

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**

Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter Social Security numbers on this form as it may be made public. Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545 0052 2013

Department of the Treasury Internal Revenue Service

| For ca | lendar year 2013, or tax year beginning | , 2013. | , and ending | , , | |
|--------------------------|--|--|---------------------------|--|--|
| INC. 61 L | N & GEORGE CRAIG FAMILY FOUN | DATION, | | A Employer identification nu 06-1533338 B Telephone number (see the 203-438-9174 | |
| RIDG | EFIELD, CT 06877 | | | C If exemption application is | nending check here |
| G Ch | eck all that apply Initial return Final return | Initial return of a form | ner public charity | D 1 Foreign organizations, che | |
| H (| Address change Check type of organization X Section 50 | Name change (c)(3) exempt private f | oundation | 2 Foreign organizations mee here and attach computati | |
| | Section 4947(a)(1) nonexempt charitable t | rust Other taxable p | orivate foundation | E If private foundation statu | |
| | | ounting method XC | ash Accrual | under section 507(b)(1)(A F If the foundation is in a 60 |)-month termination |
| ► \$ | 127,527. (Part 1, | column (d) must be or | cash basis) | under section 507(b)(1)(B |), check here |
| Party | 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 investment income | t (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
| | Contributions, gifts, grants, etc, received (att sch) | 100,000. | | 1 2 16 W 14 1 | |
| | 2 Ck If the foundn is not req to att Sch B 3 Interest on savings and temporary | | | | , |
| | cash investments 4 Dividends and interest from securities | 3. | · | 3. 3. | |
| | 5 a Gross rents b Net rental income | ATT TO THE PARTY OF THE PARTY O | | The state of the s | |
| R | or (loss) 6 a Net gain/(loss) from sale of assets not on line 10 | | 4.026 | | - 10 (1 |
| R E V | b Gross sales price for all assets on line 6a | | ģ. | | EIVED |
| E N U | / Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain | | | , 45, | 70 |
| Ë | 9 Income modifications 10a Gross sales less returns and | | | 12 IIIN | 2-0 2014 S |
| | allowances b Less Cost of | | | | 2014 0 |
| | goods sold. c Gross profit/(loss) (att sch) | <u> </u> | | OGD OGD | ENIT |
| | 11 Other income (attach schedule) | | | | |
| | 12 Total. Add lines 1 through 11 | 100,003. | - | 3. 3. | |
| | 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages | 0. | | | |
| | 14 Other employee salaries and wages 15 Pension plans, employee benefits | | | | |
| A D | 16a Legal fees (attach schedule) | | | | |
| M | b Accounting fees (attach sch) c Other prof fees (attach sch) | | | _ | |
| O I P S E T | 17 Interest | | | | |
| E T R R A A T T | 18 Taxes (attach schedule)(See instrs) 19 Depreciation (attach sch) and depletion | | | | |
| N V G E | 20 Occupancy | | | - | |
| _ | 21 Travel, conferences, and meetings 22 Printing and publications | | · | | |
| N X | 23 Other expenses (attach schedule) | . 200 | 200 | | |
| A P E N S E | See Statement 1 24 Total operating and administrative | 300. | 300 | | 300. |
| Š | expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid Part XV | 300. 11,000. | 300 | | 300. 11,000. |
| | 26 Total expenses and disbursements. Add lines 24 and 25 | 11,300. | 300 | | 11,300. |
| | 27 Subtract line 26 from line 12: | 11,500. | 300 | | 11,300. |
| | a Excess of revenue over expenses and disbursements | 88,703. | | The series | |
| | b Net investment income (if negative, enter -0). | | |). # 3 | |
| BAA F | C Adjusted net income (if negative, enter -0-) or Paperwork Reduction Act Notice, see inst | ructions. | VOLUME ST | 3. EEA0504L 10/18/13 | Form 990-PF (2013) |

Form 990-PF (2013) SUSAN & GEORGE CRAIG FAMILY FOUNDATION 06-1533338 Page 2 Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) Beginning of year End of year Partil Balance Sheets (a) Book Value (b) Book Value (c) Fair Market Value Cash - non-interest-bearing 2 Savings and temporary cash investments 38,824 127,527 127,527. 3 Accounts receivable Less allowance for doubtful accounts Pledges receivable Less allowance for doubtful accounts Grants receivable Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach sch) ASSETS Less: allowance for doubtful accounts Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - US and state government obligations (attach schedule) b Investments — corporate stock (attach schedule) c Investments - corporate bonds (attach schedule) Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule) 12 Investments - mortgage loans 13 Investments — other (attach schedule) 14 Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) 15 Other assets (describe ► Total assets (to be completed by all filers see the instructions Also, see page 1, item I) 38,824 127,527 127,527 Accounts payable and accrued expenses 18 Grants payable ABI 19 Deferred revenue 20 Loans from officers, directors, trustees, & other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe Total liabilities (add lines 17 through 22) 0 0. Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. N F E U T N 24 Unrestricted 38,824 127,527 25 Temporarily restricted 26 Permanently restricted ASSET Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. В A 27 Capital stock, trust principal, or current funds A N 28 Paid-in or capital surplus, or land, building, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds O E R S 30 Total net assets or fund balances (see instructions) 38,824 127,527 Total liabilities and net assets/fund balances (see instructions) 38,824. 127,527 Partilli Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 1 38,824. Enter amount from Part I, line 27a 2 88,703. Other increases not included in line 2 (itemize) 3 3

6 BAA

4

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

127,527

127,527.

