

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



DLN: 93491318013184

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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. By law, the IRS cannot redact the information on the form.

▶ Information about Form 990-PF and its instructions is at $\underline{www.irs.gov/form990pf}$.

Open to Public

| For | cale | ndar year 2013, or tax year beginning 01 | -01-2013 , and | d end | ling 12-31- | 2013 | |
|-------------------------------------|----------|--|--|-------|--------------------------|---|--|
| | e of fou | | | | A Employer id | entification numbe | er |
| CR | EWS FA | MILY FOUNDATION | | | 46-1600634 | | |
| Numl | her and | street (or P O box number if mail is not delivered to street addre | ss) Room/suite | | B Telephone nu | mber (see ınstructioi | าร) |
| | BOX 48 | | ss) Room, sake | | (901) 854-4014 | ļ | |
| Citi | | atata annual and 710 automorphis and | | | , , | | g, check here 🕨 |
| | | state or province, country, and ZIP or foreign postal code E, TN 380270488 | | | C II exemption | аррікацоп із репаш | g, check here 📮 j |
| <u>-</u> | heck a | Il that apply Initial return Initial return | of a former public chai | rity | D 1 Foreign of | ganizations, check h | ere 🕨 🗀 |
| G C | icck u | Final return Amended ret | · | 110 | _ | rganizations, check in | • |
| | | Address change Name change | e | | check her | e and attach comput | ation |
| _ | | pe of organization Section 501(c)(3) exempt priv | | | | ındatıon status was t n 507(b)(1)(A), ched | |
| | | 4947(a)(1) nonexempt charitable trust Other tax | | | | | |
| | | et value of all assets at end rom Part II, col. (c), J Accounting method Other (specify) | | ruai | | ation is in a 60-mont n 507(b)(1)(B), ched | |
| | | \$ 12,172,753 (Part I, column (d) mus | | | | | |
| total of amounts in columns (b), (c | | 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) N | let investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
| | | Contributions, gifts, grants, etc , received (attach | 570,000 | | | | |
| | | schedule) | | | | | |
| | 2 | Check ► ☐ If the foundation is not required to attach Sch B | | | | | |
| | 3 | Interest on savings and temporary cash investments | 2,730 | | 2,730 | | |
| | 4 | Dividends and interest from securities | . 171,605 | | 171,605 | | |
| | 5a | Gross rents | | | | | |
| | b | Net rental income or (loss) | | | | | |
| <u>Ф</u> | 6a | Net gain or (loss) from sale of assets not on line 10 | 571,582 | | | | |
| Revenue | b | Gross sales price for all assets on line 6a 4,630,695 | | | | | |
| ₩ ₩ | 7 | Capital gain net income (from Part IV, line 2) | | | 571,582 | | |
| | 8 | Net short-term capital gain | | | | | |
| | 9 | Income modifications | | | | | |
| | | Gross sales less returns and | | | | | |
| | | allowances Less Cost of goods sold | | | | | |
| | | Gross profit or (loss) (attach schedule) | | | | | |
| | | Other income (attach schedule) | <u> </u> | | 13,776 | | |
| | 12 | Total. Add lines 1 through 11 | 1,329,693 | | 759,693 | | |
| | | Compensation of officers, directors, trustees, etc | 0 | | 0 | | 0 |
| | 14 | Other employee salaries and wages | | | | | |
| ě | 15 | Pension plans, employee benefits | | | | | |
| Expenses | 16a | Legal fees (attach schedule) | | | 0 | | 0 |
| Ä | | Accounting fees (attach schedule) | | | 0 | | 7,400 |
| | С | Other professional fees (attach schedule) | . 8 30,670 | | 30,670 | | 0 |
| atıv | 17 | Interest | | | | | _ |
| Str | | Taxes (attach schedule) (see instructions) | 14,652 | | 3,266 | | 0 |
| Administrative | | Depreciation (attach schedule) and depletion | | | | | |
| Ack | | Occupancy | | | | | |
| and | | Printing and publications | | | | | |
| | | Other expenses (attach schedule) | | | 134,505 | | 70 |
| ţ | | Total operating and administrative expenses. | | | | | |
| Operating | | Add lines 13 through 23 | 197,946 | | 168,441 | | 7,470 |
| o | | Contributions, gifts, grants paid | | | | | 738,850 |
| | 26 | Total expenses and disbursements. Add lines 24 and | 936,796 | | 168,441 | | 746,320 |
| | | 25 Cubbrack line 26 from line 12 | | | | | |
| | | Subtract line 26 from line 12 Excess of revenue over expenses and disbursements | 392,897 | | | | |
| | | Net investment income (if negative, enter -0-) | 332,337 | | 591,252 | | |
| | c | Adjusted net income (If negative, enter -0 -) | | | | | |

