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Form 990-PF

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

OMB No 1545 0052

2011

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

FOF	cale	endar year 2011, or tax year beginning	, 2011,	and ending		,	
		STEVENSON FAMILY FOUNDATION 2 CUTHBERT ROAD			Α	Employer identification num 20-3972504	ber
		BU, CA 90265			В	Telephone number (see the (805) 409-0220	instructions)
					С	If exemption application is	pending, check here
G	Che	ck all that apply Initial return	Initial Return of a forn Amended return	ner public charity	D	1 Foreign organizations, chec	k here
Н		Address change	Name change (c)(3) exempt private fo	undation		2 Foreign organizations meet here and attach computatio	
		Section 4947(a)(1) nonexempt charitable tru	ıst Other taxable p	rivate foundation	E	If private foundation status	
1		David II I (-) I IC)	punting method. X Calletter (specify)	ash Accrual	F	under section 507(b)(1)(A), If the foundation is in a 60-	
	<u>> s</u>		column (d) must be on	cash basis.)		under section 507(b)(1)(B)	
Pa	<u>rt I</u>	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b) Net investmer income	nt	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
		1 Contributions, gifts, grants, etc, received (att sch)					
<u>~</u>		2 Ck ► X if the foundn is not req to att Sch B					
I N 7		3 Interest on savings and temporary cash investments	7,387.	7,38	37.		
≂i		4 Dividends and interest from securities	48,622.	48,62	22.		
12		5a Gross rents					
>		b Net rental income or (loss)					
) E	-	6a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all					
) !	_	assets on line 6a 7 Capital gain net income (from Part IV, line 2)					
] [] E	Ī	8 Net short-term capital gain					
ز ا	!	9 Income modifications	1/2				
ا د	_	10 a Gross sales less returns and allowances					
O PLANCE		b Less Cost of goods sold NO	-, -, -, -, -, -, -, -, -, -, -, -, -, -				
~			الطيس				
		c Gross profit/(loss) (att sch) 11 Other income (attach schedule)	DENI III				
			DE Ve Since	56.00			
	-	12 Total. Add lines 1 through 1	56,009.	56,00	<u> 19.</u>	0.	
	ĺ	14 Other employee salaries and wages					
		15 Pension plans, employee benefits					
	A	16a Legal fees (attach schedule)					
	D M	b Accounting fees (attach sch) SEE ST 1	4,040.				
a	Ņ	c Other prof fees (attach sch) 17 Interest					
O P E	s	17 Interest 18 Taxes (attach schedule)(see instrs) SEE STM 2	10.	•			
R	T R A T	19 Depreciation (attach					
Ţ	T	sch) and depletion					
N G	Ě	20 Occupancy 21 Travel, conferences, and meetings					
A	Ē	22 Printing and publications.		<u>-</u>			
A N D	E X P	23 Other expenses (attach schedule)					
	N						
	E	24 Total operating and administrative expenses. Add lines 13 through 23	4,050.				
	-	25 Contributions, gifts, grants paid PART XV	42,606.				42,606.
		26 Total expenses and disbursements. Add lines 24 and 25	46,656.		0.	0.	42,606.
		27 Subtract line 26 from line 12:		 _	_		
		a Excess of revenue over expenses and disbursements	9,353.				
		b Net investment income (if negative, enter 0-)		56,00	9.		
		C Adjusted net income (if negative, enter 0)				0.	