4

5

| 1 a N/A b c d e (e) Gross sales price (f) Depreciation allowed (or allowable) a b c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Fair Market Value as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of column (i) over column (j), if any | | (h) Gain or (e) plus (f) n | | |
|---|--------|---|------------------|--|
| c d e (e) Gross sales price (f) Depreciation allowed (or allowable) (or allowable) (or allowable) (g) Cost or other basis plus expense of sale a b c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Fair Market Value as of 12/31/69 (j) Adjusted basis over column (j), if any a | | | | |
| d e (e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale a b c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Fair Market Value as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of column (i) over column (j), if any | | | | |
| e (e) Gross sales price (f) Depreciation allowed (or allowable) a b c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Fair Market Value as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of column (i) over column (j), if any | | | | |
| (e) Gross sales price (f) Depreciation allowed (or allowable) a b c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Fair Market Value as of 12/31/69 (ii) Fair Market Value as of 12/31/69 (iii) Fair Market Value as of 12/31/69 (iv) Excess of column (iv) over column (iv) over column (iv), if any | | | | |
| (or allowable) plus expense of sale a b c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Fair Market Value as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of column (i) over column (j), if any a | | | | |
| c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Fair Market Value as of 12/31/69 (j) Adjusted basis over column (i) over column (j), if any | | | | |
| c d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Fair Market Value as of 12/31/69 (j) Adjusted basis over column (i) over column (j), if any | | | | |
| d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Fair Market Value as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of column (i) over column (j), if any | | | | |
| e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Fair Market Value as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of column (i) over column (j), if any | | | | |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Fair Market Value as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of column (i) over column (j), if any | | | | |
| (i) Fair Market Value as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of column (i) over column (j), if any | | 412 00000 (000 | Luna (h) | |
| | l t | (1) Gains (Coi gain minus column (than -0-) or Losses (f | k), but not less | |
| b | | | | |
| | | | | |
| c | | | | |
| d | | | | |
| e | | , . | | |
| 2 Capital gain net income or (net capital loss). If gain, also enter in Part I, line 7 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) | 2 | | | |
| If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- | 3 | | | |
| Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment | Income | | | |
| Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base per lif 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part 1 Enter the appropriate amount in each column for each year, see the instructions before making an | | Yes | X No | |
| (a) Base period years Calendar year (or tax year beginning in) (b) Adjusted qualifying distributions Net value of noncharitable-use assets | | (d) Distribution Dlumn (b) divided | | |
| 2012 40,550. 46,7 | 54. | | 0.867305 | |
| 2011 300. 78,2 | 89. | | 0.003832 | |
| 2010 90,800. 154,2 | 67. | | 0.588590 | |
| 2009 10,000. 93,5 | | | 0.106866 | |
| 2008 8,4 | 95. | | | |
| 2 Total of line 1, column (d) | 2 | | 1.566593 | |
| 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 | | 0.313319 | |
| 4 Enter the net value of noncharitable-use assets for 2013 from Part X, line 5 | 4 | | 38,113. | |
| 5 Multiply line 4 by line 3 | 5 | | 11,942. | |
| | 6 | | | |
| 6 Enter 1% of net investment income (1% of Part I, line 27b) | | | 11,942. | |
| 6 Enter 1% of net investment income (1% of Part I, line 27b)7 Add lines 5 and 6 | 7 | | | |
| | | | 11,300. | |