| Pa | rt II | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) | Beginning of year (a) Book Value | End o | f year (c) Fair Market Value |
|-----------|-------|---|-----------------------------------|-------------------|------------------------------|
| _ | 1 | Cash—non-interest-bearing | (a) BOOK Value | (b) book value | (c) Fall Plance Value |
| | | Savings and temporary cash investments | 3,006,433 | 503,183 | 503,183 |
| | _ | Accounts receivable • | | , | , |
| | | Less allowance for doubtful accounts 🕨 | | | |
| | | Pledges receivable 🟲 | | | |
| | | Less allowance for doubtful accounts 🕨 | | | |
| | 5 | Grants receivable | | | |
| | _ | Receivables due from officers, directors, trustees, and other | | | |
| | | disqualified persons (attach schedule) (see instructions) | | | |
| | 7 | Other notes and loans receivable (attach schedule) | | | |
| | | Less allowance for doubtful accounts | | | |
| w | | Inventories for sale or use | | | |
| Sets | | Prepaid expenses and deferred charges | | | |
| ď | 10a | Investments—U S and state government obligations (attach schedule) | | | |
| | | Investments—corporate stock (attach schedule) | 2,446,545 | 4,090,600 | 4,090,600 |
| | | Investments—corporate bonds (attach schedule) | | _ | |
| | 11 | Investments—land, buildings, and equipment basis 🕨 | | | |
| | | Less accumulated depreciation (attach schedule) | | | |
| | 12 | Investments—mortgage loans | | | |
| | 13 | Investments—other (attach schedule) | 4,855,259 | 7,578,970 | 7,578,970 |
| | 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) | 10,308,237 | 12,172,753 | 12,172,753 |
| | 17 | Accounts payable and accrued expenses | | | |
| | 18 | Grants payable | | | |
| S. | 19 | Deferred revenue | | | |
| abilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| ā | 21 | Mortgages and other notes payable (attach schedule) | | | |
| コ | 22 | Other liabilities (describe 🟲) | | | |
| | | | | | |
| | 23 | Total liabilities (add lines 17 through 22) | 0 | 0 | |
| | | Foundations that follow SFAS 117, check here 🕨 🔽 | | | |
| ,n | | and complete lines 24 through 26 and lines 30 and 31. | | | |
| Balances | 24 | Unrestricted | 10,308,237 | 12,172,753 | |
| <u>ē</u> | | Temporarily restricted | | | |
| 8 | 26 | Permanently restricted | | | |
| Fund | | Foundations that do not follow SFAS 117, check here 🕨 🗆 | | | |
| ₽ | | and complete lines 27 through 31. | | | |
| ō | | Capital stock, trust principal, or current funds | | | |
| Assets | 28 | Paid-in or capital surplus, or land, bldg , and equipment fund | | | |
| 3 | | Retained earnings, accumulated income, endowment, or other funds | | | |
| | 30 | Total net assets or fund balances (see page 17 of the | 40 200 227 | 42.472.752 | |
| ¥ | | instructions) | 10,308,237 | 12,172,753 | |
| | 31 | Total liabilities and net assets/fund balances (see page 17 of | 10 200 227 | 42.472.752 | |
| _ | | the instructions) | 10,308,237 | 12,172,753 | |
| Pa | rt II | Analysis of Changes in Net Assets or Fund Balances | | | |
| 1 | | Total net assets or fund balances at beginning of year—Part II, column | (a), line 30 (must a | gree | |
| | | with end-of-year figure reported on prior year's return) | | 1 | 10,308,237 |
| 2 | | Enter amount from Part I, line 27a | 2 | 392,897 | |
| 3 | | Other increases not included in line 2 (itemize) | | | 1,471,619 |
| 4 | | Add lines 1, 2, and 3 | | 4 | 12,172,753 |
| 5 | | Decreases not included in line 2 (itemize) | | 5 | 0 |
| 6 | | Total net assets or fund balances at end of year (line 4 minus line 5)—P | art II, column (b), l | ine 30 . 6 | 12,172,753 |

| | | ne kind(s) of property sold (e g , re use, or common stock, 200 shs M | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) | |
|--------------------|--|---|---|--------------------------------------|----------------------------------|--|
| 1a | See Additional Data Ta | able | | | | |
| b | | | | | | |
| С | | | | | | |
| d | | | | | | |
| e | | | | <u> </u> | 1 (1) 0 | //) |
| (€ | e) Gross sales price | (f) Depreciation allowe (or allowable) | | t or other basis opense of sale | | or (loss)) mınus (g) |
| а | See Additional Data Ta | ible | | | | |
| b | | | | | | |
| С | | | | | | |
| d | | | | | | |
| e | | | | | | |
| Со | omplete only for assets sh | owing gain in column (h) and owne (i) Adjusted basis | | n on 12/31/69 cess of col (ı) | | (h) gain minus less than -0-) oi |
| (i) | FM V as of 12/31/69 | as of 12/31/69 | , , , | col (j), if any | | om col (h)) |
| а | See Additional Data Ta | ible | | | | |
| b | | | | | | |
| С | | | | | | |
| d | | | | | | |
| е | | | | | 1 | |
| 2 | Capital gain net income | e or (net capital loss) | If gain, also enter If (loss), enter -0- | | | |
| - | Not short tarm canital | l, | | J | 2 | 571,58 |
| 3 | | gain or (loss) as defined in sectio | | | | |
| | | art I, line 8, column (c) (see instru | ctions) if (loss), e | nter - U - | | |
| Part | V Qualification Ur | nder Section 4940(e) for R | educed Tay or | Not Investme | nt Income | |
| /as the f "Yes, | ," the foundation does not | ave this part blank section 4942 tax on the distribute qualify under section 4940(e) Do nt in each column for each year, se | not complete this | part | | ┌ Yes ┌ No |
| | (a) | (b) | (c) | I | (d) | |
| Base year (| e period years Calendar (or tax year beginning in) | Adjusted qualifying distributions | Net value of noncha | | Distributio (col (b) divided | |
| · · · | 2012 | 0 | | 10,153,613 | | 0 000000 |
| | 2011 | | | | | |
| | 2010 | | | | | |
| | 2009 | | | | | |
| | 2000 | | | | | |
| | • | | | | | |
| | Total of line 1 column | (d) | | | 2 | 0.00000 |
| 2 | | (d) | | | 2 | 0 00000 |
| 2 | A verage distribution ra | (d) | vide the total on lin | e 2 by 5, or by | 2 3 | |
| | Average distribution ra the number of years th | itio for the 5-year base period—div | vide the total on lin e if less than 5 yea | e 2 by 5, or by | | 0 00000 |
| 3 | A verage distribution rathe number of years the | itio for the 5-year base period—div e foundation has been in existence | vide the total on lin e if less than 5 yea | e 2 by 5, or by | 3 | 0 00000 |
| 3 | A verage distribution rathe number of years the Enter the net value of radiulation Multiply line 4 by line 3 | etio for the 5-year base period—dive foundation has been in existence noncharitable-use assets for 2013 | vide the total on line if less than 5 yea | e 2 by 5, or by rs | 3 4 | 0 00000 |
| 3 4 5 | A verage distribution rathe number of years the Enter the net value of radiulation Multiply line 4 by line 3 | natio for the 5-year base period—dive foundation has been in existence anoncharitable-use assets for 2013 3 | vide the total on line if less than 5 yea | e 2 by 5, or by rs | 3 4 5 | 0 00000 0 00000 11,040,69 5,91 |

