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### <sub>Form</sub> 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.

OMB No 1545-0052 2014

Department of the Treasury

▶ Information about Form 990-PF and its separate instructions is at www.irs gov/form990pf. Open to Public Inspection Internal Revenue Service 09/16 , **2014**, and ending For calendar year 2014 or tax year beginning 12/31.2014 A Employer Identification number Name of foundation CRENNEL FAMILY FOUNDATION 47-1867691 B Telephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) Room/suite (800) 839-1754 FOUNDATION SOURCE 501 SILVERSIDE RD 123 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here • • WILMINGTON, DE 19809-1377 G Check all that apply X Initial return Initial return of a former public charity D 1 Foreign organizations, check here. Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change computation . . . . . H Check type of organization | X | Section 501(c)(3) exempt private foundation E If private foundation status was terminate Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust under section 507(b)(1)(A), check here . J Accounting method | X | Cash | Accrual Fair market value of all assets at If the foundation is in a 60-month termination Other (specify) \_\_\_\_\_ end of year (from Part II, col (c), line under section 507(b)(1)(B), check here . 1,000,009. 16) > \$ (Part I, column (d) must be on cash basis ) (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and for charitable total of amounts in columns (b), (c), and (d) (b) Net investment (c) Adjusted net expenses per may not necessarily equal the amounts in income income purposes books column (a) (see instructions)) (cash basis only) 1,000,000. Contributions, gifts, grants, etc., received (attach schedule) . If the foundation is not required to attach Sch B Check ▶ q q Interest on savings and temporary cash investments. Dividends and interest from securities . . . . b Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . Income modifications . 2 10a Gross sales less returns and allowances . b Less Cost of goods sold MAY c Gross profit or (loss) (attach schedule) Other income (attach schedule) . . . . . . . 11 1,000,009 12 Total. Add lines 1 through 11 . . . . . . Expenses Expenses 13 Compensation of officers, directors, trustees, etc . . 14 Other employee salaries and wages . . . . . 15 Pension plans, employee benefits . . . . . . 16a Legal fees (attach schedule) Administrative  $||\hat{Q}||$ 17 Interest . . . . . Taxes (attach schedule) (Ree instructions). . . 18 Taxes ((attent schedule) (see russi concepte).

Depracration (attach schedule) and depletion. 19 20 Odcupancy Travel, conferences, and meetings 21 and 22 Printing and publications . . . . . 23 24 25 Other expenses (attach schedule) . . . . . . Total operating and administrative expenses. Add lines 13 through 23. . . . . . . . . . . Contributions, gifts, grants paid . . . . . . 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12 1,000,009 Excess of revenue over expenses and disbursements . . 9. b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-).

JSA For Paperwork Reduction Act Notice, see instructions 4E1410 1 000

Form 990-PF (2014)

Beginning of year

(a) Book Value

(b) Book Value

Attached schedules and amounts in the

amounts only (See instructions)

Balance Sheets description column should be for end-of-year

Accounts receivable

Less allowance for doubtful accounts ▶ Pledges receivable Less allowance for doubtful accounts ▶ \_\_\_\_\_\_ Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . Other notes and loans receivable (attach schedule) Less allowance for doubtful accounts ▶ \_\_\_\_\_\_ 10 a Investments - U.S. 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) 

Investments - other (attach schedule)

Land, buildings, and equipment basis
Less accumulated depreciation Other assets (describe

Total assets (to be completed by all filers - see the 

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule) . . . . .

Other liabilities (describe )

Total liabilities (add lines 17 through 22) . . . . . . . . . . . Foundations that follow SFAS 117, check here ▶ and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, . . . ▶ 🗓 check here and complete lines 27 through 31.

Capital stock, trust principal, or current funds . . . . . . . . .

Paid-in or capital surplus, or land, bldg , and equipment fund . . . . .

Retained earnings, accumulated income, endowment, or other funds . .

Total net assets or fund balances (see instructions). . . . .

Total liabilities and net assets/fund balances (see 

Part II

3

12

13

15 16

17 18

19

20

22

Liabi 21

Balances 24

Fund

5 27

Assets 28

Set 30

29

31

25 26

_	-
47-1867691 Page	. 2
End of year	
k Value (c) Fair Market Value	
	_
000,009. 1,000,00	9.
	—
	_
	—
	—
	—
000,009. 1,000,0	<u>09</u> .
9	
000,009.	
000,009.	
000,009.	