| | 1 990-PF (2013) SUSAN & GEORGE CRAIG FAMILY FOUNDATION, 06-153333 | | F | age 4 |
|-----|--|------------------|----------|-------------------------|
| Par | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruction | ons) | | |
| 1 a | Exempt operating foundations described in section 4940(d)(2), check here | | | |
| | Date of ruling or determination letter (attach copy of letter if necessary — see instrs) | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, | | | 0. |
| | check here. ► and enter 1% of Part I, line 27b | | | , |
| c | : 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-) | | | 0. |
| 3 | Add lines 1 and 2 | | | 0. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | | | 0. |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- | | | 0. |
| 6 | Credits/Payments | | | |
| a | 2013 estimated tax pmts and 2012 overpayment credited to 2013 | | | |
| | Exempt foreign organizations — tax withheld at source | | | |
| | : Tax paid with application for extension of time to file (Form 8868). | , ,~+ | | |
| C | Backup withholding erroneously withheld 6d | | _ | |
| 7 | | | | 0. |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | | 0. |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | | |
| 11 | Enter the amount of line 10 to be Credited to 2014 estimated tax Refunded 11 | | | |
| Par | tivilia Statements Regarding Activities | | | |
| 1 a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | 1 a | Yes | No X |
| t | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? | 1 b | | Х |
| | 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 | _ | - | |
| 6 | End the foundation file Form 1120-POL for this year? If Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation | 1 c | | 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 | | X |
| 4 a | a Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4 a | | X |
| Ŀ | olf 'Yes,' has it filed a tax return on Form 990-T for this year? | 4 b | N | /A |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | <u> </u> | Х |
| | If 'Yes,' attach the statement required by General Instruction T. | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either | İ | | , |
| | By language in the governing instrument, or | | | ŀ |
| | • 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 | | <u> </u> |
| 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 | Х | |
| 8 a | Enter the states to which the foundation reports or with which it is registered (see instructions) CT | | | ! |
| t | of 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 | 8 b | X | - |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(3) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If 'Yes,' complete Part XIV | 5) V 9 | | $\overline{\mathbf{x}}$ |
| 10 | Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses | 10 | | x |
| BAA | | Form 99 | 0-PF (2 | 2013) |

| | n 990-PF (2013) SUSAN & GEORGE CRAIG FAMILY FOUNDATION, CAMILLA Statements Regarding Activities (continued) | 06-1533 | 3338 | F | ⊃age 5 |
|-----|--|------------------------|----------------|------------|---------------|
| | - Parameter | | - T | _ | |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions) | | 11 | | X |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified perso advisory privileges? If 'Yes,' attach statement (see instructions) | n had | 12 | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address N/A | application? | 13 | Х | |
| 14 | The books are in care of ► GEORGE CRAIG Telephone | _`=: | 3) 438 | -91 | 74 |
| 15 | Located at 61 LEE ROAD RIDGEFIELD CT ZIP + 4 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 | <u>06877</u> ► 15 | <u>N/</u> | (<u>-</u> | N/A |
| 16 | At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority or bank, securities, or other financial account in a foreign country? | er a | 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 ► | ; | | | |
| Pai | taviliB 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? | Yes X N | lo | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? | 」 □Yes XN | | | |
| | (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 N | lo | | |
| | (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 XN | lo i | , , | , |
| | (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 XN | lo - = | ! | , |
| ı | If 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 2013? | | 1 c | | Х |
| 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)) | | | | |
| ; | a At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013? If 'Yes,' list the years 20, 20, 20 | Yes X N | lo 5. | | |
| I | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a all years listed, answer 'No' and attach statement — see instructions) | | 2 b | <u>-</u> - | /A |
| • | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years he 20 , 20 , 20 | re | - | | |
| 3 : | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | Yes X N | lo | | ļ |
| ı | o If 'Yes,' did it have excess business holdings in 2013 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 2013) | | 3 b | N | /A |
| 4 : | a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | | 4 a | | v |

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?
 BAA

Form **990-PF** (2013)

4 b

| Form 990-PF (2013) SUSAN & GEORGE CRA | | | 06-15 | 33338 | P. | age 6 |
|--|--|---|--|----------------|---------|-------------------|
| PartiVILB Statements Regarding Activiti | | 4720 May Be Req | uired (continued) | | | |
| 5 a During the year did the foundation pay or incu | | | | , | | |
| (1) Carry on propaganda, or otherwise attemp | ot to influence legislatio | n (section 4945(e))? | ∐ Yes [∑ | ∐No | | |
| (2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra | lic election (see section ation drive? | 4955), or to carry | Yes | ∐ No | ٠. | |
| (3) Provide a grant to an individual for travel, | ∑ No | 1 1 | | | | |
| (4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section | ₹ No | | | | | |
| (5) Provide for any purpose other than religio educational purposes, or for the preventio | us, charitable, scientific n of cruelty to children | , literary, or or animals? | Yes | No | | |
| b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)? | the transactions fail to one a current notice regard | qualify under the excep ding disaster assistance | tions | _ 51 | - N | /A |
| Organizations relying on a current notice rega | rding disaster assistand | ce check here | ▶ [| 7 - | | |
| c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon | the foundation claim ex sibility for the grant? | emption from the | N/A Yes | _ ∏No | | ı |
| If 'Yes,' attach the statement required by Regi | ulations section 53.4945 | 5-5(d). | | - , ; | | |
| 6 a Did the foundation, during the year, receive as on a personal benefit contract? | | | Yes | X No | | |
| b Did the foundation, during the year, pay prem | iums, directly or indirec | tly, on a personal bene | fit contract? | 61 | b | X_ |
| If 'Yes' to 6b, file Form 8870 | | | | a I. | | |
| 7 a At any time during the tax year, was the found b If 'Yes,' did the foundation receive any procee | | | | X No | _ _ | |
| Part VIII Information About Officers, D | - | | | N/A 7t | | |
| and Contractors | neotors, musicus, | i odnadaon mana | gers, riiginiy r ala | Linployed | , | |
| 1 List all officers, directors, trustees, foundation | on managers and their o | compensation (see inst | ructions). | | | |
| | (b) Title, and average | (c) Compensation | (d) Contributions to | (e) Exper | | |
| (a) Name and address | (a) Name and address hours per week devoted to position hours per week devoted to position enter -0-) employee benefit plans and deferred compensation | | | | | nces |
| SUSAN CRAIG | Vice Preside | 0. | 0. | | | 0. |
| _61_LEE_ROAD | 0 | | | | | |
| RIDGEFIELD, CT 06877 | | | | | | |
| _GEORGE_CRAIG | President | 0. | 0. | | | 0. |
| 61 LEE ROAD | 0 | | | - | | |
| RIDGEFIELD, CT 06877 | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | Ì | | |
| 2 Compensation of five highest-paid employees (o | ther than those included | on line 1 – see instructio | ns). If none, enter 'NON | E.' | | |
| (a) Name and address of each employee | (b) Title, and average | (c) Compensation | (d)Contributions to | (e) Exper | | |
| paid more than \$50,000 | hours per week devoted to position | | employee benefit plans and deferred | | allowar | ices |
| | | | compensation | | | |
| None | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | · · · · · · · · · · · · · · · · · · · | | | | |
| | - | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | 1 | | |
| | | | | | | |
| Total number of other employees paid over \$50,000 |) | l <u> </u> | L | <u> </u> | | |
| BAA | TEEA0306L 0 | 7/10/13 | | Form 99 | 0-PF (2 | 013) - |
| | | | | | , - | • |