| | 990-PF (2013) | | | age 4 |
|------------|---|-------------|------|--------------|
| | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst | ructio | ns) | |
| 1a | Exempt operating foundations described in section 4940(d)(2), check here ▶ ┌─ and enter "N/A ") on line 1 | | | |
| | Date of ruling or determination letter (attach copy of letter if necessary-see instructions) | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check | | ! | 5,913 |
| | 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, col (b) | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | | | 0 |
| 3 | Add lines 1 and 2 | | ! | 5,913 |
| 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 | | ! | 5,913 |
| 6 | Credits/Payments | | | |
| a | 2013 estimated tax payments and 2012 overpayment credited to 2013 6a 10,000 | | | |
| b | Exempt foreign organizations—tax withheld at source 6b | | | |
| C | Tax paid with application for extension of time to file (Form 8868) 6c 8,000 | | | |
| d | Backup withholding erroneously withheld 6d | | | |
| 7 | Total credits and payments Add lines 6a through 6d | | 18 | ,000 |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached. | | | 59 |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 | | | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid \rightarrow 10 | | 12 | ,028 |
| 11 | Enter the amount of line 10 to be Credited to 2014 estimated tax 12,028 Refunded 11 | | | 0 |
| Par | t VII-A Statements Regarding Activities | | | |
| 1 a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did | | Yes | No |
| | ıt participate or intervene in any political campaign? | 1a | | No |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of | | | |
| | the instructions for definition)? | 1b | | No |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | | |
| | published or distributed by the foundation in connection with the activities. | | | |
| C | Did the foundation file Form 1120-POL for this year? | 1c | | No |
| d | Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year | | | |
| | (1) On the foundation \$\bigs\\$0 (2) On foundation managers \$\bigs\\$ \$0 | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | | | |
| | on foundation managers 🕨 \$0 | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | No |
| | If "Yes," attach a detailed description of the activities. | | | |
| 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 | | No |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | No |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | No |
| | 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 • By language in the governing instrument, or | | | |
| | • By state legislation that effectively amends the governing instrument so that no mandatory directions | | | |
| | that conflict with the state law remain in the governing instrument? | 6 | Yes | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV. | 7 | Yes | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) TN | | | |
| ь | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney | | | |
| U | General (or designate) of each state as required by General Instruction G? If "No," attach explanation. | 8b | Yes | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) | | . 03 | |
| | or 4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? | | | |
| | If "Yes," complete Part XIV | 9 | | No |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses. | 10 | Yes | |

| | A Continued Departing Activities (continued) | | <u></u> | age 3 |
|-----|---|------------|------------|-------|
| | **TYII-A Statements Regarding Activities (continued) | | | |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the | 11 | | Na |
| 4.5 | meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) | 11 | | No |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had | 4.0 | \ \ | |
| | advisory privileges? If "Yes," attach statement (see instructions) | 12 | Yes | |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Yes | |
| | Website address ► <u>N/A</u> | | | |
| 14 | The books are in care of ►HILLIARD R CREWS JR Telephone no ►(901 | 854 | 4014 | |
| | Located at ►PO BOX 488 COLLIERVILLE TN ZIP+4 ►3802704 | 88 | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here | | | ▶ ┌ |
| | and enter the amount of tax-exempt interest received or accrued during the year | | | |
| 16 | At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over | | Yes | No |
| 10 | a bank, securities, or other financial account in a foreign country? | 16 | 163 | No |
| | See instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the name of the | 10 | | 140 |
| | foreign country | | | |
| Do | rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| Fa | 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) | | 1.03 | 110 |
| 10 | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes V No | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V 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)? | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | | | |
| | ıf the foundatıon 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 🔽 No | | | |
| b | 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 page 20 of the instructions)? | 1b | | |
| | Organizations relying on a current notice regarding disaster assistance check here | | | |
| С | 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 | | No |
| 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)) | | | |
| а | 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 , 20 | | | |
| b | 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 | | |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | | |
| | ► 20, 20, 20 | | | |
| За | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at | | | |
| | any time during the year? | | | |
| b | 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.). | 3b | | No |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | No |
| 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? | 4h | 1 | No |

| Pa | rt VII-B | Statements Reg | ardir | ng Activities for | Whi | ch Form 4720 N | May Be Required (cont | inued | 1) | | <u> </u> |
|-------|--------------|---------------------------|--------|-----------------------------------|----------|-------------------------------------|--|----------|------------------|--------|----------|
| 5a | | e year did the foundation | | _ | | | • | | | | |
| | (1) Carry | on propaganda, or othe | rwise | attempt to influence | legis | slation (section 494 | 5(e))? Yes | √ No | | | |
| | | ence the outcome of any | | • | _ | • | | | | | |
| | | | | | | | T Yes [| - No | | | |
| | | de a grant to an individ | | | | | ┌ Yes ┌ | | | | |
| | | de a grant to an organiz | | | | | , , | | | | |
| | | | | | | | Yes [| - No | | | |
| | | de for any purpose othe | | | | | ,, | | | | |
| | | | | | | | | - NO | | | |
| ь | | | - | • | | | the exceptions described in | | | | |
| | | | | | | | see instructions)? | | 5b | | |
| | | | | | | | | ŀ | 36 | | |
| _ | | | | | | | | | | | |
| С | | wer is "Yes" to questio | | | | · · | | | | | |
| | | | | | | | T Yes 「 | No | | | |
| | | nttach the statement req | | | | | | | | | |
| 6a | | undation, during the ye | | | | | | _ | | | |
| | • | al benefit contract? | | | | | · | | | | |
| b | Did the fo | undation, during the ye | ar, pa | y premiums, directly | orın | directly, on a persor | nal benefit contract? | - [| 6b | | No |
| | If "Yes" to | o 6b, file Form 8870. | | | | | | | | | |
| 7a | At any tır | ne during the tax year, | was tl | ne foundation a party | to a | prohibited tax shelt | er transaction? TYes [| √ No | | | |
| b | If yes, did | d the foundation receive | any | proceeds or have any | / net | ıncome attrıbutable | to the transaction? | | 7b | | |
| | | Information Abou | ıt Of | ficers, Directors, | , Tru | ustees, Foundat | tion Managers, Highly | Paid | Emp | loyee | es, |
| | rt VIII | and Contractors | | | | | | | | | |
| _1_ | List all off | icers, directors, trustee | | | | | | | | | |
| | (a) Nar | ne and address | | Title, and average hours per week | - | c) Compensation If not paid, enter | (d) Contributions to employee benefit plans | (e) E | xpens | еассо | unt, |
| | (a) Nai | ile alla address | | voted to position | ` | -0-) | and deferred compensation | oth | other allowances | | |
| HILLI | ARD R CREW | S JR | 1 | SIDENT/DIRECTOR | | 0 | | | | | 0 |
| 100 | 01 HOLME | SROAD | 2 00 | • | | | | | | | |
| | | E,TN 38017 | | | | | | | | | |
| JASOI | N L CREWS | | TRE | ASURER/DIRECTOR | | 0 | C |) | | | 0 |
| 294 | DUBRAY N | MANOR DRIVE | 0 25 | | | | | | | | |
| COL | LIERVILLE | E,TN 38017 | | | | | | | | | |
| STAC | Y CREWS MC | GEE | SEC | RETARY/DIRECTOR | | 0 | C |) | | | 0 |
| | | ORE DRIVE | 4 00 | | | | | | | | |
| | | E,TN 38017 | | | | | | | | | |
| _2 | Compensat | tion of five highest-pai | d emp | oloyees (other than t | hose | included on line 1—s | see instructions). If none, e | nter "N | IONE." | | |
| (2) | Name and | l address of each emplo | | (b) Title, and avera | ige | | (d) Contributions to employee benefit | (a) E | vnanc | e acco | unt |
| (a) | | nore than \$50,000 | yee | hours per week | | (c) Compensation | plans and deferred | 1 ` ′ | | wance | • |
| | | . , | | devoted to positio | n | | compensation | | | | |
| NON | l E | | | | | | | | | | |
| | | | | 1 | | | | | | | |
| | | | | | | | | | | | |
| | | | | 1 | | | | | | | |
| | | | | | _ | | | | | | |
| | | | | - | | | | | | | |
| | | | | | \dashv | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | <u> </u> | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| Tota | Inumbero | f other employees hald | over | ± 5.0.000 | - | | • | | | | Λ |