Pέ	art III 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 agree with		
	end-of-year figure reported on prior year's return)	1	
	Enter amount from Part I, line 27a	2	1,000,009
	Other increases not included in line 2 (itemize) ▶	3	
	Add lines 1, 2, and 3	4	1,000,009
	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,000,009

Form **990-PF** (2014)

(a) List ar	s and Losses for Tax on Inv nd describe the kind(s) of property sold ( brick warehouse, or common stock, 200	(e g , real estate,	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr
a			DOTING!		
b					
C					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a					
b			<u> </u>		
<u>C</u>	_		<u> </u>		
d					
0		11	+		
Complete only for assets	s showing gain in column (h) and owne			Gains (Col (h) g	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	(k), but not less Losses (from co	
1	<u> </u>		1		
b					
	<del> </del>	<del> </del>			
d	<del> </del>		<del> </del>		
9			+ -		
Capital gain net income		f gain, also enter in Part I, line 7			
· -	( 11	f (loss), enter -0- in Part I, line 7	2		
	pain or (loss) as defined in sections				
	Part I, line 8, column (c) (see ins		}  _		
	Hada Castian 4040(a) for Da	educed Tax on Net Investment	1 3		
		butable amount of any year in the	base perio	d?	Yes N
		ar, see the instructions before mak	ing any on	trine	
(a)			ing any en	(d)	
Base period years	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution i	
Calendar year (or tax year beginning in) 2013			1	(coi (b) divided b	y cor (c))
2013	<del></del>				
2011	<del>                                     </del>				
2010		<u> </u>			
2009	<del>                                     </del>	<u> </u>			
2000	<u>-l</u>		+		-
Total of line 1 column	(d)	· • • • • • • • • • • • • • • • • • • •	2		
		de the total on line 2 by 5, or by the			<del></del> .
_		ess than 5 years	1 1		
number of years the for	muation has been in existence in le	ess than 5 years	•		
Enter the net value of n	oncharitable-use assets for 2014 f	from Part X, line 5	4		
Multiply line 4 by line 3			. 5		
6 Enter 1% of net investm	nent income (1% of Part I, line 27b)		. 6	<del></del>	
7 Add lines 5 and 6			7		
8 Enter qualifying distribu	itions from Part XII, line 4 greater than line 7, check the box	x in Part VI, line 1b, and complete	. 8 that part	using a 1% ta	ax rate See

47-1867691

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	nstru	ctions	<u></u>
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1			
	Date of Fuling or determination letter (attach copy of letter if necessary - see instructions)			
p,	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0
	here ▶ ☐ and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			
3	Add lines 1 and 2			
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			
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a			
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			_
7	Total credits and payments Add lines 6a through 6d			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			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			0
11	Enter the amount of line 10 to be Credited to 2015 estimated tax   0 Refunded 11			0
	t VII-A Statements Regarding Activities		., 1	
та	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	1a	Yes	No X
L	participate or intervene in any political campaign?	ıa .		
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	1b		Х
	Instructions for the definition)?	10		21
	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			
•	Did the foundation file Form 1120-POL for this year?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
u	(1) On the foundation \$\ \\$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
•	foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	If "Yes," attach a detailed description of the activities		·	
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		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		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			
	By language in the governing instrument, or	1		
	• 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> X</u>	
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	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶  DE.			
b	DE,  If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction Gº If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"			
	complete Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses . ATCH 1	10	Х	
	E.	nm 99	N-PF	(2014

orm	990-PF (2014) CRENNEL FAMILY FOUNDATION 47-1867	691	Р	age 5
Pai	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified		-	
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ►N/A			
14	The books are in care of ► FOUNDATION SOURCE Telephone no ► 800-839-	175	<u>4</u> 	
	Located at ▶501 SILVERSIDE ROAD, SUITE 123 WILMINGTON, DE ZIP+4 ▶ 19809-13	3//_		
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	<u>-</u>	1	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-221) If			
D-	"Yes," enter the name of the foreign country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		V	Na
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	NO
1 8	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 No	1		
	(1) Engage in the sale of exeminings, of reasoning at property with a dequationed person.			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(, , same good, so note, or confidence particular parti			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	the benefit or use of a disqualified person)?			
	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).			
	termination of government service, if terminating within 90 days)	.		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	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			İ
•	were not corrected before the first day of the tax year beginning in 2014?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
-	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
	a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and		ĺ	
	6e, Part XIII) for tax year(s) beginning before 2014?			
	If "Yes," list the years ▶			
1	Are there any years listed in 2a for which the foundation is <b>not</b> 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	1	
	the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b>&gt;</b>			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	İ		
	at any time during the year?			
	b If "Yes," did it have excess business holdings in 2014 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 2014)	3b		