| Form 990-PF (2013) SUSAN & GEORGE CRAIG FAMILY FOUNDATION, Part VIII Information About Officers, Directors, Trustees, Foundation and Contractors (continued) | 06-11 ation Managers, Highly Paid | Employees, |
|--|--------------------------------------|---------------------------|
| 3 Five highest-paid independent contractors for professional services (see ins | tructions). If none, enter 'NONE.' | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| None | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Table and the second se | | • |
| Total number of others receiving over \$50,000 for professional services | | 0 |
| Partix-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical i organizations and other beneficiaries served, conferences convened, research papers produced, etc. | nformation such as the number of | Expenses |
| 1 N/A | | - |
| | | _ |
| | | |
| 2 | · | _ |
| | | - |
| 3 | | |
| | | - |
| | | |
| 4 | | _ |
| | | _ |
| | | <u> </u> |
| Part Summary of Program-Related Investments (see instruct | ions) | |
| Describe the two largest program-related investments made by the foundation during the t | ax year on lines 1 and 2. | Amount |
| 1 | | _ |
| N/A | · | _ |
| 2 | | |
| ² | | _ |
| | | - |
| All other program-related investments See instructions. | * | |
| 3 | . | |
| | | _ |
| Tabel Add by a 1 through 2 | | |
| Total. Add lines 1 through 3 BAA | | 0. |
| V00 | | Form 990-PF (2013) |

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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

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

BAA

b Cash distribution test (attach the required schedule).

Adjusted qualifying distributions. Subtract line 5 from line 4

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

Form 990-PF (2013)

11,300

11,300.

3 a

3 b

4

5

Part XIII Undistributed Income (see instructions)