| Form 990-PF (2013) | | Page / |
|--|---|------------------|
| Part VIII Information About Officers, Directors, True and Contractors (continued) | stees, Foundation Managers, Highly | Paid Employees, |
| 3 Five highest-paid independent contractors for professional service | es (see instructions). If none, enter "NONE". | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional service | s | 0 |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year Include | | Expenses |
| organizations and other beneficiaries served, conferences convened, research papers p | roduced, etc | Expenses |
| 1 | | |
| 2 | | |
| 3 | | |
| Part IX-B Summary of Program-Related Investments | e (caa instructions) | |
| Describe the two largest program-related investments made by the foundation duri | - | A mount |
| 1 | , | |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| All other program-related investments See page 24 of the instruction | ons | |
| 3 | | |
| | | |
| | | |
| Total. Add lines 1 through 3 | | 0 |

| Pa | rt X Minimum Investment Return (All domestic foundations must complete this part. Fo see instructions.) | reign | foundations, |
|-----|--|-------|-----------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , | | |
| | purposes | | |
| а | A verage monthly fair market value of securities | 1a | 10,301,601 |
| b | A verage of monthly cash balances | 1b | 907,227 |
| C | Fair market value of all other assets (see instructions) | 1c | 0 |
| d | Total (add lines 1a, b, and c) | 1d | 11,208,828 |
| e | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0 |
| 3 | Subtract line 2 from line 1d | 3 | 11,208,828 |
| 4 | Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ % of line 3 (for greater amount, see | | |
| | ınstructions) | 4 | 168,132 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 | 5 | 11,040,696 |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 552,035 |
| Pai | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations | atıng | foundations and |
| | certain foreign organizations check here 🕨 📗 and do not complete this part.) | Π. | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 552,035 |
| 2a | Tax on investment income for 2013 from Part VI, line 5 2a 5,913 | | |
| Ь | Income tax for 2013 (This does not include the tax from Part VI) 2b | | |
| С | Add lines 2a and 2b | 2c | 5,913 |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 546,122 |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0 |
| 5 | Add lines 3 and 4 | 5 | 546,122 |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0 |
| 7 | Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, | | |
| | line 1 | 7 | 546,122 |
| Par | Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes | | |
| а | Expenses, contributions, gifts, etc —total from Part I, column (d), line 26 | 1a | 746,320 |
| b | Program-related investments—total from Part IX-B | 1b | 0 |
| 2 | A mounts 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 | | |
| а | Suitability test (prior IRS approval required) | За | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 746,320 |
| 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 | 5,913 |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 740,407 |

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

| For | m 990-PF (2013) | | | | Page 9 |
|-----|--|----------------------|----------------------------|-------------|--------------------|
| E | art XIII Undistributed Income (see instru | ctions) | | | |
| | | (a) Corpus | (b) Years prior to 2012 | (c) 2012 | (d) 2013 |
| 1 | Distributable amount for 2013 from Part XI, line 7 | • | · | | 546,122 |
| 2 | Undistributed income, if any, as of the end of 2013 | | | | |
| а | | | | 17,571 | |
| b | Total for prior years 20, 20, 20 | | 0 | | |
| 3 | | | | | |
| а | From 2008 | | | | |
| b | From 2009 | | | | |
| C | From 2010 | | | | |
| d | From 2011 | | | | |
| | From 2012 | | | | |
| f | Total of lines 3a through e | 0 | | | |
| 4 | Qualifying distributions for 2013 from Part | | | | |
| | XII, line 4 🕨 \$ | | | | |
| а | Applied to 2012, but not more than line 2a | | | 17,571 | |
| b | Applied to undistributed income of prior years | | | | |
| | (Election required—see instructions) | | 0 | | |
| C | Treated as distributions out of corpus (Election | 0 | | | |
| | required—see instructions) | | | | 546,122 |
| | Applied to 2013 distributable amount | 182,627 | | | 340,122 |
| | Remaining amount distributed out of corpus | 182,827 | | | |
| 5 | Excess distributions carryover applied to 2013 | | | | 0 |
| | (If an amount appears in column (d), the same amount must be shown in column (a).) | | | | |
| 6 | Enter the net total of each column as | | | | |
| 0 | indicated below: | | | | |
| а | Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 182,627 | | | |
| | Prior years' undistributed income Subtract | | | | |
| _ | line 4b from line 2b | | 0 | | |
| c | Enter the amount of prior years' undistributed | | | | |
| | income for which a notice of deficiency has | | | | |
| | been issued, or on which the section 4942(a) | | 0 | | |
| _ | tax has been previously assessed | | | | |
| a | Subtract line 6c from line 6b Taxable amount —see instructions | | 0 | | |
| _ | Undistributed income for 2012 Subtract line | | | | |
| _ | 4a from line 2a Taxable amount—see | | | | |
| | instructions | | | 0 | |
| f | Undistributed income for 2013 Subtract | | | | |
| | lines 4d and 5 from line 1 This amount must | | | | 0 |
| _ | be distributed in 2014 | | | | |
| , | A mounts treated as distributions out of corpus to satisfy requirements imposed by | | | | |
| | section 170(b)(1)(F) or 4942(g)(3) (see | | | | |
| | instructions) | 0 | | | |
| 8 | Excess distributions carryover from 2008 not | 0 | | | |
| | applied on line 5 or line 7 (see instructions) | | | | |
| 9 | Excess distributions carryover to 2014. | 182,627 | | | |
| | Subtract lines 7 and 8 from line 6a | 102,027 | | | |
| | Analysis of line 9 | | | | |
| | Excess from 2010 | | | | |
| | Excess from 2010 Excess from 2011 | | | | |
| | Excess from 2011 | | | | |
| | Excess from 2013 | | | | |
| _ | | | <u> </u> | | |

