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Form **990-PF** 

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

Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. OMB No 1545-0052

Depar	tment	of the Treasury		► Informate	Do not enter:	social se m con-Pi	curity numb	ers on '	this form as	it may be may it may be may it may be may be may it may be may it is at a second and it	ade public. <i>rs.gov/form990pf.</i>		2017	<b>.</b>
_		enue Service dar year 2014			FEB			alato i	, and e			15	Open to Public Inspe	ection
		foundation							, , _ , _ ,	<u></u>	A Employer identific		number	
		TT CROW									47-31692			
		N MURR			elivered to street	address)				Room/suite	864-617-		10	
		wn, state or pr ERSON,		untry, and ZI	P or foreign p	ostal cod	le				C If exemption application	on is pe	nding, check here	
		all that apply		Initial retur			Initial return	of a fo	rmer public (	charity	D 1. Foreign organiz	ations,	check here	
				Final return Address ch		$\vdash$	Amended re Name chance				Foreign organization     check here and attention	ons mee	eting the 85% test,	
H C	٠.	type of organiz		X Section	n 501(c) <u>(3) e</u> :	kempt pri	vate foundat	ion			E If private foundation	n stati	us was terminated	
<u> </u>		ction 4947(a)(1					kable private				under section 507		•	
		rket value of all		end of year	J Account	-		Cash	Acci	ruai	F If the foundation is			<u>'</u>
(11) •		Part II, col. (c),		1.791.	(Part I, colu	ther (spec <i>imn (d</i> ) <i>n</i>		cash b	asis )		under section 507	(0)(1)(	B), Check here	ш
	rt I	Analysis of R (The total of am necessarily equ	evenue ar	nd Expenses		(a)	Revenue and enses per bo	d	(b) Net in	ivestment ome	(c) Adjusted net	t	(d) Disbursement for chantable purpos (cash basis only)	ses
	1	Contributions,					5,1			·			(Cash basis only)	
		Check ► X	-				-,,-		•••••				······	*********
	3	Interest on saving	gs and temp	orary							1 1111111111111111111111111111111111111		***************************************	
	4	Dividends and			S									
	5a	Gross rents								,,,,				
	b	Net rental income	e or (loss)		- <del></del> -				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***********	<del>}</del>			
ą		Net gain or (loss) Gross sales price		assets not on	line 10	ļ								
Revenue	U	assets on line 6a								0.			<del>,</del>	<del></del>
Re		Capital gain net i								<u> </u>				
	8 9	Net short-term Income modifi	. •	1111									+	<del>,</del>
	40-	Grane solon loop		RECE	IVED	<del>                                     </del>			·····	······································			·····	
	h	Less Cost of do	nds sold							· +				
	C	Gross profit o	((68))	MOUA		S								
	11	Other income	¥	NOV 2	<b>⊉</b> 2015	R\$-0	71,9			0,			STATEMENT	1
	12	Total. Add lin				<u> </u>	77,0			0.				<del></del>
	13	Compensation of			Ne to UT			0.		0 .	•	0.		0.
	14	Other employe		-							<del>-  </del>			
es		Pension plans Legal fees	, еттргоуеє	e denents										
ens		Accounting fe	96											
Ň		Other professi												
Ş.		Interest												
Irati	18	Taxes							·					
nist	19	Depreciation a	ınd depleti	on							1			
Ë	20	Occupancy												
ΨÞ	21	Travel, confer		-		<b></b>	<del></del>						<del> </del>	
) an	22	Printing and p			rmr 2	-	61,0	10		0 .	61,0	10		0.
Operating and Administrative Expenses	23 24	Other expense Total operation			rtii Z		01,0	17.		<u> </u>	01,0	1 J •	<u> </u>	<u> </u>
era	~4	expenses. Ad	_				61,0	19.		0	61,0	19.		0.
Ö	25	Contributions		-			11,2	63.			1		11,2	63.
		Total expense												
_		Add lines 24 a					72,2	82.		0	61,0	19.	11,2	63.
	27	Subtract line 2	26 from lin	e 12									·	
	l .	Excess of reven	-			ļ	4,7	91.		·····		····	. '!!'	
	t	Net investme				ļ				0		4.0		
4006		Adjusted net	income (if	negative, enter	-0-)						10,9	4U.	<u> </u>	