| | | (a) Corpus | (b) Years prior to 2012 | (c) 2012 | (d) 2013 |
|-----|--|----------------------|----------------------------|---------------------------------------|---------------------------|
| | Distributable amount for 2013 from Part XI, | | | | 1 006 |
| | Indistributed income, if any, as of the end of 2013: | | | | 1,906. |
| | Enter amount for 2012 only | | | 0. | |
| | otal for prior years: 20 , 20 , 20 | | 0. | | |
| | xcess distributions carryover, if any, to 2013: | | | | |
| | from 2008 | | | | |
| ЬF | rom 2009 1,707. | 1 | | | |
| сF | from 2010 83, 087. | | | | |
| d F | From 2011 | | ; | | |
| e F | From 2012 38, 212. | | i | | |
| f T | otal of lines 3a through e. | 123,006. | | | |
| 4 (| Qualifying distributions for 2013 from Part | | | | - , |
| | (II, line 4 ► \$ <u>11,300.</u> | | _ | - | |
| a△ | Applied to 2012, but not more than line 2a | | | 0. | |
| ЬΑ | Applied to undistributed income of prior years | 3 | | | |
| (1 | Election required - see instructions) | | 0. | | |
| сТ | reated as distributions out of corpus | | | | |
| • | Election required — see instructions) | 0. | | | |
| | Applied to 2013 distributable amount | | | | 1,906. |
| | Remaining amount distributed out of corpus | 9,394. | | | |
| | xcess distributions carryover applied to 2013 If an amount appears in column (d), the | 0. | | | 0. |
| | rame amount must be shown in column (a).) | | | | |
| | | | | | |
| | Inter the net total of each column as | | | | |
| | ndicated below: | 122 400 | | | t |
| | orpus Add lines 3f, 4c, and 4e Subtract line 5 | 132,400. | | · · · · · · · · · · · · · · · · · · · | |
| b P | Prior years' undistributed income Subtract ine 4b from line 2b | | 0. | | |
| | Enter the amount of prior years' undistribut- | | 0. | | |
| е | ed income for which a notice of deficiency | | | | |
| | las been issued, or on which the section 1942(a) tax has been previously assessed | | 0. | | |
| 40 | Subtract line 6c from line 6b Taxable | | <u> </u> | | |
| | amount — see instructions | | 0. | | |
| eli | Indistributed income for 2012 Subtract line 4a from | | | | |
| | ne 2a Taxable amount — see instructions | | | 0. | |
| | Indictional manner for 0012. Order | | | | |
| 1 L | Indistributed income for 2013 Subtract lines d and 5 from line 1. This amount must be | | | | |
| d | listributed in 2014 | | | | 0. |
| | Amounts treated as distributions out of corpus to satisfy requirements imposed | | | | |
| b | y section 170(b)(1)(F) or 4942(g)(3) | | | | |
| (: | see instructions) | 0. | | | |
| 8 E | excess distributions carryover from 2008 not | | | | |
| а | applied on line 5 or line 7 (see instructions) | 0. | | | |
| 9 E | excess distributions carryover to 2014. | 100 400 | | | |
| | Subtract lines 7 and 8 from line 6a | 132,400. | | | |
| | Analysis of line 9. | | | | |
| | Excess from 2009 1,707. | 4 | | | |
| | Excess from 2010 83,087. | - | | İ | |
| - | Excess from 2012 38, 212. | ∤ i | | | |
| | Excess from 2013 9, 394. | 1 | | | |
| AA | 9,394. | L | | <u> </u> | Form 990-PF (2013) |

| | 990-PF (2013) SUSAN & GEORGE CE | | | VII-A. guestion | 06-1533338 | 8 Page 10 N/A | | |
|--------|---|---------------------------------------|---|-------------------------------|---|--------------------------|--|--|
| | 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2013, enter the date of the ruling | | | | | | | |
| b | Check box to indicate whether the foundat | ion is a private ope | erating foundation de | escribed in section | 4942(J)(3) or | 4942(J)(5) | | |
| 2 a | Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | | | |
| | income from Part I or the minimum investment return from Part X for each year listed | (a) 2013 | (b) 2012 | (c) 2011 | (d) 2010 | (e) Total | | |
| b | 85% of line 2a | | | | | *** | | |
| C | Qualifying distributions from Part XII, line 4 for each year listed | | | · | | | | |
| | 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 | | | | | | | |
| 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 | | | | | | | |
| Par | t:XV# Supplementary Information assets at any time during th | (Complete this e year – see in | part only if the istructions.) | foundation had | \$5,000 or more | in | | |
| 1 a | Information Regarding Foundation Manage List any managers of the foundation who have close of any tax year (but only if they have | contributed more t | han 2% of the total co | ntributions received | by the foundation bef | ore the | | |
| | None | | (000) | 300.1017 007 (4)(2)) | | | | |
| E | List any managers of the foundation who own a partnership or other entity) of which the None | 10% or more of the foundation has a 1 | stock of a corporation 0% or greater intere | n (or an equally large est | e portion of the owner | ship of | | |
| 2 | Information Regarding Contribution, Grar Check here ► X if the foundation only ma requests for funds. If the foundation makes complete items 2a, b, c, and d. | kes contributions to | preselected charitable | e organizations and o | does not accept unsol nizations under othe | icited er conditions, | | |
| a | The name, address, and telephone number or | e-mail of the perso | n to whom application | s should be address | ed. | | | |
| | The form in which applications should be s | submitted and info | rmation and material | s they should inclu | de | | | |
| | Any submission deadlines: | | | | | | | |
| d | Any restrictions or limitations on awards, s | such as by geograp | phical areas, charitat | ole fields, kinds of i | nstitutions, or other | factors | | |

TEEA0310L 07/10/13

Form **990-PF** (2013)

BAA

| 3 Grants and Contributions Paid During the Year or Approved for Future Payment | | | | | | | | |
|--|--|----------------------|----------------------------------|---------|--|--|--|--|
| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount | | | | |
| Name and address (home or business) | substantial contributor | recipient | | | | | | |
| a Paid during the year BOOTHBAY REGION FOOD PANTRY PO BOX 63 EAST BOOTHBAY, ME 04544 | NONE | 501 (C) (3) | GENERAL | 10,000. | | | | |
| BOOTHBAY REGION ART FOUNDATION PO BOX 124 BOOTHBAY HARBOR, ME 04538 | NONE | 501(C)(| GENERAL , | 1,000. | | | | |
| | l | | L | | | | | |
| b Approved for future payment Total | | | ► 3a | | | | | |

Form **990-PF** (2013)