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

c Any submission deadlines

factors

| Part XV Supplementary Inform 3 Grants and Contributions Paid | l During the Year or An | proved for E | uture Payment | |
|---|--|--------------------------------------|----------------------------------|---------|
| | If recipient is an individual, | | | |
| Recipient Name and address (home or business) | show any relationship to any foundation manager | Foundation status of recipient | Purpose of grant or contribution | A mount |
| a Paid during the year | or substantial contributor | | | |
| See Additional Data Table | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | 738,85 |
| b Approved for future payment | <u> </u> | <u> </u> | | 738,83 |
| ,, | 1 | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | h. 25 | |

| Form 990-1 | · · · | | | | | Page 12 |
|------------------|---|------------------|--------------------|-----------------------|-----------------------|---------------------------------------|
| | -A Analysis of Income-Produci | | | T | | |
| Enter gross | s amounts unless otherwise indicated | Unrelated be | usiness income | Excluded by section | | (e) Related or exempt function income |
| _ | n service revenue | Business code | (b) A mount | (c) Exclusion code | (d) A mount | (See Instructions) |
| · | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| g Fees | and contracts from government agencies | | | | | |
| 3 Interes | rship dues and assessments st on savings and temporary cash ments | | | 14 | 2,730 | |
| | 4 Dividends and interest from securities | | | 14 | 171,605 | |
| | ntal income or (loss) from real estate | | | | | |
| | financed property ebt-financed property | | | | | |
| | ntal income or (loss) from personal | | | | | |
| | ty | | | 14 | 13,776 | |
| 8 Gain or | r (loss) from sales of assets other than | | | | , | |
| | ory | | | 18 | 571,582 | |
| | ome or (loss) from special events profit or (loss) from sales of inventory | | | | | |
| 11 Otherr | evenue a | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | _ | | _ |
| | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) | | | 0 <u> </u> | 759,693 L 3 | • |
| | orksheet in line 13 instructions to verify cores. -B Relationship of Activities to | | nlichmant of F | Evampt Durnas | 0.5 | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's instructions) | h income is rej | ported ın column (| (e) of Part XVI-A c | ontributed importa | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| - | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| - | | | | | | |
| | | | | | | |
| | | | | | | |

| Paru | XVII | Noncharitable | | | | | saction | s and F | ceiationsnips | with | | | | | | |
|---------------------|-------------------|---|------------------------|----------------------|-------------------------------------|------------------|------------------------|-------------------------|------------------------------|--------------------------|--------------------------------|--------|-----------|--|--|--|
| | | rganization directly or ii 01(c) of the Code (othe | ndırectly (| engage | ın any of the | e following wit | | | | | | Yes | No | | | |
| _ | anızat | | | | | | | | | | | | | | | |
| | | from the reporting four | | | | | | | | | | | | | | |
| (1) | Cash | | | | | | | | | | 1a(1) | | No | | | |
| ` ' | | erassets | | | | | | | | | 1a(2) | | No | | | |
| | | nsactions | | | | | | | | | | | | | | |
| | | s of assets to a noncha | | | | | | | | | | | No | | | |
| | | hases of assets from a | | | | | | | | | 1b(2) | | No | | | |
| | | al of facilities, equipme | | | | | | | | | 1b(3) | | No | | | |
| | | bursement arrangemer | | | | | | | | | 1b(4) | | No | | | |
| | | s or loan guarantees. | | | | | | | | | 1b(5) | | No | | | |
| | | rmance of services or n | | | | | | | | | 1b(6) | | No | | | |
| | | f facilities, equipment, | | | | | | | | | 1c | | No | | | |
| of t | he god iny tra | wer to any of the above ods, other assets, or se nsaction or sharing arr (b) Amount involved | rvices giv angement | en by tl , show i | he reporting in column (d | foundation I | f the fou f the goo | ndation ro ds, other | eceived less than | fair marke es receive | et value ed | ! | nts | | | |
| | | • | | | | | ` _ | • | · | , | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| des | cribed | indation directly or indi d in section 501(c) of th | ne Code (d | | | | | | | | .F _Y e | ıs F | No | | | |
| b If" | Yes," | complete the following : (a) Name of organization | | | (b) ⁻ | Type of organiza | ition | _ | (c) Descrip | tion of relation | onship | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |
| Sign Here | the bas | ler penalties of perjury, best of my knowledge a ed on all information of ***** | ınd belief, | ıt ıs tru | ie, correct, a as any know | and complete | | | | n taxpayeı Maythe I | r or fidu RS discus: | ciary) | IS urn | | | |
| | 🏴 🕆 | Signature of officer or t | rustee | | | ate | — P | Title | | (see insti | oreparer st ·)? 🔽 Ye | s No | 7VV | | | |
| Paid | aror | Print/Type preparer's CARL J HAAG | name | Prepa | rer's Sıgnat | ure | Date | | Check if self- employed ▶ | PTIN P(| 00529 | 953 | | | | |
| Prep Use Only | u 1 G 1 | Firm's name ► | REYN | OLDS E | BONE & GR | IESBECK PLO | <u> </u> | | Firm's EIN ▶ 62 | -042872 | 3 | | | | | |
| Unity | | Firm's address ▶ | | WHEEL 74568 | LIS DRIVE : | SUITE 300 | MEMPHI | S, TN | Phone no (901 |) 682-243 | 2-2431 | | | | | |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