Par	FIL I	Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only	Beginning of year		f year
	· · · · · ·	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing	9,018.	2,362.	2,372.
	2	Savings and temporary cash investments	8,395.	<u>19</u> , 903.	19,903.
	3	Accounts receivable			
-		Less. allowance for doubtful accounts		-	
	4	Pledges receivable			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions).			
	7	Other notes and loans receivable (attach sch)			
S		Less. allowance for doubtful accounts ▶			
A S E T	8	Inventories for sale or use			
T	9	Prepaid expenses and deferred charges			
S	10 a	Investments — U.S. and state government obligations (attach schedule)			_
	b	Investments — corporate stock (attach schedule)	374,168.	374,168.	289,759.
	C	Investments — corporate bonds (attach schedule)	195,131.	195,131.	197,995.
	11	Investments — land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments – other (attach schedule)	428,135.	432,636.	456,452.
	14	Land, buildings, and equipment. basis ▶		·	
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers — see the instructions. Also, see page 1, item I)	1,014,847.	1,024,200.	966,481.
L	17	Accounts payable and accrued expenses.			
I A	18	Grants payable			
A B I	19	Deferred revenue			
Ľ	20	Loans from officers, directors, trustees, & other disqualified persons	-		
Ţ	21	Mortgages and other notes payable (attach schedule)			
i	22	Other liabilities (describe			
E S	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here		- 0.	
N 5		and complete lines 24 through 26 and lines 30 and 31.			
N F E U T N	24 25	Unrestricted		, <u> </u>	
T N	l	Temporarily restricted Permanently restricted			
	20	Foundations that do not follow SFAS 117, check here	-		
S B S A		and complete lines 27 through 31.			
A S S A E T A	27	Capital stock, trust principal, or current funds	1,000,000.	1,000,000.	
SNC	28	Paid-in or capital surplus, or land, building, and equipment fund			
OE	29	Retained earnings, accumulated income, endowment, or other funds.	14,847.	24,200.	
RS	30	Total net assets or fund balances (see instructions)	1,014,847.	1,024,200.	
	31	Total liabilities and net assets/fund balances (see instructions)	1,014,847.	1,024,200.	
Par	t III /	Analysis of Changes in Net Assets or Fund Balanc		1,021,200.	
		net assets or fund balances at beginning of year - Part II, colum		o with	· · · · · · · · · · · · · · · · · · ·
•	end-d	of-year figure reported on prior year's return)	iii (a), iiile 30 (must agre	1	1,014,847.
		amount from Part I, line 27a		2	9,353.
3	Other i	ncreases not included in line 2 (itemize)		3	· · · · · · · · · · · · · · · · · · ·
4	Add I	ines 1, 2, and 3		4	1,024,200.
		ses 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	1,024,200.

Part IV	(a) List and describe	osses for Tax on Investment the kind(s) of property sold (e.g., rose; or common stock, 200 shares ML	eal estate,	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a N/A						
b					-	
С	<u> </u>					
d						
е						
(e)	Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal		(h) Gain or (e) plus (f) m	(loss) inus (g)
a				-		
b	<u> </u>		.=			
<u>c</u>		·				
<u>d</u>						
<u>e</u>	lata anti fan anasta atauwa	Land or advanced by	ha farmdation on 12/21/60			
	Fair Market Value as of 12/31/69	g gain in column (h) and owned by t (j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a		(I) Gains (Colt gain minus column (k han -0-) or Losses (fr	(), but not less
a	= ** *					-
b						
С						
d						
e					,	
2 Capita	al gain net income or (net	capıtal loss) If gaın, also If (loss), en	enter in Part I, line 7 ter -0- in Part I, line 7			
3 Net sl	nort-term capital gain or (lo	oss) as defined in sections 1222(5) a	nd (6)			
	n, also enter in Part I, line rt I, line 8	8, column (c) (see instructions). If (li	oss), enter -0-	. 3		
Part V	Qualification Under	Section 4940(e) for Reduce	d Tax on Net Investme	ent Income	!	
Was the fou	foundation does not qualif	on 4942 tax on the distributable amo y under section 4940(e). Do not com	plete this part.		Yes	No
1 Enter	· · · ·	each column for each year; see the		iny entries		
B Calen	(a) ase period years dar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	sets (co	(d) Distribution lumn (b) divided	
	2010	_				
	2009					
	2008					
	2007		<u>-</u>			
	2006					
2 Total	of line 1, column (d)			2		
		5-year base period – divide the tota has been in existence if less than 5		3		
4 Enter	the net value of noncharit	able-use assets for 2011 from Part X	line 5	4		
			,,			
5 Multip	oly line 4 by line 3			5		
6 Enter	1% of net investment inco	ome (1% of Part I, line 27b)		6		. .
7 Add I	nes 5 and 6			7		
8 Enter	qualifying distributions fro	m Part XII, line 4		8		
	8 is equal to or greater th // instructions.	an line 7, check the box in Part VI, li	ne 1b, and complete that pa	rt using a 1% ta	ax rate See the	