Part XVIA Analysis of Income-Producing Activities

| inter gross amounts unless otherwise indicated | Unrelated b | ousiness income | Excluded by | section 512, 513, or 514 | (e) |
|--|-------------------------|---------------------------------------|-------------------------------|--------------------------|--|
| Program service revenue | (a) Business code | (b) Amount | (c) Exclu- sion code | (d) Amount | Related or exempt function income (See instructions) |
| a | | | | | |
| b | | | | | |
| с | | | | 111 | |
| d | | | | | |
| е | | | | | |
| 1 | | · | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash investments | | | | | |
| 4 Dividends and interest from securities | | | 14 | 3. | |
| 5 Net rental income or (loss) from real estate: | | · · · · · · · · · · · · · · · · · · · | | A GATA | |
| 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 | | | | _ == | |
| b | | _ | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| 12 Subtotal Add columns (b), (d), and (e) | | | | 3. | |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 3. |
| See worksheet in line 13 instructions to verify calculati | ons) | | | - | |

| BAA | TEEA0502L 07/11/13 | Form 990-PF (2013) |
|-----|--|---------------------------------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | · · · · · · · · · · · · · · · · · · · |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| N/A | | |
| | accomplishment of the foundation's exempt purposes (other than by providing funds for such p | |

Form 990-PF (2013) SUSAN & GEORGE CRAIG FAMILY FOUNDATION, 06-1533338 | Part XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

| | | | | | | induction of the r | Yes | No |
|----------------------------|--|--------------------------------------|---|----------------------------------|---|-----------------------------------|---|-------------|
| describ | organization direct ed in section 501(c to political organiz | of the Code (o | ngage in any of the folk ther than section 501(c) | owing with ar (3) organizat | ny other organization ions) or in section 527, | | | |
| - | | | a noncharitable exempt | organization | n of. | | 7 | , · |
| (1) Cas | sh | | | | | 1 a (1) | | X |
| (2) Oth | er assets | | | | | 1 a (2) | | X |
| b Other tr | ransactions | | | | | | 100 | |
| (1) Sal | es of assets to a no | oncharitable exe | mpt organization | | | 1 b (1) | | X |
| (2) Pur | chases of assets fr | om a noncharita | able exempt organization | າ | | 1 b (2) | | X |
| (3) Rer | ntal of facilities, equ | upment, or othe | r assets | | | 1 b (3) | | X |
| (4) Rei | mbursement arranç | gements | | | | 1 b (4) | | X |
| (5) Loa | ins or loan guarante | ees. | | | | 1 b (5) | | X |
| (6) Per | formance of service | es or membersh | ip or fundraising solicita | tions | | 1 b (6) | | Χ_ |
| c Sharing | of facilities, equip | ment, mailing li | sts, other assets, or paid | l employees | | 1 c | | X |
| d If the arthe good | nswer to any of the | above is 'Yes,' services given by | complete the following the reporting foundation. | schedule Co f the foundation | lumn (b) should always show the ton received less than fair market valueds, other assets, or services rec | fair market val ue in eived | ue of | |
| (a) Line no | (b) Amount involved | | of noncharitable exempt organi | | (d) Description of transfers, transactions | | ngement | .s |
| N/A | | | | | | <u> </u> | | |
| | | | <u> </u> | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | - | | |
| | | | | | | | | |
| | | | | | | | | |
| describ | oundation directly or ed in section 501(c ' complete the follo |) of the Code (o | d with, or related to, one of ther than section 501(c) | or more tax-ex (3)) or in sec | empt organizations tion 527? | Yes | X | No |
| | a) Name of organiza | | (b) Type of orga | anization | (c) Description o | f relationship | | |
| N/A | | | (-) // | | (0) | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Under | penalties of perjury, I dec | lare that I have exam | nined this return, including accom | panying schedul | es and statements, and to the best of my kno | wledge and belief, | ıt ıs true | |
| Sign Here | yand complete Declarati | lon or preparer (other | than taxpayer) is based on all II CRAIN FF | 6-20-10 | men preparer has any knowledge MEM345 | May the this retuing preparer | n with the shown b | ne below |
| Sign | ture of officer or trustee | | Date | 1 1 | Title | (see inst | Yes | No |
| ~ | Print/Type preparer's | name | Fredar r'e signature | 1/1/1/ | Date Check X | If PTIN | لــــــــــــــــــــــــــــــــــــــ | |
| Paid | STEVEN W. | ANDERŚON | DVI LARA. | V (AYV) | self employed | _ | 7390 | |
| Preparer | Firm's name | Steven W. | Anderson CPA | ** ** ** | W-442 | 5-3988365 | | |
| Use Only | Firm's address | | denning Rd | | | 2 22 2 2 2 3 3 | | |
| | | Downers G | | | Phone no 3 | 31-472-32 | 30 | |
| ВАА | | | | | | Form 99 (| | (013) |
| | | | | | | | ,- | , |