| (a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co) | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) |
|---|--|-----------------------------------|----------------------------------|
| RAYMOND JAMES - 6523 | Р | | |
| RAYMOND JAMES - 6523 | Р | | |
| DUNCAN WILLIAMS - 1360 | Р | | |
| COMPOUND CAPITAL INVESTMENT FUND | D | | |
| COMPOUND CAPITAL INVESTMENT FUND | D | | |
| GULLANE CAPITAL PARTNERS | Р | | |
| GULLANE CAPITAL PARTNERS | Р | | |
| CAPITAL GAINS DIVIDENDS | Р | | |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

| (2) Cuasa aslas musa | (6) Danna status allawad | (m) Cook on other house | (h) Com on (loop) |
|-----------------------|---|---|---|
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | (h) Gaın or (loss) (e) plus (f) mınus (g) |
| 1,863,706 | | 1,644,442 | 219,264 |
| 2,137,210 | | 2,149,977 | -12,767 |
| 261,487 | | 253,491 | 7,996 |
| 90,875 | | | 90,875 |
| 147,577 | | | 147,577 |
| | | 11,203 | -11,203 |
| 117,324 | | | 117,324 |
| 12,516 | | | 12,516 |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 | | | (I) Gains (Col (h) gain minus |
|---|--------------------------------------|--|--|
| (i) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col (ı) over col (j), ıf any | col (k), but not less than -0-) or Losses (from col (h)) |
| | | | 219,264 |
| | | | -12,767 |
| | | | 7,996 |
| | | | 90,875 |
| | | | 147,577 |
| | | | -11,203 |
| | | | 117,324 |
| | | | 12,516 |

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

| HILLIARD R CREWS JR | |
|---------------------|--|
| JASON L CREWS | |
| STACY CREWS MCGEE | |

Form 990PF Part XV Line 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 | Foundation status of recipient | Purpose of grant or contribution | A mount |
|--|--|--------------------------------------|--------------------------------------|---------|
| Name and address (home or business) | or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| AGAPE CHILD & FAMILY SERVICES INC 111 RACINE STREET MEMPHIS,TN 38111 | | PC | GENERAL - HEARTLIGHT CONFERENCE | 5,000 |
| BOY SCOUTS OF AMERICA 171 S HOLLYWOOD MEMPHIS,TN 38112 | | PC | GENERAL - OPERATING | 1,000 |
| BRIARCREST CHRISTIAN SCHOOL 6000 BRIARCREST AVENUE MEMPHIS,TN 38120 | | PC | GENERAL - OPERATING | 20,000 |
| BRIDGE BUILDERS 477 NORTH FIFTH STREET MEMPHIS,TN 38105 | | PC | GENERAL - OPERATING | 5,000 |
| CAMPUS CRUSADE FOR CHRIST PO BOX 628222 ORLANDO,FL 328628222 | | PC | GENERAL - OPERATING | 1,100 |
| CHRISTIAN MEDICAL & DENTAL ASSOCIATIONS PO BOX 7500 BRISTOL,TN 376217500 | | PC | GENERAL - OPERATING | 1,000 |
| CHURCH HEALTH CENTER 1210 PEABODY AVENUE MEMPHIS,TN 38104 | | PC | GENERAL - OPERATING | 200,000 |
| COMMUNITY FOUNDATION OF GREATER MEMPHIS 1900 UNION AVENUE MEMPHIS,TN 38104 | | PC | GENERAL - CREWS/SHELBY GROUP FUND | 50,000 |
| DREAM 2 DISCOVER YOU 374 WINDING RIVER CIRCLE 203 MEMPHIS,TN 38120 | | PC | GENERAL - OPERATING | 500 |
| DREAM FACTORY OF MEMPHIS INC PO BOX 381766 GERMANTOWN,TN 381831766 | | PC | GENERAL - OPERATING | 5,000 |
| GERMANTOWN UNITED METHODIST CHURCH 2331 SOUTH GERMANTOWN RD GERMANTOWN,TN 38138 | | PC | GENERAL - OPERATING | 8,000 |
| GIFTS OF LOVE INC 3639 NEW GETWELL STE 1 MEMPHIS,TN 38118 | | PC | GENERAL - OPERATING | 500 |
| GLOBAL SERVICES ASSOCIATES PO BOX 20425 BOULDER,CO 80308 | | PC | GENERAL - OPERATING | 1,000 |
| INTERNATIONAL COMMUNITY FOUNDATION 2505 N AVENUE NATIONAL CITY, CA 91950 | | PC | GENERAL - OPERATING | 500 |
| LEBONHEUR CHILDREN'S HOSPITAL FOUNDATION 850 POPLAR AVENUE MEMPHIS,TN 38105 | | PC | GENERAL - OPERATING | 2,500 |
| Total | | | | 738,850 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| | | | and real of Approved for t | |
|---|---|-------------------------|--|---------|
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | A mount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| LIFE OF PRAISE 2708 TRAVIS DRIVE MCKINNEY,TX 75070 | | PC | GENERAL - OPERATING | 13,500 |
| MAKE-A-WISH 1780 MORIAH WOODS BLVD STE 10 MEMPHIS,TN 381174215 | | PC | GENERAL - OPERATING | 500 |
| MAYO CLINIC 200 FIRST STREET SW ROCHESTER,MN 55905 | | PC | ENDOWMENT FUND FOR REGENERATIVE MEDICINE | 12,000 |
| MEMPHIS CHILD ADVOCACY CENTER 1085 POPLAR AVENUE MEMPHIS,TN 38105 | | PC | GENERAL - OPERATING | 1,000 |
| MEMPHIS MUSEUMS INC 3050 CENTRAL AVENUE MEMPHIS,TN 38111 | | PC | GENERAL - OPERATING | 1,000 |
| MEMPHIS SYMPHONY ORCHESTRA 585 SOUTH MENDENHALL RD MEMPHIS,TN 381174215 | | PC | GENERAL - OPERATING | 2,500 |
| MEMPHIS THUNDER RACING INC 9040 GARDEN ARBOR DRIVE STE 206 GERMANTOWN,TN 38138 | | PC | GENERAL - OPERATING | 200 |
| MEMPHIS UNION MISSION 383 POPLAR AVENUE MEMPHIS,TN 381010330 | | PC | GENERAL - OPERATING | 5,000 |
| MID-SOUTH FOOD BANK 239 SOUTH DUDLEY MEMPHIS,TN 38104 | | PC | GENERAL - OPERATING | 5,000 |
| MIFA PO BOX 3130 MEMPHIS,TN 38173 | | PC | GENERAL - OPERATING | 35,000 |
| PALMER HOME FOR CHILDREN PO BOX 746 COLUMBUS, MS 39703 | | PC | GENERAL - OPERATING | 2,500 |
| REFORMED UNIVERSITY FELLOWSHIP PO BOX 890004 CHARLOTTE,NC 282890004 | | PC | GENERAL - OPERATING | 2,000 |
| RONALD MCDONALD HOUSE CHARITIES ONE KROC DRIVE OAK BROOK,IL 60523 | | PC | GENERAL - OPERATING | 500 |
| SCHOOL SEED 2670 UNION AVE EXT STE 1123 MEMPHIS,TN 38112 | | PC | GENERAL - OPERATING | 500 |
| SHELBY FARMS PARK CONSERVANCY 500 NORTH PINE LAKE DRIVE MEMPHIS,TN 38134 | | PC | GENERAL - THE GROVE ANNUAL FUND | 3,600 |
| Total | | | | 738,850 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | A mount |
|--|---|-------------------------|--|---------|
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| SOCIETY OF ENTREPRENEURS PO BOX 770839 MEMPHIS,TN 38177 | | PC | GENERAL - SPONSORSHIP | 3,000 |
| ST GEORGE'S INDEPENDENT SCHOOL 1880 WOLF RIVER BLVD COLLIERVILLE,TN 380179052 | | PC | ST GEORGE'S GERMANTOWN CREWS LIBRARY FUND | 10,500 |
| ST JUDE CHILDREN'S RESEARCH HOSPITAL 51 GERMANTOWN COURT STE 309 CORDOVA,TN 38018 | | PC | GENERAL - OPERATING | 10,000 |
| STREETS MINISTRIES PO BOX 42181 MEMPHIS,TN 381742181 | | PC | GENERAL - OPERATING | 5,000 |
| TEACH FOR AMERICA 175 TOYOTA PLAZA STE 350 MEMPHIS,TN 38103 | | PC | GENERAL - OPERATING | 255,000 |
| THE BADDOUR CENTER PO BOX 97 SENATOBIA, MS 38668 | | PC | GENERAL - OPERATING | 750 |
| THE EXCEPTIONAL FOUNDATION 4965 WILLOW ROAD MEMPHIS,TN 38117 | | PC | GENERAL - OPERATING | 100 |
| THE EXCHANGE CLUB FAMILY CENTER OF THE MID-SOUTH INC 2180 UNION AVENUE MEMPHIS,TN 38104 | | PC | GENERAL - OPERATING | 4,600 |
| UNITED WAY OF THE MID-SOUTH 6775 LENOX CENTER CT STE 200 MEMPHIS,TN 38115 | | PC | GENERAL - OPERATING | 50,000 |
| UNIVERSITY OF MEMPHIS FOUNDATION 635 NORMAL STREET ALUMNI CTR MEMPHIS,TN 381523750 | | PC | GENERAL - OPERATING | 1,000 |
| UNIVERSITY OF TENNESSEE FOUNDATION 2 SOUTH DUNLAP SUITE 420 MEMPHIS,TN 38163 | | PC | GENERAL - HEALTH SCIENCE CENTER | 1,000 |
| YOUTH LEADERSHIP OF MEMPHIS 1255 LYNNFIELD RD STE 141 MEMPHIS,TN 38119 | | PC | GENERAL - OPERATING | 2,000 |
| YOUTH VILLAGES PO BOX 341154 MEMPHIS,TN 381841154 | | PC | GENERAL - OPERATING | 10,000 |
| Total | | | | 738,850 |