Pen	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see	nstruc	ctions)			
1 a	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 instrs)		l			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	1_1			1,1	20.
	check 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, column (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			1,1	$\overline{20.}$
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			····	0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			1,1	$\overline{20}$.
	Credits/Payments.					
	2011 estimated tax pmts and 2010 overpayment credited to 2011 6a 108.					
	Exempt foreign organizations — tax withheld at source 6b					
	Tax paid with application for extension of time to file (Form 8868) 6c 1,100.					
	Backup withholding erroneously withheld 6d					
	Total credits and payments. Add lines 6a through 6d	7 [1,2	08.
	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	8				24.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			• •	0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				64.
	Enter the amount of line 10 to be Credited to 2012 estimated tax	11				0.
	WILA Statements Regarding Activities					
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				Yes	No
1 4	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 purposes (see the instructions for definition)?			1Ь		х
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials public or distributed by the foundation in connection with the activities.	'ıshed				
С	Did the foundation file Form 1120-POL for this year?			1 c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.		_ [
	(1) On the foundation \$\\ \\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed of foundation managers • \$ 0.	1				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		_	2		Х
_	If 'Yes,' attach a detailed description of the activities.		•	رحقه		
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		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		<u> </u>		N	-
	If 'Yes,' has it filed a tax return on Form 990-T for this year?		-	4b	N	$\frac{A}{X}$
Э	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If 'Yes,' attach the statement required by General Instruction, T.					Â
	If 'Yes,' attach the statement required by General Instruction T.		-	1		
•	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either. • By language in the governing instrument, or		ŀ			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that cor with the state law remain in the governing instrument?	ıflıct		6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		_	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				ĺ	
	CA		_	:		
b	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			0,6	v	
	(or designate) of each state as required by General Instruction G? If 'No,' attach explanation			8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4 for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If 'Yes,' complete	942(j)(Part X	(5) (<i>IV</i>	9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their na			10		
BAA	and addresses.			10 m 990)-PF (X 2011)
			. 01	550)

Pai	t VII-A 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		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified 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 returns and exemption application? Website address N/A	13	Х	
14	The books are in care of ► C.R. STEVENSON FAMILY FOUND. Telephone no. ► (805)	<u> 409</u>	-022	20
15	Located at ► 30112 CUTHBERT ROAD MALIBU CA ZIP + 4 ► 90265 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		1	N/A
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If 'Yes,' enter the name of the foreign country ►			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	-	Yes	No
1 a	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?			į.
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	-		
	(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		The Same Same	· ·
	(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			evilla de
t	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)?	1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here		£	
•	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 2011?	1c	it in	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)).		edjet	
г	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011? If 'Yes,' list the years 20_10 , 20 , 20		# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions.)	2b	X	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		3	U [28] }
	► 20, 20, 20			7 读
3 <i>a</i>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No			次學等
t	o If 'Yes,' did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011.)	3b	N	/A
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
t	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			
BAA	the tax year beginning in 2011?	4b Form 99		(2011)
		. 01111 95	,U-FF ((2011)

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Part VII-B Statements Regarding Activit	ies for Which Forr	n 4720 May Be Rec	uired (continued)
5a During the year did the foundation pay or incu	-			_
(1) Carry on propaganda, or otherwise attemp	ot to influence legislation	1 (section 4945(e))?	∐ Yes ∑	<∐ No
(2) Influence the outcome of any specific publ on, directly or indirectly, any voter registra		4955), or to carry	Yes 2	
(3) Provide a grant to an individual for travel,	study, or other similar p	ourposes?	∐ Yes ∑	K] No
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	ian a charitable, etc, or 4940(d)(2)? (see instruc	ganization described ctions)	Yes	₹ No
(5) Provide for any purpose other than religiou educational purposes, or for the prevention			Yes [>	₹ No
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in (see instructions)?	he transactions fail to q a current notice regard	ualify under the exception ing disaster assistance	ons	5ь N/A
Organizations relying on a current notice regar	ding disaster assistance	e check here	▶ [JB N/A
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	he foundation claim exe	emption from the	N/A Yes	No
If 'Yes,' attach the statement required by Regu	•	-5(d).	,	
6a Did the foundation, during the year, receive an on a personal benefit contract?	y funds, directly or indi	rectly, to pay premiums	∏Yes ∑	X No
b Did the foundation, during the year, pay premi If 'Yes' to 6b. file Form 8870.	ums, directly or indirect	ly, on a personal benefit	t contract?	6ь Х
7a At any time during the tax year, was the found	ation a party to a prohit	oited tax shelter transact	tion? Yes	X No
b If 'Yes,' did the foundation receive any proceed				N/A 7b
Information About Officers, Dand Contractors	irectors, Trustees	, Foundation Mana	gers, Highly Paid	d Employees,
1 List all officers, directors, trustees, foundation	managers and their co	mpensation (see instru	ctions).	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	other allowances
CLINTON R. STEVENSON, JR.	PRESIDENT &	0.	0.	0.
30112 CUTHBERT ROAD MALIBU, CA 90265	0			
CLINTON R. STEVENSON III 30112 CUTHBERT ROAD MALIBU, CA 90265	SECRETARY & 0	0.	0.	0.
2 Compensation of five highest-paid employees	-	T	ructions). If none, ent	er 'NONE.'
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	other allowances
NONE				
Total number of other employees paid over \$50,000	l <u>.</u>			<u> </u>
BAA	TEEA0306L 1	2/05/11		Form 990-PF (2011)