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF
► Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

| Name of the organization SUSAN & GEORGE | Employer identification number | | | | | |
|---|--|--|--|--|--|--|
| INC. 06-1533338 | | | | | | |
| Organization type (check one) | | | | | | |
| Filers of: | Section: | | | | | |
| Form 990 or 990-EZ | 501(c)() (enter number) organization | | | | | |
| | 4947(a)(1) nonexempt charitable trust not treate | ole 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 | | | | | |
| Check if your organization is covered by th | e General Rule or a Special Rule | | | | | |
| Note. Only a section 501(c)(7), (8), or (10) | organization can check boxes for both the General Rule a | and a Special Rule See instructions | | | | |
| General Rule | | | | | | |
| [X] For an organization filing Form 990, 990-E contributor (Complete Parts I and II) | EZ, or 990-PF that received, during the year, \$5,000 or more (i | n money or property) from any one | | | | |
| Special Rules | | | | | | |
| For a section 501(c)(3) organization fill 509(a)(1) and 170(b)(1)(A)(vi) and rece (2) 2% of the amount on (i) Form 990, | ng Form 990 or 990-EZ that met the 33-1/3% support test elved from any one contributor, during the year, a contribu Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Pa | t of the regulations under sections ution of the greater of (1) \$5,000 or arts I and II | | | | |
| For a section 501(c)(7), (8), or (10) organ total contributions of more than \$1,000 the prevention of cruelty to children or | ization filing Form 990 or 990-EZ that received from any one of for use exclusively for religious, charitable, scientific, lite animals. Complete Parts I, II, and III. | contributor, during the year, erary, or educational purposes, or | | | | |
| For a section 501(c)(7), (8), or (10) organ | ization filing Form 990 or 990-EZ that received from any one c isus, charitable, etc, purposes, but these contributions did not t | contributor, during the year, | | | | |
| If this box is checked, enter here the total | contributions that were received during the year for an exclusi | rively religious, charitable, etc, | | | | |
| purpose. Do not complete any of the parts | s unless the General Rule applies to this organization because | e it received nonexclusively | | | | |
| religious, charitable, etc, contributions | of \$5,000 or more during the year | ► \$ | | | | |
| 990-PF) but it must answer 'No' on Part IV | ed by the General Rule and/or the Special Rules does not /, line 2, of its Form 990, or check the box on line H of its et the filing requirements of Schedule B (Form 990, 990-E | Form 990-EZ or on its Form 990-PF | | | | |
| BAA For Paperwork Reduction Act Notice or 990-PF. | e, see the Instructions for Form 990, 990EZ, Sched | lule B (Form 990, 990-EZ, or 990-PF) (2013) | | | | |

| | B (Form 990, 990-EZ, or 990-PF) (2013) | Page | 1 of 1 of Part | | | | | |
|---------------|--|-------------------------------|---|--|--|--|--|--|
| Name of org | r identification number 533338 | | | | | | | |
| Parll | PartII Contributors (see instructions). Use duplicate copies of Part I if additional space is needed | | | | | | | |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | | | |
| 1 | GEORGE CRAIG | | Person X | | | | | |
| | 61 LEE RD | \$100,000. | Noncash | | | | | |
| | RIDGEFIELD, CT 06877-3145 | | (Complete Part II for noncash contributions) | | | | | |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | | | |
| | | \$ | Person Payroll Complete Part II for noncash contributions) | | | | | |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | | | |
| | | \$ | Person Payroll Complete Part II for noncash contributions) | | | | | |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | | | |
| | | \$ | Person Payroll Complete Part II for noncash contributions) | | | | | |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | | | |
| | | \$ | Person Payroll Complete Part II for noncash contributions) | | | | | |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | | | |
| - | | \$ | Person | | | | | |

(Complete Part II for noncash contributions)

Page

1 to

1 of Part II

Name of organization

SUSAN & GEORGE CRAIG FAMILY FOUNDATION,

Employer identification number 06–1533338

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

| Schedule B | (Form | 990, | 990-EZ, | or | 990-PF) | (2013) | |
|----------------------|-------|------|---------|----|---------|--------|--|
| Name of organization | | | | | | | |