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491318013184

214. 00 10 10 10 10 10 10 10

OMB No 1545-0047

Schedule B (Form 990, 990-EZ,

or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

2013

| Name | of the | organizat | tion |
|-------|--------|-----------|------|
| CREWS | FAMILY | FOUNDATIO | NC |

Employer identification number

46-1600634

| Organization type (check o | ne |
|----------------------------|----|
|----------------------------|----|

| Filers of: | Section: | | | |
|---|---|--|--|--|
| Form 990 or 990-EZ | 501(c)() (enter number) organization | | | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | | | |
| | 527 political organization | | | |
| Form 990-PF | 501(c)(3) exempt private foundation | | | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | |
| | 501(c)(3) taxable private foundation | | | |
| | covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions | | | |
| For an organization fix | ling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or ne contributor. Complete Parts I and II | | | |
| Special Rules | | | | |
| under sections 509(a | 3) organization filing Form 990 or 990-EZ that met the 33 ¹ /3% support test of the regulations ()(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II | | | |
| For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III | | | | |
| For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did not total more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions of \$5,000 or more during the year | | | | |

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

Name of organization CREWS FAMILY FOUNDATION Employer identification number

46-1600634

| Part I | Contributors (see instructions) Use duplicate copies of Part I if additional space is needed | | |
|------------|--|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| _1_ | JASON L CREWS 294 DUBRAY MANOR DRIVE COLLIERVILLE, TN 38017 | \$285,000 | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| _2_ | STACY CREWS MCGEE 1289 BRAYSHORE DRIVE COLLIERVILLE, TN 38017 | \$285,000 | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |

Name of organization
CREWS FAMILY FOUNDATION

46-1600634

Employer identification number

| Part II | Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed | | |
|---------------------------|---|--|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (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 |
| | | \$ | |

| | of organization FAMILY FOUNDATION | | | Employer identification number | | |
|---|--|---|--|-------------------------------------|--|--|
| | | | | 46-1600634 | | |
| th Fo | ixclusively religious, charitable, etc., indicat total more than \$1,000 for the year. (or organizations completing Part III, enter the contributions of \$1,000 or less for the year see duplicate copies of Part III if additional spa | Complete colur total of <i>exclu</i> s (Enter this info | nns (a) through (e) and <i>rively</i> religious, charitable | the following line entry e, etc., | | |
| a) No. from Part I | (b) Purpose of gift | (c) | Use of gift | (d) Description of how gift is held | | |
| $-\mid$ $=$ | | | | | | |
| | Transferee's name, address, and | | Transfer of gift Relation | ship of transferor to transferee | | |
| a) No. | | | | | | |
| from Part I | (b) Purpose of gift | (c) | Use of gift | (d) Description of how gift is held | | |
| | | | | | | |
| _ | Transferee's name, address, and | | Transfer of gift Relation | ship of transferor to transferee | | |
| a) No. | | | | | | |
| rom Part I | (b) Purpose of gift | (c) Use of gift | | (d) Description of how gift is held | | |
| $ \begin{bmatrix} - \\ - \end{bmatrix}$ | | | | | | |
| | Transferee's name, address, and | | Transfer of gift Relation | ship of transferor to transferee | | |
| _ | | | | | | |
| a) No. rom Part I | (b) Purpose of gift | (c) | Use of gift | (d) Description of how gift is held | | |
| $-\mid =$ | | | | | | |
| | Transferee's name, address, and | (e) Transfer of gift and ZIP 4 Relatio | | ship of transferor to transferee | | |
| | | | | | | |