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Information About Officers, Directors, Trustees, Foundation Ma and Contractors (continued)	nagers, Highly Paid	Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If n		
	Type of service	(c) Compensation
NONE		
		, <u> </u>
Total number of others receiving over \$50,000 for professional services	>	0
Part IX:A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information suclorganizations and other beneficiaries served, conferences convened, research papers produced, etc	n as the number of	Expenses
1 <u>N/A</u>		
2		
3		
4		
Part IX B. Summary of Program-Related Investments (see instructions)	<u> </u>	
Describe the two largest program-related investments made by the foundation during the tax year	er on lines 1 and 2.	Amount
1		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	>	 0.

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ा वा	see instructions.)	roreigi	i louridations,
	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	1a	957,423.
Ь	Average of monthly cash balances	1b	5,690.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	963,113.
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c		<u>, </u>
	(attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	963,113.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	14,447.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	948,666.
6	Minimum investment return. Enter 5% of line 5.	6	47,433.
Parl	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper	rating	foundations
	and certain foreign organizations check here ► and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	47,433.
2a	Tax on investment income for 2011 from Part VI, line 5 2a 1,120.	*	
b	Income tax for 2011. (This does not include the tax from Part VI.)	P P	
С	Add lines 2a and 2b	2c	1,120.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	46,313.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	46,313.
6	Deduction from distributable amount (see instructions)	6	
	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	46,313.
Par	TXII Qualifying Distributions (see instructions)		
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	42,606.
	Program-related investments — total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the.	귳스	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3ь	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	42,606.
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	42,606.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether qualifies for the section 4940(e) reduction of tax in those years.	the foun	dation
BAA			Form 990-PF (2011)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
Distributable amount for 2011 from Part XI, line 7				46,313.
2 Undistributed income, if any, as of the end of 2011.				,
a Enter amount for 2010 only			43,786.	
b Total for prior years: 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2011				
a From 2006				
b From 2007				
c From 2008				
d From 2009				
e From 2010				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2011 from Part				
XII, line 4 ► \$ 42,606.		_		
a Applied to 2010, but not more than line 2a			42,606.	
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus (Election required — see instructions)	0.			
d Applied to 2011 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2011	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a).)				
(-7-7				
6 Enter the net total of each column as				
indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-			İ	
ed income for which a notice of deficiency has been issued, or on which the section				
4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2010 Subtract line 4a from				
line Za Taxable amount — see instructions			1,180.	
f Undistributed income for 2011. Subtract lines				
4d and 5 from line 1. This amount must be				46 212
distributed in 2012 7 Amounts treated as distributions out of	-			46,313.
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
·				
8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2012.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9.			1	
a Excess from 2007				
b Excess from 2008	ļ			
c Excess from 2009	•		1	
d Excess from 2010	1		·	
e Excess from 2011				F 000 DE (0011)

Part XIV Private Operating Founda			rt VII-A questio	n 9)	N/A Page 10
1a If the foundation has received a ruling or d	etermination letter t			and the ruling	
is effective for 2011, enter the date of the b b Check box to indicate whether the foundat		ating foundation de	accribed in caction	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year	ating loundation de	Prior 3 years	4942()(3) 01	4942()(5)
income from Part I or the minimum investment return from Part X for each year listed	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
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			<u> </u>		
 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.					
a 'Assets' alternative test — enter.					
(1) Value of all assets(2) Value of assets qualifying under	-	<u>.</u>			
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				:	
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)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income	(0)		<u> </u>	1.05.000	<u> </u>
Part XV Supplementary Information assets at any time during the	i (Compiete this ne vear — see ir	s part only if the estructions.)	e organization r	iad \$5,000 or m	ore in
Information Regarding Foundation Manage a List any managers of the foundation who holds of any tax year (but only if they have NONE.	nave contributed mo e contributed more t	han \$5,000). (See	section 507(d)(2).)	·	
b List any managers of the foundation who capartnership or other entity) of which the NONE	own 10% or more of foundation has a 10	the stock of a corp % or greater intere	poration (or an equa est.	lly large portion of th	ne ownership of
2 Information Regarding Contribution, Gran Check here ► X if the foundation only requests for funds. If the foundation make complete items 2a, b, c, and d.	nakes contributions s gifts, grants, etc,	to preselected cha (see instructions) to	ritable organizations o individuals or orga	nizations under othe	
a The name, address, and telephone number	er of the person to w	vhom applications s	should be addressed	i.	
b The form in which applications should be s	submitted and inform	nation and materia	ls they should includ	de.	
c Any submission deadlines					
d Any restrictions or limitations on awards, s	such as by geograph	nical areas, charita	ble fields, kinds of ir	nstitutions, or other t	factors.
DAA		FA02101 67/14/11		·	Form 000 PF (2011)
BAA	16	EA0310L 07/14/11			Form 990-PF (2011)

