. Box 604	Į.	Į.		
Nantucket, MA 02554-0604		!		
Outward Bound USA		 Private	Unrestricted	 \$0
910 Jackson Street	1.15.15	i iivate	Omesmoica	φυ
Goldon, CO 80401				
Riverside Theatre	None	Private	Unrestricted	¢4 000
3250 Riverside Park Drive	None	Filvate	Onlesincleu	\$1,000
Vero Beach, FL 32967		1	}	
Voto Bedon, 1 E 02007				
Sankaty Head Foundation	None	Private	Unrestricted	\$1,000
PO Box 875	None	I IIValo	Omestricted	φ1,000
Siasconset, MA 02564		1		
	.			
Save Our Sound	None	Private	Unrestricted	\$7,000
4 Barnstable Road				
Hyannis, MA 02601]		
Small Friends on Nantucket, Inc.	None	Private	Unrestricted	\$250
POBox 2826		1	1	·
Nantucket, MA 02584				
Sconset Trust	None	Private	Unrestricted	\$750
PO Box 821	1			***
Siasconset, MA 02564			1	
The Congregational Church of New Canaan	None	Private	Unrestricted	\$500
23 Park Street			<u> </u>	
New Canaan, CT 06840			[
The Learning Alliance	None	Private	Unrestricted	\$500
PO Box 634446	1			ļ
Vero Beach, FL 32960		1		
The Maritime Aquarium	None	Private	Unrestricted	5,000
10 N. Water Street	ł			_,,,,,
Norwalk, CT 06854		1		

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FEDERAL STATEMENTS

Part XV Supplementary Information

3. Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
	show any relationship to	status of	contribution	Amount
	any foundation manager	recipient	i	
Name and address (home or business)	or substantial contributor			
The River Keepers	None	Private	Unrestricted	8,000
PO Box 1812	1			0,000
Jensen Beach, FL 34958		}		
VNA Hospice	None	Private	Unrestricted	\$2,000
1110 35th Lane				72,000
Vero Beach, FI 32960	ļ.			
Vero Beach Museum of Art	None	Private	Unrestricted	\$1,500
3001 Riverside Park Drive	ļ.		ļ.	, ,,,
Vero Beach, FL 32963		Į		
Whole Family Health Center Vero Beach	None	Private	Untestricted	\$100
981 37th Place	l			
Vero Beach, FL 32960				
Veterinary Care Foundation	None	Private	Unrestricted	\$250
16550 NW 46th Street	Ì	ì	1	·
Morristown, FL 32668	1			
Total				£40.07E

Total

\$42,875

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	Statement 1 - Form 990-PF, Part I, Line 16a - Legal Fees	•
Description Robin Lloyd, P.A, Total	Total Investment \$ \$ \$ \$ \$ \$ \$ \$ \$	Adjusted Charitable Purpose Purpose \$
	Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees	es
Curtis, Miller & Assoc Tax Elaine Meyers - Secretarial Total	Total Investment \$ 1,500 \$ \$ 2,250 \$ \$ \$ \$ 3,750 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Adjusted Charitable Purpose 2,250 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
		1-2

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

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