Page

1 to

1 of Part III

SUSAN & GEORGE CRAIG FAMILY FOUNDATION

Employer identification number

| DODAM G | X GEORGE CRAIG FAMILLI FOUNDA. | I TON, | | 100-1233338 | |
|---------------------------|--|---|--|---|--------------|
| | Exclusively religious, charitable, exclusively reli | tc., individual contribution \$1,000 for the year. Complet | te columns (a) th | n 501(c)(7), (8) or (10) | ! |
| | For organizations completing Part III, enter total contributions of \$1,000 or less for the year | of exclusively religious, charitable | e, etc., |) ►\$ | 37 / 7 |
| | Use duplicate copies of Part III if additional | | se mstructions | , | _ <u>N/A</u> |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | (d) Description of how gift is he | eld |
| | N/A | | - | | |
| | | | - | | |
| | | (e) Transfer of gift | | | |
| | Transferee's name, addres | | Relation | onship of transferor to transferee | • |
| | <u> </u> | | - | | |
| | | | | - | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | (d) Description of how gift is he | eld |
| | | | | | |
| | | | | | |
| | | (e) | | | |
| | Transferee's name, addres | Transfer of gift | Relatio | onship of transferor to transferee | • |
| | | | | | |
| | | | - - | | |
| (a) | (b) | (c) | | (d) | |
| (a) No. from Part I | Purpose of gift | (c) Use of gift | | (d) Description of how gift is he | eld |
| | | | | | |
| | | | | | |
| | | (e) | | | |
| | Transfer of gift Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | | • |
| | | | | | |
| | <u> </u> | | | | |
| (a) | (b) | (c) | T | (d) | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | (d) Description of how gift is he | eld |
| | | | | | |
| | | | | | |
| | (e) | | | | |
| | (e) Transfer of gift Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | | |
| | | | | | · |
| | | | | | |
| | | I | | | |

2013 Federal Statements Page 1
SUSAN & GEORGE CRAIG FAMILY FOUNDATION,
INC. 06-1533338

Statement 1 Form 990-PF, Part I, Line 23 Other Expenses

(Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return File a separate application for each return.

►Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No 1545-1709

| If you a | re filing for an Automatic 3-Month Extension, co | mplete only | Part I and check this box | | <u>► X</u> | |
|---|---|--|--|---|----------------|--|
| • If you a | re filing for an Additional (Not Automatic) 3-Mon | th Extension | n, complete only Part II (on page 2 of th | ns form) | _ | |
| Do not com | nplete Part II unless you have already been grant | ed an autom | atic 3-month extention on a previously f | filed Form 8868 | | |
| Electronic of corporation request an electronic Associated | filing (e-file). You can electronically file Form 886 required to file Form 990-T), or an additional (no extension of time to file any of the forms listed in Par With Certain Personal Benefit Contracts, which reling of this form, visit www.irs gov/efile and click | 68 if you nee of automatic) t I or Part II v nust be sent | d a 3-month automatic extension of time 3-month extension of time You can elevate the exception of Form 8870, Information to the IRS in paper format (see instruct | e to file (6 months ectronically file Fo n Return for Transfe | ers | |
| Part I | Automatic 3-Month Extension of Time | e. Only sul | omit original (no copies needed). | | | |
| | on required to file Form 990-T and requesting an | | | | nly 🕨 🗀 | |
| All other co income tax | prporations (including 1120-C filers), partnerships returns | , REMICs, a | | | | |
| | Name of exempt organization or other filer, see instructions | | Enter filer's identi | Employer identification | | |
| Type or print | pe or SUSAN S CEORGE CRATE FAMILY FOUNDATION | | | | | |
| File by the | Number, street, and room or suite number If a P O box, see | instructions | | Social security number | er (SSN) | |
| due date for filing your | 61_LEE ROAD | | | | | |
| return See instructions | City, town or post office, state, and ZIP code. For a foreign ad | dress, see instru | ctions | | | |
| | RIDGEFIELD, CT 06877 | | | | | |
| Enter the R | Return code for the return that this application is f | for (file a sep | parate application for each return) | | 04 | |
| Application | 1 | Return Code | Application Is For | | Return Code | |
| Form 990 or | Form 990-EZ | 01 | Form 990-T (corporation) | · | 07 | |
| Form 990-E | BL | 02 | Form 1041-A | | 08 | |
| Form 4720 (| (individual) | 03 | Form 4720 (other than individual) | nan individual) | | |
| Form 990-F | PF | 04 | Form 5227 | | 10 | |
| Form 990-1 | (section 401(a) or 408(a) trust) | 05 | Form 6069 | | 11 | |
| Form 990-1 | (trust other than above) | 06 | Form 8870 | | 12 | |
| Telepho If the of If this is check to the extension of | ension is for. est an automatic 3-month (6 months for a corporatio 8/15 | r digit Group check this b n required to ganization re _, and endii nths, check r | e United States, check this box Exemption Number (GEN) and attach a list with the natifile Form 990-T) extension of time sturn for the organization named above. The property of the property of the organization named above. The property of the property of the organization named above. The property of the property | f this is for the whames and EINs of | • | |
| nonre | s application is for Forms 990-BL, 990-PF, 990-T, efundable credits. See instructions | | | 3a \$ | 0. | |
| tax p | application is for Forms 990-PF, 990-T, 4720, or ayments made. Include any prior year overpayments | ent allowed a | as a credit | 3 ь \$ | 0. | |
| EFIP | ice due. Subtract line 3b from line 3a Include yo S (Electronic Federal Tax Payment System) Sec | e instructions | S | 3c \$ | 0. | |
| Caution. If payment in | you are going to make an electronic funds withd structions | rawal (direct | debit) with this Form 8868, see Form 8 | 453-EO and Form | 8879-EO for | |