3 Grants and Contributions Paid During the Yo	ear or Approved for Futu	re Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient	Contribution	
Name and address (home or business) a Paid during the year SEE STATEMENT 3	substantial contributor	recipient		
		<u> </u>		10 505
Total b Approved for future payment		1	► 3a	42,606.
Total			► 3b	1

Enter gross amounts unless otherwise indicated.	Unrelated	business income	(c) (d) Exclu- Amount	(e)	
	(a) Business code	(b) Amount	Exclu- sion		Related or exempt function income (See instructions)
1 Program service revenue:			code		
a					
b			+ +		
c		<u> </u>	+		
d			+		
ef			 		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments		•	14	7,387.	_ .
Dividends and interest from securities			14	48,622.	
5 Net rental income or (loss) from real estate:				10,022.	
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					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a			<u> </u>		
b			<u> </u>		
С					
d					
e				76.000	
12 Subtotal. Add columns (b), (d), and (e)				56,009.	56.000
13 Total. Add line 12, columns (b), (d), and (e)				13 _	56,009
(See worksheet in line 13 instructions to verify calculation	ons.)				
Part XVI-B Relationship of Activities to th	e Accomplish	nment of Exemp	ot Purpose	s	
					II
Line No. Explain below how each activity for which in accomplishment of the foundation's exempt	ncome is reported t purposes (other	in column (e) of Pa than by providing fu	art XVI-A cont Inds for such	ributea importantiy to purposes) (See instr	tne uctions.)
N/A	··			· · · · · · · · · · · · · · · · · · ·	
74/ 17					

N/A	Ine No.	accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions.)
	N/A	
		· · · · · · · · · · · · · · · · · · ·
		<u> </u>

Form 990-PF (2011) C.R. STEVENSON FAMILY FOUNDATION 20-3972504 Part XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

de re	escribe lating	organization dir d in section 50 to political orga	1(c) of Inization	the Code (ot ns?	her than se	ection 501(c))(3) organi	zatioi	ns) or in s	anization ection 52	7,			Yes	No
		s from the repo	orting to	oundation to	a noncharii	lable exemp	ot organiza	เนอก ด	οī				4 - 44		V
•) Casi												1a(1)		<u>X</u>
•	-	er assets											1a (2)		X
		insactions:											4. (4)		v
-		s of assets to					_						1 b (1)		<u>X</u>
•	•	hases of asset			•	organizatio	on.						1b(2)		X
•	•	tal of facilities,		·	assets.								1b (3)		<u>X</u>
•	•	nbursement arr	•	ents						•			1b (4)		X
•	•	ns or loan guar		, 	6		-1						1b (5)		X
•	•	ormance of ser			•	•							1b(6)		- <u>X</u>
c 2i	naring	of facilities, eq	uipmen	t, mailing list	is, other as	sets, or pai	a employe	es.		•			1c		<u></u>
th	e good	swer to any of ls, other assets saction or shar	s, or ser	rvices given	by the repo	ortina foundi	ation. If th	e foui	ndation re	ceived le	šs than fai	r market	l value in	of	
(a) Line	no	(b) Amount invol	ved	(c) Name o	of noncharitab	le exempt orga	nization		(d) Descrip	tion of tran	sfers, transac	tions, and	sharing arrang	gements	;
N/A	$\Box \Box$														
								<u> </u>							
														_	
												·			
								1							
											•				
de	escribe	undation direct d in section 50 complete the fo	1(c) of	the Code (ot	ited with, o her than se	r related to, ection 501(c)	one or m (3)) or in	ore ta sectio	x-exempt on 527?	organiza	tions		Yes	ΧI	Vo.
		Name of orga		-	(b	Type of or	ganization			(c) Descripti	on of re	lationship		
N/A	<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				, ., po o. o.	<u> </u>	<u>'</u>	<u> </u>		<i>y</i>	0,, 0, ,0	allo Hornip		
							•								—
		<u> </u>													
	Under p	enalties of perjury, and complete Dec	l declare	that I have exam	inged this retur	n, including acc	companying s	chedul	es and staten	nents, and t	o the best of	my knowle	dge and belief,	ıt ıs true	
	correct,	and complete Dec	laration of	preparer (other	than taxpayer) is based on a	II information	of whic	ch preparer h	as any knov	vledge	-			
Sign		// _	1	4	_	slabre e	1 10			.,	,		May the If this return	i with the	e i
Here			K 1	<i>II</i> —		X / 9	171/12		y Pro	usidev	<u>ıt </u>		preparer s (see instri	shown be	elow
	Signa	ture of officer or tru				Date			Title						No
		Print/Type prepar			Prer	par or's si gnatur	e		Date	1/2/	Check	ıf	PTIÑ		
Paid		MICHAEL 1								1-1	self-em	oloyed	P00846	622	
Prepa	rer	Firm's name		Z LLP							Firm's EIN	<u> </u>			
Use O		Firm's address		755 WILS			TH FL			_					
			LO	S ANGELE	S, CA	90025					Phone no	(310)) 478-4	1148	
BAA													Form 99 6		2011)