TY 2013 Accounting Fees Schedule

Name: CREWS FAMILY FOUNDATION

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|-----------------|--------|--------------------------|------------------------|---|
| ACCOUNTING FEES | 7,400 | 0 | | 7,400 |

TY 2013 General Explanation Attachment

Name: CREWS FAMILY FOUNDATION

| Identifier | Return Reference | Explanation |
|------------|--|--|
| | FORM 990-PF, PART VII-A, LINE 12 | RECIPIENT CREWS/SHELBY GROUP FUND - DONOR ADVISED FUND C/O COMMUNITY FOUNDATION OF GREATER MEMPHISHOW DISTRIBUTION ACCOMPLISHES CHARITABLE PURPOSE THE DISTRIBUTION CONTINUES TO BE EARMARKED FOR THE PURPOSES OF RELIGIOUS, CHARITABLE, SCIENTIFIC, LITERARY, OR EDUCATIONAL PURPOSES OR FOR THE PREVENTION OF CRUELTY TO CHILDREN OR ANIMALS THE DONOR ADVISED FUND WILL ALSO ALLOW OTHERS TO HELP DIRECT THE ALLOCATION OF FUNDS TO LOCAL CHARITABLE ORGANIZATIONS THE AMOUNT TREATED AS A QUALIFYING DISTRIBUTION \$50,000 |

TY 2013 Investments Corporate Stock Schedule

Name: CREWS FAMILY FOUNDATION

| Name of Stock | End of Year Book Value | End of Year Fair Market Value |
|-----------------------------|---------------------------|----------------------------------|
| LONGLEAF PARTNERS FUND | 0 | 0 |
| LONGLEAF INTERNATIONAL FUND | 0 | 0 |
| PARK NATIONAL CORPORATION | 0 | 0 |
| RAYMOND JAMES #6523 | 4,090,600 | 4,090,600 |

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491318013184

TY 2013 Investments - Other Schedule

Name: CREWS FAMILY FOUNDATION

| Category/ Item | Listed at Cost or FMV | Book Value | End of Year Fair Market Value |
|--------------------------------------|-----------------------|------------|----------------------------------|
| MORGAN KEEGAN MEZZANINE FUND, LP | FMV | 126,473 | 126,473 |
| COMPOUND CAPITAL INVESTMENT FUND, LP | FMV | 3,555,610 | 3,555,610 |
| GULLANE CAPITAL PARTNERS, LLC | FMV | 2,376,797 | 2,376,797 |
| CCSD II, LP | FMV | 415,779 | 415,779 |
| DUNCAN WILLIAMS #1360 | FMV | 1,104,311 | 1,104,311 |

TY 2013 Legal Fees Schedule

Name: CREWS FAMILY FOUNDATION

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|------------|--------|--------------------------|------------------------|---|
| LEGAL FEES | 10,649 | 0 | | 0 |

DLN: 93491318013184

TY 2013 Other Expenses Schedule

Name: CREWS FAMILY FOUNDATION

| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|---|-----------------------------------|--------------------------|---------------------|--|
| MK MEZZANINE FUND - PORTFOLIO DEDUCTIONS | 3,074 | 3,074 | | 0 |
| COMPOUND CAPITAL INVESTMENT FUND - PORTFOLIO DEDUCTIONS | 57,736 | 57,736 | | 0 |
| GULLANE CAPITAL PTNRS - INVESTMENT INTEREST | 30 | 30 | | 0 |
| CCSD II LP - PORTFOLIO DEDUCTIONS | 30,632 | 30,632 | | 0 |
| GULLANE CAPITAL PTNRS - OTHER DEDUCTIONS | 1,287 | 1,287 | | 0 |
| BANK SERVICE CHARGES | 140 | 140 | | 0 |
| P O BOX RENTAL | 140 | 70 | | 70 |
| GULLANE CAPITAL PTNRS - OTHER LOSS | 41,536 | 41,536 | | 0 |

DLN: 93491318013184

TY 2013 Other Income Schedule

Name: CREWS FAMILY FOUNDATION

| Description | Revenue And Expenses Per Books | Net Investment Income | Adjusted Net Income |
|---|-----------------------------------|--------------------------|---------------------|
| MK MEZZANINE FUND - OTHER PORTFOLIO INCOME | 6 | 6 | 6 |
| CCSD II LP - OTHER INCOME | 293 | 293 | 293 |
| COMPOUND CAPITAL INVESTMENT FUND - OTHER INCOME | 13,477 | 13,477 | 13,477 |

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491318013184

TY 2013 Other Increases Schedule

Name: CREWS FAMILY FOUNDATION

| Description | Amount |
|-----------------------------|-----------|
| UNREALIZED INVESTMENT GAINS | 1,471,619 |

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491318013184

TY 2013 Other Professional Fees Schedule

Name: CREWS FAMILY FOUNDATION

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|--------------------------|--------|--------------------------|------------------------|---|
| INVESTMENT ADVISORY FEES | 30,670 | 30,670 | | 0 |

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - DLN: 93491318013184

TY 2013 Substantial Contributors Schedule

Name: CREWS FAMILY FOUNDATION

| Name | Address |
|-------------------|---|
| JASON L CREWS | 294 DUBRAY MANOR DRIVE COLLIERVILLE,TN 38017 |
| STACY CREWS MCGEE | 1289 BRAYSHORE DRIVE COLLIERVILLE,TN 38017 |

TY 2013 Taxes Schedule

Name: CREWS FAMILY FOUNDATION

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|------------------------|--------|--------------------------|------------------------|---|
| FOREIGN TAXES WITHHELD | 3,266 | 3,266 | | 0 |
| FEDERAL TAXES | 11,386 | 0 | | 0 |