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

	(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 )						uired yr)	(d) Date sold (mo , day, yr )
<u>1a</u>		·		<del> </del>				
	NE	··········		-				
d d		~~						
e	<del>-</del>			+				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or o				(h) Gain (e) plus (f)		
a								
<u>b</u>								
d			<del></del>					
Complete only for assets showl	ng gain in column (h) and owned by	the foundation on 1	2/31/69	1		(I) Gains (Col	/h\ aaın	minue
Complete only for assets shown	(i) Adjusted basis	(k) Excess			(	ol (k), but not	less than	1 <b>-</b> 0-) or
(I) F M V as of 12/31/69	as of 12/31/69	over col (				Losses (fro	om col (	h))
a		-						
b								• • .
C								
d								•
е								
2 Capital gain net income or (net c	apital loss) { If gain, also ent	er in Part I, line 7 0- in Part I, line 7		}	2			
3 Net short-term capital gain or (id	oss) as defined in sections 1222(5)							
If gain, also enter in Part I, line 8				1				
If (loss), enter -0- in Part I, line 8	3	D. C. J.T.			3			
<u> </u>	Under Section 4940(e) fo					ncome		N/A
(For optional use by domestic priva	te foundations subject to the section	1 4940(a) tax on net i	nvestment i	income	3)			N/A
If section 4940(d)(2) applies, leave	this part blank							
Mee the foundation liable for the co	ction 4942 tax on the distributable a	mount of any year in	the bace no	ariod?				Yes No
	alify under section 4940(e) Do not		the base pe	ciiou.				103110
1 Enter the appropriate amount in	each column for each year, see the	instructions before	making any	entries				
(a)	(b)			(c)			Dietrit	(d) oution ratio
Base periód years Calendar year (or tax year beginr	Advicted qualifying d	istributions No	et value of n		ritable-use assi	ets (co	ol (b) div	vided by col (c))
2013								
2012								
2011								
2010								<u>.                                    </u>
2009								
2 Total of line 1, column (d)						2		
_	e 5-year base period - divide the tota	ii on line 2 by 5, or b	y the numbe	er ot ye	ars	3		
the foundation has been in exist	tence ir iess than 5 years					3		
4 Enter the net value of noncharit	able-use assets for 2014 from Part 1	(, line 5				4		
5 Multiply line 4 by line 3						5		
	nmo (49/, of Doct L line 07h)					6		· <del></del>
6 Enter 1% of net investment inco	ome (1% of Part I, line 270)					6		<del> </del>
7 Add lines 5 and 6						7	_	
8 Enter qualifying distributions from	om Part XII, line 4					8		
If line 8 is equal to or greater th See the Part VI instructions	an line 7, check the box in Part VI, li	ne 1b, and complete	that part us	ıng a 1	% tax rate			

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Pa	rt VI Excise Tax Based on Investment Income (Section 4940	(a), 4940(b), 4940(e),	or 49	48 - se	e instru		
1a	Exempt operating foundations described in section 4940(d)(2), check here  and en	ter "N/A" on line 1					
	Date of ruling or determination letter (attach copy of letter if nece	ssary-see instructions)		- 1			
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%		1	··. ,		0.
	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) 丿					_
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Other	ners enter -0-)	<u> </u>	2			0.
_	Add lines 1 and 2		  -	3			0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Otl	hers enter -0-)	<u> </u>	4			0.
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		ļ	5			0.
	Credits/Payments	1					
	2014 estimated tax payments and 2013 overpayment credited to 2014	_ <u>6a</u>					
	Exempt foreign organizations - tax withheld at source	6b					
	Tax paid with application for extension of time to file (Form 8868)	6c					
	Backup withholding erroneously withheld	6d		_			^
	Total credits and payments Add lines 6a through 6d		-	7			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attac	hed	_	8			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		- ▶	9			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	la	. 🏲 📙	10	~		
	enter the amount of line 10 to be Credited to 2015 estimated tax ►  rt VII-A Statements Regarding Activities	Refunde	ed 🚩 📗	11			
		ation or did it no disposts or in				Yes	No
14	During the tax year, did the foundation attempt to influence any national, state, or local legisla any political campaign?	ation of old it participate of ini	ervene ii	ı	10	163	X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposi	se (eas instructions for the do	finition\2	<b>,</b>	1 <u>a</u>		X
U	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	•	•		10		
	distributed by the foundation in connection with the activities.	copies of any materials po	JUIISHEC	<i>J</i> 0 <i>1</i>			
r	Did the foundation file Form 1120-POL for this year?				10		X
	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the	vear					
•	(1) On the foundation > \$ 0 • (2) On foundation managers	=	0.				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expendit						
	managers ▶\$ 0.		•				
2	Has the foundation engaged in any activities that have not previously been reported to the IR	S?			2		X
	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 in	strument, articles of incorpor	ation, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	•			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	?			4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?			N/A	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 eit	her					
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory	directions that conflict with t	ne state I	aw			
	remain in the governing instrument?				6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," com	plete Part II, col. (c), and F	Part XV		7	X	
88	Enter the states to which the foundation reports or with which it is registered (see instruction	ns) ►			_		
	SC				_		
t	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	torney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation				86	Х	ļ
9	Is the foundation claiming status as a private operating foundation within the meaning of sec		for calen	dar			
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," co	omplete Part XIV			9		X
40	Did any parence become substantial contributors during the tay year?				10		