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FEDERAL STATEMENTS

PAGE 1

C.R. STEVENSON FAMILY FOUNDATION

20-3972504

STATEMENT 1
FORM 990-PF, PART I, LINE 16B
ACCOUNTING FEES

			(A) ENSES BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	TOTAL	\$ \$	4,040. 4,040.	\$ 0.	\$ 0.	\$ 0.

STATEMENT 2 FORM 990-PF, PART I, LINE 18 TAXES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FTB	TOTAL \$ 10	· • \$ 0.	\$ 0.	\$ 0.

STATEMENT 3 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	 AMOUNT
MALIBU HIGH SCHOLARSHIP FUND 30215 MORNING VIEW DRIVE MALIBU, CA 90265	NONE	EXEMPT	CHARITABLE	\$ 7,500.
CHILDREN'S BUREAU 3910 OAKWOOD AVENUE LOS ANGELES, CA 90004	NONE	EXEMPT	CHARITABLE	10,000.
SALVATION ARMY 900 WEST JAMES M. WOOD BLVD. LOS ANGELES, CA 90015	NONE	EXEMPT	CHARITABLE	7,500.
ONE FOR ALL 1127 E. 67TH STREET INGLEWOOD, CA 90302	NONE	EXEMPT	CHARITABLE	500.
DOCTORS WITHOUT BORDERS USA, INC. 333 SEVENTH AVENUE, 2ND FLOOR NEW YORK, NY 10001	NONE	EXEMPT	CHARITABLE	7,500.

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FEDERAL STATEMENTS

PAGE 2

C.R. STEVENSON FAMILY FOUNDATION

20-3972504

STATEMENT 3 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE GRANT	OF	AMOUNT
BOY'S AND GIRL'S CLUB OF SANTA MONICA 1238 LINCOLN BLVD SANTA MONICA, CA 90401	NONE	EXEMPT	CHARITABLE	\$	2,000.
SMILE TRAIN 41 MADISON AVE, 28TH FLOOR NEW YORK, NY 10010	NONE	EXEMPT	CHARITABLE		5,000.
VOLLEY POP 1025 WESTCREEK LANE WESTLAKE VILLAGE, CA 91362	NONE	EXEMPT	CHARITABLE		2,356.
WESTSIDE GERMAN SHEPHERD RESCUE OF LA 2721 WIGTOWN ROAD LOS ANGELES, CA 90064	NONE	EXEMPT	CHARITABLE		250.
				TOTAL \$	42,606.

(Rev January 2012)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File a separate application for each return.