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

Par	t VII-B	Statements Regarding Activities	tor Which Form	4720 May Be Req	uired (continued)		<del></del>				
5a	During th	ne year did the foundation pay or incur any amoi	unt to								
	(1) Carr	y on propaganda, or otherwise attempt to influe	nce legislation (section	n 4945(e))?	. Yes X No	,					
•	(2) Influ	ence the outcome of any specific public ele	ction (see section 4	955), or to carry or	,						
	directly or indirectly, any voter registration drive?										
	(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No										
	(4) Prov	ide a grant to an organization other than a	charitable, etc., org	anization described ii	n						
		on 4945(d)(4)(A)? (see instructions)				,					
		ide for any purpose other than religious, ch									
	purp	oses, or for the prevention of cruelty to children	or animals?		. Yes X No	,					
b	If any a	inswer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the e	xceptions described in	ı					
	Regulation	ons section 53 4945 or in a current notice regar	ding disaster assistan	ce (see instructions)?	· · · · · · · · · · · ·	. 5b	<u> </u>				
	Organiza	ations relying on a current notice regarding disas	ster assistance check I	nere							
С	If the a	nswer is "Yes" to question 5a(4), does the	foundation claim e	xemption from the t	ax						
		it maintained expenditure responsibility for the		•		,					
		attach the statement required by Regulations sec									
6a		foundation, during the year, receive any fun	• ,	ectly to pay premiur	ns	}	1 1				
		sonal benefit contract?	•			,					
b		oundation, during the year, pay premiums, dire				6 b	,   x				
		to 6b, file Form 8870	,,,								
7a		me during the tax year, was the foundation a pa	arty to a prohibited tax	shelter transaction?.	Yes X No	,					
		did the foundation receive any proceeds or have				.   7b	,				
	rt VIII	Information About Officers, Director									
	List all c	and Contractors officers, directors, trustees, foundation n	nanagore and their	componentian (con	instructions)						
<u>'</u> -	LISC BIT C		(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Eyns	ense account,				
		(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other	allowances				
ATC	Н 2	71		C	d a		(				
				······································		_					
						_					
			_			,					
				_		_					
2	Compen	sation of five highest-paid employees	(other than thos	e included on lin	e 1 - see instructi	ons). If	none, ente				
	"NONE."	·	· · · · · ·		(d) Contributions to						
(a)	Name and	address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit	(e) Expe	ense account,				
			devoted to position	(-,	plans and deferred compensation	otner	allowances				
	NONE										
							•				
	<del></del>										
Tota	l number	of other employees paid over \$50,000									
				· _ · _ · _ ·		Form 9	90-PF (2014				
							•				

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3 ' Five highest-paid independent contractors for professional services (see instructions). If none, enter "	NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
ONE	
otal number of others receiving over \$50,000 for professional services	. ▶
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number organizations and other beneficiaries served, conferences convened, research papers produced, etc.	per of Expenses
1 N/A	
2	
	[
•	
3	
4	
<sup>7</sup>	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments See instructions	
3 NONE	
<u> </u>	

Enter 1% of Part I, line 27b (see instructions) Adjusted qualifying distributions. Subtract line 5 from line 4

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

Form 990-PF (2014) Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, Part X see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., 1a 1b 127,501. c Fair market value of all other assets (see instructions) 1c 1d 127,501. Reduction claimed for blockage or other factors reported on lines 1a and Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d . . . . . . . . . . . . 127,501. 3 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 1,913. 5 125,588. Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 1,841. Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ and do not complete this part ) 1 1,841. 2a Tax on investment income for 2014 from Part VI, line 5 . . . . . . . Income tax for 2014 (This does not include the tax from Part VI). \_ 2b 2c 1,841. 3 3 Add lines 3 and 4 1,841. Deduction from distributable amount (see instructions). 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 1,841. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 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