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Pa	irt 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			х
19	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	<u> </u>	Α_
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		х
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 ► TIM CROWE  Telephone no ►864-6	17-4	510	
	Located at ► 614 N MURRAY AVE, ANDERSON, SC ZIP+4 ►2	9625		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	N1	<b>√</b> 2	•
	and enter the amount of tax-exempt interest received or accrued during the year	<u>N</u>	/A	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,	1	Yes	1
	securities, or other financial account in a foreign country?	16	L	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If "Yes," enter the name of the			
p.	foreign country ►  art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			<u>1</u>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1:	During the year did the foundation (either directly or indirectly)	ļ		110
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(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?  X Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	İ		
	(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"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days )			
1	o If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations	ļ		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		X
	Organizations relying on a current notice regarding disaster assistance check here			
1	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 2014?	16	ļ	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 6e, Part XIII) for tax year(s) beginning			
	before 2014?  Yes X No			
	If "Yes," list the years			
	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 )  N/A	26	Ì	1
	this provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	• The provisions of Society 4042(a)(2) and boing approve to any of the years noted in 2a, not the years noted			
3	a 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 2014 as a result of (1) any purchase by the foundation or disqualified persons after	l		
	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	ļ	
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ļ	X
	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 leopardy before the first day of the tax year beginning in 2014?	4h	i	X

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Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be I	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	es X No	
(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indir	ectly,		
any voter registration drive?		Ye	es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes:	?	Ye	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
4945(d)(4)(A)? (see instructions)		Ye	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or			
the prevention of cruelty to children or animals?	, , , , , , , , , , , , , , , , , , ,		es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	fer the exceptions described			
section 53 4945 or in a current notice regarding disaster assistance (see instru			N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	•		<b>▶</b>	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ined		
expenditure responsibility for the grant?		√A	es 🔲 No	
If "Yes," attach the statement required by Regulations section 53.4945		'/ ''	15 NU	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to			]	
a personal benefit contract?	pay premiums on		s X No	
	araanal bana64440	Y6		e
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal denetit contract?		ļ <del></del>	6b X
If "Yes" to 6b, file Form 8870.		<u></u>		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y6	es X No	
b if "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Trusto Paid Employees, and Contractors		inagers, Highly	<b>y</b>	
1 List all officers, directors, trustees, foundation managers and their				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
TIM CROWE	OFFICER			
614 N MURRAY AVE				
ANDERSON, SC 29625	0.00	0.	0.	0.
AARON CROWE	OFFICER			
108 SEA PALMS				
ANDERSON, SC 29621	0.00	0.	0.	0.
		****		
			i	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."	<u> </u>	L
	(b) Title, and average		(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	(e) Expense account, other allowances
NONE	devoted to position		compensation	allowalices
110113				
		1		
		-	<del></del>	<del> </del>
			1	
	<u> </u>		<u> </u>	L
Total number of other employees paid over \$50,000			<b>•</b>	0

3 Five highest-paid independent contractors for professional services. If none, en	ter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(2, 1) po di contrat	(-, -, -, -, -, -, -, -, -, -, -, -, -, -
T. I.		▶ 0
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities		
	tinting) information and ha	<del></del>
List the foundation's four largest direct charitable activities during the tax year. Include relevant stanumber of organizations and other beneficiaries served, conferences convened, research papers pi	roduced, etc	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		<del></del>
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2	Amount
1 N/A		
2		
All other program-related investments. See instructions		
3		
Table Addition 1 through 2	<b>&gt;</b>	0.
Total, Add lines 1 through 3		V •

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Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes a Average monthly fair market value of securities 1a 15,025. 1b b Average of monthly cash balances c Fair market value of all other assets 1c 15,025. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 15,025 3 3 Subtract line 2 from line 1d 225 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 4 14,800. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 393. Minimum investment return, Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD Part XI Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundations and certain foreign organizations check here > [ and do not complete this part ) 393. Minimum investment return from Part X, line 6 2a 2a Tax on investment income for 2014 from Part VI, line 5 b Income tax for 2014 (This does not include the tax from Part VI) 2с c Add lines 2a and 2b 3 3 Distributable amount before adjustments. Subtract line 2c from line 1 4 Recoveries of amounts treated as qualifying distributions 393. 5 Add lines 3 and 4 0. 6 Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 393. 7 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 11,263. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 3 Amounts set aside for specific charitable projects that satisfy the 3a a Suitability test (prior IRS approval required) 3ь Cash distribution test (attach the required schedule) 11,263. 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 5 income Enter 1% of Part I, line 27b 6 Adjusted qualifying distributions. Subtract line 5 from line 4 6 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