OMB No 1545 1709

•	If you are filing for an A	Automatic 3-Month Extension,	complete only Part I	and check this box

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a

corporation r request an e Associated V	required to file Form 990-T), or an additional (not xtension of time to file any of the forms listed in F Vith Certain Personal Benefit Contracts, which mung of this form, visit www.irs.gov/efile and click of	automatic) Part I or Pai ist be sent	3-month extension of time. You can elect it II with the exception of Form 8870, Info to the IRS in paper format (see instruction	tronically file Form 8 ormation Return for T	868 to ransfers
Partl I A	utomatic 3-Month Extension of Time. (Only subr	nit original (no copies needed).		
A corporation	n required to file Form 990-T and requesting an a	utomatic 6-	month extension — check this box and co	omplete Part I only	▶ 🗍
All other corp income tax r	porations (including 1120-C filers), partnerships, F eturns.	REMICS, ar	·		
	The second secon		Enter filer's identif	fying number, see in:	
Type or	Name of exempt organization or other filer, see instructions			Employer identification in	` ,
	C.R. STEVENSON FAMILY FOUNDAT			X 20-397250	
File by the due date for	Number, street, and room or suite number. If a P O box, see i	nstructions		Social security num	ber (SSN)
filing your return See	30112 CUTHBERT ROAD		<u> </u>		
nstructions	City, town or post office, state, and ZIP code. For a foreign add	dress, see inst	ructions		
	MALIBU, CA 90265				
Enter the Re	turn code for the return that this application is for	(file a sepa	arate application for each return)		04
Application ls For		Return Code	Application Is For		Return Code
Form 990		01	Form 990-T (corporation)		07
Form 990-BL	-	02	Form 1041-A		08
Form 990-EZ	,	01	Form 4720		09
Form 990-PF	7	04	Form 5227		10
Form 990-T ((section 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-T	(trust other than above)	06	Form 8870		12
Telephone If the org If this is check this the exter I reque until The ex	nsion is for. ist an automatic 3-month (6 months for a corporate	FAX Not iness in the digit Group heck this botton require anization re	o. ► (805) 409-0220 United States, check this box Exemption Number (GEN) . If ox ► and attach a list with the nai d to file Form 990-T) extension of time eturn for the organization named above.		
3a If this a	ange in accounting period application is for Form 990-BL, 990-PF, 990-T, 472 undable credits See instructions.			3a \$	1,208.
payme	application is for Form 990-PF, 990-T, 4720, or 60 nts made. Include any prior year overpayment all the due. Subtract line 3b from line 3a. Include your	owed as a	credit	3b \$	1,208.
EFTPS	Glectronic Federal Tax Payment System). See in the same of the sam	instructions		3c \$	0.

payment instructions.