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

Form 990-PF (2014)

0

6

Form	Form 990-PF (2014) Page <b>9</b>								
Pa	rt XIII .Undistributed Income (see instru	ctions)							
1	Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014				
•	· F	,			1,841.				
2	Undistributed income, if any, as of the end of 2014				1,011.				
_	Enter amount for 2013 only								
	Total for prior years 20 12 ,20 11 ,20 10			· · · · · · · · · · · · · · · · · · ·					
3	Excess distributions carryover, if any, to 2014								
	From 2009								
	From 2010								
	From 2011								
	From 2012								
	From 2013								
	Total of lines 3a through e				İ				
	Qualifying distributions for 2014 from Part XII,		<del></del>		<u> </u>				
•	line 4 > \$								
а	Applied to 2013, but not more than line 2a								
ь	Applied to undistributed income of prior years (Election required - see instructions)								
_									
С	Treated as distributions out of corpus (Election required - see instructions)								
ч	Applied to 2014 distributable amount								
	Remaining amount distributed out of corpus								
5	Excess distributions carryover applied to 2014								
	(If an amount appears in column (d), the same								
6	amount must be shown in column (a) ) Enter the net total of each column as	1			,				
Ü	indicated below:								
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5								
	Prior years' undistributed income Subtract								
	line 4b from line 2b								
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)								
	tax has been previously assessed								
d	Subtract line 6c from line 6b Taxable								
	amount - see instructions								
е	Undistributed income for 2013 Subtract line								
	4a from line 2a Taxable amount - see instructions								
	Undistributed income for 2014 Subtract lines								
•	4d and 5 from line 1 This amount must be								
	distributed in 2015				1,841.				
7	Amounts treated as distributions out of corpus								
	to satisfy requirements imposed by section								
	170(b)(1)(F) or 4942(g)(3) (Election may be								
	required - see instructions)				<u></u>				
8	Excess distributions carryover from 2009 not								
	applied on line 5 or line 7 (see instructions)								
9	Excess distributions carryover to 2015.	0		1					
	Subtract lines 7 and 8 from line 6a	0							
10	· · · · · · · · · · · · · · · · · · ·								
а	Excess from 2010								
b									
С									
	Excess from 2013								
e	Excess from 2014		i	I	[				

Рa	rt XIV Private Op	erating Foundations	i (see instructions a	ind Part VII-A, quest	on 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter tha	it it is a private oper	<del>~</del>	
_		ig is effective for 2014, e			▶L	
b	Check box to indicate		is a private operating		section	4942(J)(3) or 4942(J)(5)
2 a	Enter the lesser of the ad-		(1) 0040	Prior 3 years	400044	(e) Total
	justed net income from Part  I or the minimum investment		(b) 2013	(c) 2012	(d) 2011	
	return from Part X for each year listed					
h	85% of line 2a				-	
	Qualifying distributions from Part				<del>                                     </del>	
·	XII, line 4 for each year listed	`				
d	Amounts included in line 2c not used directly for active conduct of exempt activities	1				
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line	1				
3	2d from line 2c  Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter					
	<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under section</li></ul>					
h	4942(j)(3)(B)(i) "Endowment" alternative test-				<u> </u>	
	enter 2/3 of minimum invest-	1				
	ment return shown in Part X,					
С	line 6 for each year listed "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					
	(3) Largest amount of support from an exempt	t				
	organization					
Рa		ntary Information (	Complete this par	rt only if the found	dation had \$5	,000 or more in assets
	at any tim	e during the year -s	ee instructions.)			
1	<del>-</del>	ng Foundation Manage				
а		the foundation who y tax year (but only if th				received by the foundation d)(2))
	ROMEO CRENI		100/			
b		r the foundation who rship or other entity) o				equally large portion of the
	N/A					
2	Information Regardin	ng Contribution, Grant	. Gift. Loan. Scholars	hip. etc Programs:		
	Check here ► X If	the foundation only	makes contributions	to preselected cha	ritable organiza ctions) to individ	tions and does not accept luals or organizations under
	other conditions, com	plete items 2a, b, c, an	d d	·	·	•
а	The name, address, a	and telephone number	or e-mail address of	the person to whom a	oplications should	be addressed
b	The form in which app	olications should be su	bmitted and informat	ion and materials they	should include	
C	Any submission dead	lines	<del></del>			
d	Any restrictions or l	limitations on awards	, such as by geogr	aphical areas, charit	able fields, kind	ds of institutions, or other