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4940(e) reduction of tax in those years

## Part XIII Undistributed Income (see instructions)

	Corpus	Years prior to 2013	2013	(0) 2014
Distributable amount for 2014 from Part XI,     line 7				393.
2 Undistributed income, If any, as of the end of 2014				
a Enter amount for 2013 only			0.	
b Total for prior years				
3 Excess distributions carryover, if any, to 2014	*****************************	0.		<del></del>
a From 2009				
b From 2010				
c From 2011				
d From 2012				
8 From 2013				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2014 from				
Part XII, line 4 ▶\$11,263.	***			
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior			· · · · · · · · · · · · · · · · · · ·	1111
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		117	***************************************	· 1·1 · · · · · · · · · · · · · · · · ·
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount	A	**	-1.554	393.
e Remaining amount distributed out of corpus	10,870.		······································	
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a) )	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	10,870.			
b 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) tax has been previously assessed		0.	***************************************	
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2013 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2014 Subtract				
lines 4d and 5 from line 1. This amount must		•		
be distributed in 2015		4-11-1-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	į			
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· · · · · · · · · · · · · · · · · · ·	·
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	0.	·	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	10,870.	<del>- 11, ни</del>	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	<del>, , , , , , , , , , , , , , , , , , , </del>
O Analysis of line 9				
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013				
e Excess from 2014 10,870.				
23581 1-24-14				Form <b>990-PF</b> (2014)

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation status of recipient Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) or substantial contributor a Paid during the year THE OUTDOOR DREAM FOUNDATION N/A PC TO SUPPORT OUTDOOR PO BOX 802 DREAM FOUNDATION IN ANDERSON, SC 29622 ITS MISSION TO GRANT OUTDOOR AVENTURES TO CHILDREN WHO HAVE BEEN 11,263. 11,263. Total b Approved for future payment NONE Total 0.

## Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated	Unrelated b	usiness income		ed by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue a	code		and e		
	-	***			
	1 1		<del></del>		
d	1				
e		<del></del>			
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					10,940.
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a	_				
b					
c	_				
d					
e	_				<del></del>
12 Subtotal Add columns (b), (d), and (e)			0.	0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	10,940.
(See worksheet in line 13 instructions to verify calculations.)					

	the foundation's exempt purposes (other than by providing funds for such purposes)																
9	THE BE	RETT	CROWE	MEN	ORIAL	GOLF	TOU	RNA	1ENT	IS	THE	ONI	ΙΥ	EVENT	ORG	ANIZ	ZED
	AND CA	ARRIE	D OUT	BY	THIS	ORGAN	IZAT:	ION	FOR	WHI	CH	ALL	PRO	OCEEDS	GO	TO	Α
	SOLE	CHARI	TY -	THE	OUTDO	OR DR	EAMS	FOU	JNDAT	TION	•						
										•							
																_	
		•															

Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of

423621 11-24-14

	F (2014) BRETT	CROWE MEMORI	AL	47-3	169256	Pac	je 13
Part XV	Information Research	egarding Transfers T	o and Transactions a	nd Relationships With None	charitable	1	
Did th			owing with any other organization	described in section 501(c) of	<u> </u>	Yes	No
			on 527, relating to political organi			•••	
		lation to a noncharitable exemp				1	
(1) C		·	•		1a(1)	1	X
(2) 0	ther assets				1a(2)		Х
b Other	transactions						
(1) S	ales of assets to a noncharita	able exempt organization			1b(1)		Х
(2) P	urchases of assets from a no	oncharitable exempt organization	on		1b(2)		Х
٠,	ental of facilities, equipment,				1b(3)		X
	eimbursement arrangements	5			1b(4)		X
	oans or loan guarantees				1b(5)		X
		embership or fundraising solic			1b(6)		X
		ailing lists, other assets, or paid			10		X
				ays show the fair market value of the goo in any transaction or sharing arrangemo		ets,	
		, other assets, or services recei		on any transaction of snaring arrangeme	ent, snow in		
) Line no	(b) Amount involved		itable exempt organization	(d) Description of transfers, transactions	and shanna arr	engemen	te
	<u>, , , , , , , , , , , , , , , , , , , </u>	N/		(2) Description of delibrations	, and sharing an	ungemen	-
			<del></del>				
			· · · · · · · · · · · · · · · · · ·				
			. =				
			***				
			=	<u> </u>			
		<u> </u>					
					· · · · · · · · · · · · · · · · · · ·		
	foundation directly or indirec	othy affiliated with or related to	, one or more tax-exempt organiz	ations described			
a is the	Touridation directly or money			ations described	Yes	X	No
	tion 501(c) of the Code (oth)						110
ın sec	tion 501(c) of the Code (others, complete the following sci		. 555(1511 527				
ın sec	tion 501(c) of the Code (others, "complete the following sci (a) Name of or	hedule	(b) Type of organization	(c) Description of rela	-		
ın sec	s," complete the following sci	hedule		(c) Description of rela	-		
ın sec	s," complete the following sch (a) Name of or	hedule		(c) Description of rela	-		
ın sec	s," complete the following sch (a) Name of or	hedule		(c) Description of rela	-		
ın sec	s," complete the following sch (a) Name of or	hedule		(c) Description of rela	-		
in sec	s," complete the following scl (a) Name of or N/A	nedule 'ganization	(b) Type of organization		-		_
in sec	s," complete the following sci (a) Name of or N/A	nedule ganization  e that I have examined this return, in	(b) Type of organization	statements, and to the best of my knowledge	tionship  May the IRS d	iscuss tr	าเร
in sec b If "Yes	s," complete the following sci (a) Name of or N/A	nedule ganization  e that I have examined this return, in	(b) Type of organization	statements, and to the best of my knowledge ation of which preparer has any knowledge	May the IRS d return with the shown below	prepare	r
in sec b If "Yes	(a) Name of or N/A	e that I have examined this return, in	(b) Type of organization  cluding accompanying schedules and ser than taxpayer) is based on all information.	statements, and to the best of my knowledge ation of which preparer has any knowledge OFFICER	May the IRS d	prepare	)?
in sec b If "Yes	(a) Name of or N/A  Inder penalties of penury, I declared belief, it is true, correct, and constitute of officer or truste	the dule  rganization  e that I have examined this return, in propriete Declaration of preparer (oth	(b) Type of organization  cluding accompanying schedules and ser than taxpayer) is based on all information.  Date	statements, and to the best of my knowledge atton of which preparer has any knowledge  OFFICER Title	May the IRS d return with the shown below X Yes	prepare	)?
in sec b If "Yes	(a) Name of or N/A	the dule  rganization  e that I have examined this return, in propriete Declaration of preparer (oth	(b) Type of organization  cluding accompanying schedules and ser than taxpayer) is based on all information.	otatements, and to the best of my knowledge atton of which preparer has any knowledge  OFFICER  Title  Date  Check  If P	May the IRS d return with the shown below	prepare	)?
in sec	(a) Name of or N/A  Inder penalties of penury, I declared belief, it is true, correct, and constitute of officer or truste	the dule  ganization  be that I have examined this return, in complete Declaration of preparer (oth	(b) Type of organization  cluding accompanying schedules and ser than taxpayer) is based on all information.  Date  or's signature	otatements, and to the best of my knowledge ation of which preparer has any knowledge  OFFICER  Title  Date  Check  If Poself-employed	May the IRS d return with the shown below X Yes	prepare (see insti	r

Phone no 864-226-0306

Use Only

Firm's address ► 107 EDGEBROOK DRIVE

ANDERSON, SC 29621

FORM 990-PF	OTHER	INCOME	8	STATEMENT 1
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS	-	71,959.	0.	71,959.
TOTAL TO FORM 990-PF, PART I,	, LINE 11 =	71,959.	0.	71,959.
FORM 990-PF	OTHER	EXPENSES		STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
DIRECT EXPENSES RELATED TO GOLF TOURNAMENT	61,019	). 0	. 61,019	. 0.
TO FORM 990-PF, PG 1, LN 23	61,019	9. 0	. 61,019	. 0.

BRETT CROWE MEMORIAL	47-3169256
Part XV Supplementary Information	
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution	
NAME OF RECIPIENT - THE OUTDOOR DREAM FOUNDATION	
TO SUPPORT OUTDOOR DREAM FOUNDATION IN ITS MISSION TO GRANT	OUTDOOR
AVENTURES TO CHILDREN WHO HAVE BEEN DIAGNOSED WITH TERMINAL	OR
LIFE-THREATING ILLNESSES.	
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	· <del>-</del>
423655 05-01-14	