					Page 2				
Note. Only	are filing for an Additional (Not Automatic) 3-Mon				► X				
	complete Part II if you have already been grante			filed Form 8868.					
• If you	are filing for an Automatic 3-Month Extension, co	mplete only P	art I (on page 1).						
Part II	Additional (Not Automatic) 3-Month Ex	ktension o	f Time. Only file the original (no copies needed).					
			Enter filer's i	dentifying number, see	instructions				
	Name of exempt organization or other filer, see instructions.		<u>}</u> '	Employer identification number	(EIN) or				
Type or	_ _		i.	-					
print	C.R. STEVENSON FAMILY FOUNDAT			X 20-3972504					
File by the	Number, street, and room or suite number. If a P.O. box, see	instructions.	l'	Social security number (SSN)					
extended due date for	RBZ LLP		i,						
filing the return. See	11755 WILSHIRE BLVD NINTH FL								
instructions	City, town or post office, state, and ZIP code. For a foreign ad	dress, see instruc	tions.						
	LOS ANGELES, CA 90025								
	-								
Enter the	Return code for the return that this application is t	for (file a sepa	arate application for each return)		[04]				
		<u> </u>	1		T				
Application Is For	ın	Return Code	Application is For		Return Code				
Form 990					-				
Form 990-	DI.	01			00				
Form 990-		02	Form 1041-A		08				
Form 990-		01	Form 4720 Form 5227		09				
	T (section 401(a) or 408(a) trust)	04	Form 6069		10				
	T (trust other than above)	05	Form 8870		12				
	10/16 NO. (003) 403 UZZU	FAX No. ▶	ND. - (805) 409-0220						
• If the of this whole gro	organization does not have an office or place of b is for a Group Return, enter the organization's fou up, check this box	usiness in the ır digit Group	United States, check this box Exemption Number (GEN)	, If this	is for the				
• If the control of t	organization does not have an office or place of bis for a Group Return, enter the organization's focup, check this box	usiness in the ur digit Group e group, chec 11/15 ing nths, check re	Exemption Number (GEN) Exemption Number (GEN) Exemption Number (GEN) A this box I and attach a list with a second or a sec	. If this the names and EINs of the name is a second to the	is for the				
• If the control of t	organization does not have an office or place of b is for a Group Return, enter the organization's for up, check this box If it is for part of the the extension is for. Quest an additional 3-month extension of time until calendar year 2011, or other tax year beginn the tax year entered in line 5 is for less than 12 more change in accounting period the in detail why you need the extension TAX THER INFORMATION NECESSARY TO Extension is for Form 990-BL, 990-PF, 990-T, 990-T, 990-T, 990-T, 990-T, 990-T, 990-T, 990-T, 990-T, 99	usiness in the ur digit Group e group, chec 1 11/15 ning nths, check re GPAYER RE FILE A CO	Exemption Number (GEN) Exemption Number (GEN) Exemption Number (GEN) At this box □ and attach a list with , 20 12, 20, and ending Pason: □ Initial return ESPECTFULLY REQUESTS ADI MPLETE AND ACCURATE TAX	. If this in the names and EINs of the names	is for the				
• If the control of t	organization does not have an office or place of be is for a Group Return, enter the organization's for up, check this box If it is for part of the the extension is for. Quest an additional 3-month extension of time until calendar year 2011, or other tax year beginn the tax year entered in line 5 is for less than 12 more Change in accounting period the eight of the extension TAX THER INFORMATION NECESSARY TO Extend the property of th	usiness in the ur digit Group e group, check in 11/15 ming miths, check reckPAYER REFILE A CO	e (805) _ 409-0220 e United States, check this box Exemption Number (GEN) ck this box ▶ ☐ and attach a list with , 20 _ 12. , 20 _ , and ending listial return ESPECTFULLY REQUESTS ADI MPLETE AND ACCURATE TAX enter the tentative tax, less any my refundable credits and estimated to credit and any amount paid previous	. If this in the names and EINs of the names	is for the fall				
• If the control of t	organization does not have an office or place of bis for a Group Return, enter the organization's for up, check this box If it is for part of the the extension is for. Quest an additional 3-month extension of time until calendar year 2011, or other tax year beginn the tax year entered in line 5 is for less than 12 more change in accounting period the in detail why you need the extension TANTHER INFORMATION NECESSARY TO Extend the property of	usiness in the ur digit Group e group, check in 11/15 ning	e (805) _ 409-0220 e United States, check this box Exemption Number (GEN) k this box □ and attach a list with , 20 _ 12, 20, and ending asson: □ Initial return ESPECTFULLY REQUESTS ADI MPLETE AND ACCURATE TAX many refundable credits and estimated to the credit and any amount paid previously with this form, if required, by using	. If this in the names and EINs of the names	1,106.				
• If the control of t	organization does not have an office or place of bis for a Group Return, enter the organization's for up, check this box If it is for part of the the extension is for. Quest an additional 3-month extension of time until calendar year 2011, or other tax year beginned tax year entered in line 5 is for less than 12 more change in accounting period as in detail why you need the extension	usiness in the ur digit Group e group, chec 1 11/15 ning nths, check re KPAYER RE FILE A CC 4720, or 6069 6069, enter a allowed as a our payment we instructions	e (805) _ 409-0220 e United States, check this box Exemption Number (GEN) k this box □ and attach a list with , 20 _ 12, 20, and ending asson: □ Initial return ESPECTFULLY REQUESTS ADI MPLETE AND ACCURATE TAX many refundable credits and estimated to the credit and any amount paid previously with this form, if required, by using	. If this in the names and EINs of the names	is for the fall				
If the content of th	organization does not have an office or place of bis for a Group Return, enter the organization's for up, check this box If it is for part of the the extension is for. Quest an additional 3-month extension of time until calendar year 2011, or other tax year beginned tax year entered in line 5 is for less than 12 more change in accounting period as in detail why you need the extension	usiness in the ur digit Group e group, check in 11/15 ming miths, check received a CO 4720, or 6069 millioned as a mur payment we instructions ication mu	e (805) _ 409-0220 e United States, check this box Exemption Number (GEN) ck this box	Final return OITIONAL TIME TO RETURN. 8a \$ lax y 8b \$ 8c \$	1,106.				
• If the content of t	organization does not have an office or place of bis for a Group Return, enter the organization's for up, check this box If it is for part of the the extension is for. Guest an additional 3-month extension of time until calendar year 2011, or other tax year beginner tax year entered in line 5 is for less than 12 more change in accounting period the extension	usiness in the ur digit Group e group, check in 11/15 ming miths, check received a CO 4720, or 6069 millioned as a mur payment we instructions ication mu	e (805) _ 409-0220 e United States, check this box Exemption Number (GEN) ck this box	Final return OITIONAL TIME TO RETURN. 8a \$ lax y 8b \$ 8c \$	1,106.				