	990-PF (2014)	<del></del>			Page 11
Pa	TXV Supplementary Information (	continued)			
3_	Recipient Name and address (home or business)	ng the Year or Appr	oved for F	-uture Payment	
-	Necipient (haras a haras a h	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
	Paid during the year	or substantial contributor	recipient		
а	Paid during the year				
			}		
		1			<b>:</b>
					1
	•				-
					1
	Total			▶ 3a	
b	Approved for future payment		T		
	.,				
		!			1
			1	1	<u> </u>
	Total			<u></u> ▶ 3b	1

Page **12** 

oter gross	A Analysis of Income-Produ amounts unless otherwise indicated		ated business income	Excluded by	y section 512, 513, or 514	(e)
• •	amounts unless otherwise indicated	(a)	(b)	(c)	(d)	Related or exempt function income
Program	service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
а						
f						
	and contracts from government agencies					-
_	ship dues and assessments					
	n savings and temporary cash investments			14	9.	
	s and interest from securities					
	al income or (loss) from real estate					
	• •					
	financed property					·
	lebt-financed property					
	I income or (loss) from personal property			+		
	vestment income					<del> </del>
Gain or (k	oss) from sales of assets other than inventory	·				
Net inco	me or (loss) from special events					
Gross pr	rofit or (loss) from sales of inventory					
Other rev	venue a					
b				_		
d						
	r					
					9	
	Add columns (b), (d), and (e)					
	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e)				13	
Total. Ad	dd line 12, columns (b), (d), and (e)				13	
Total. Ad ee worksh	dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calc	culations)				
Total. Adee worksh	dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calc  Relationship of Activities	culations) s to the Ac	complishment of E	xempt Purp	ooses	S
Total. Acee workshart XVI-	dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calc  B Relationship of Activities  Explain below how each activities	culations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	outed importantly to t
Total. Ad ee worksh art XVI-	dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calc  Relationship of Activities	culations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	buted importantly to t
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Part	XVII	Information R Exempt Orga	legarding Trai nizations	nsfers To and Tr	ransactio	ons and	l Relation:	ships V	Vith Non	chari	table	•
1 [	od the	organization direc	tly or indirectly e	ngage in any of the	following	with any	other orga	nızatıon	described		Yes	No
• 11	n sect			ection 501(c)(3) org								
	-		na foundation to a	a noncharitable exen	not organi	zation of						
					-					1a(1)		х
										1a(2)		Х
		ransactions						<b>.</b>				
(	1) Sal	es of assets to a no	oncharitable exem	pt organization						16(1)		Х
(	<b>2)</b> Pur	chases of assets fr	om a noncharitat	le exempt organization	on					1b(2)		Х
				issets								Х
(-	4) Rei	mbursement arrang	jements							1b(4)		Х
												Х
				p or fundraising solic								Х
				s, other assets, or pa								X
				," complete the foll								
				es given by the rep								
			<del></del>	ement, show in colu								
(a) Line	e no	(b) Amount involved	(c) Name of no	ncharitable exempt organi	ization		ription of transf	ers, transac	tions, and sha	nng am	ingeme	nts
	+	N/A				N/A						
	+		-							-		
			+									
	_		<del> </del>		·		==-:					
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		<del>-</del>	1		_	<u> </u>			•			
d	escrib		) of the Code (oth	lated with, or relate ner than section 501						Y	es X	No
	,	(a) Name of organization		(b) Type of orga	anızatıon	1	- (	c) Descript	ion of relations	hip		
							-	<u> </u>		-		
				, "								
						ŀ						
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۵٠				od this return, including according according to the payer) is based on all informations.				o the best	of my knowledg	e and t	elief, it	is true,
Sign		Tramerial ?	1/MM2X	15-4-20	15	) YK	CSIDEN	T	May the IRS	discus		
Here	Sigh	ature of officer or trustee		Date		Title		<del></del>	(see instruction		7 · · ·	below No
										7: <u>L</u>	J - 2- L	
	·	Print/Type preparer's na	ame	Preparer's signature			Date	Chi	eck if F	PTIN	-	
Paid		JEFFREY D HAS	KELL	JEFFREY D HA	SKELL		04/21/2	1		P013	4577	0
Prepa	ırer	Firm's name FC	OUNDATION SO					Firm's EIN		_		_
												_

11042

Phone no

8008391754 Form **990-PF** (2014)

Use Only Firm's address ► ONE HOLLOW LN, STE 212

LAKE SUCCESS, NY

### Schedule B

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

### **Schedule of Contributors**

OMB No 1545-0047

Name of the organization

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Department of the Treasury Internal Revenue Service

Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

Employer identification number

CRENNEL FAMILY FOUN	IDATION	47-1867691
Organization type (check or	ne)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a priva	te foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private for	oundation
	[]	Junuation
	501(c)(3) taxable private foundation	
General Rule	(7), (8), or (10) organization can check boxes for both the General Rule a	•
_	on filing Form 990, 990-EZ, or 990-PF that received, during the year, co y or property) from any one contributor. Complete Parts I and II. See ins I contributions	_
Special Rules		
regulations under 13, 16a, or 16b, a	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form and that received from any one contributor, during the year, total contrib of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line	n 990 or 990-EZ), Part II, line outions of the greater of (1)
contributor, durin	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ g the year, total contributions of more than \$1,000 exclusively for religional purposes, or the prevention of cruelty to children or animals. Comp	us, charitable, scientific,
contributor, during contributions total during the year for General Rule app	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ g the year, contributions <i>exclusively</i> for religious, charitable, etc., purpos led more than \$1,000. If this box is checked, enter here the total contribor an <i>exclusively</i> religious, charitable, etc., purpose. Do not complete any olies to this organization because it received <i>nonexclusively</i> religious, chair more during the year.	ses, but no such putions that were received y of the parts unless the ritable, etc., contributions
Caution. An organization th 990-EZ, or 990-PF), but it m	at is not covered by the General Rule and/or the Special Rules does not nust answer "No" on Part IV, line 2, of its Form 990, or check the box or , to certify that it does not meet the filing requirements of Schedule B (Fo	t file Schedule B (Form 990, n line H of its Form 990-EZ or on its

Name of organization CRENNEL FAMILY FOUNDATION

Employer identification number 47-1867691

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 _	CRENNEL, ROMEO  3350 MCCUE ROAD, UNIT 2402  HOUSTON, TX 77056	\$1,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$ 	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$ \$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$ 	Person Payroll Noncash (Complete Part II for noncash contributions)		
(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)		

Employer identification number

47-1867691

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	
		\$		

Name of organization CRENNEL FAMILY FOUNDATION

Employer identification number

47-1867691

•	that total more than \$1,000 for the y following line entry. For organizations contributions of \$1,000 or less for the Use duplicate copies of Part III if additional and the second seco	completing Part III, e year (Enter this inf	enter the total of efformation once. Se	xclusively religious, charitable, etc,		
(a) No from	(b) Purpose of gift	(c) Use		(d) Description of how gift is held		
Part I	(b) i dipose oi giit	(0) 030	J. 9	(d) Bescription of non-girls held		
	(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			
				<del>-</del>		
(a) No. from	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
Part I	( )					
		(a) Tanas				
		(e) Transf	er or gift			
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee		
(a) No from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	(e) Transfer of gift					
		. 1 71D 4	D. L. C.			
	Transferee's name, address, at	10 ZIP + 4	Kelatio	nship of transferor to transferee		
				<b>_</b>		
(a) No.						
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
	(e) Transfer of gift					
	Transferee's name, address, a	na ∠IP + 4	Relatio	nship of transferor to transferee		
	1					

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10)

## PART VII-A, LINE 10 - NEW SUBSTANTIAL CONTRIBUTORS FORM 990PF,

### NAME AND ADDRESS

CRENNEL, ROMEO 3350 MCCUE ROAD, UNIT 2402 HOUSTON, TX 77056 CRENNEL, ROSEMARY 3350 MCCUE ROAD, UNIT 2402 HOUSTON, TX 77056

ATTACHMENT

ATTACHMENT 1

# FORM 990PE, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER

WEEK DEVOTED TO POSITION

PRES / DIR / SEC / TREAS IDE RD 1.00

ROMEO CRENNEL FOUNDATION SOURCE 501 SILVERSIDE RD

WILMINGTON, DE 19809-1377

ATTACHMENT 2

47-1867691