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Form 990-PF

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

OMB No 1545-0052

2014

Department of the Treasury Internal Kevenue Service

▶ 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. Open to Public Inspection , 2014, and ending SEPTEMBER 30, 20 15 For calendar year 2014 or tax year beginning OCTOBER 01 A Employer identification number Name of foundation CRAWFORD FOUNDATION 72-6027718 Number and street (or P.O. box number if mail is not delivered to street address) B Telephone number (see instructions) Room/suite 3639 CLAYCUT RD (225) 571-7860 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, LA 70806 check here G Check all that apply 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% Address change Name change test, check here and attach computation E If private foundation status was Check type of organization Section 501(c)(3) exempt private foundation terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt chantable trust Other taxable private foundation I Fair market value of all assets at end of Accounting method X Cash Accrual If the foundation is in a 60-month year (from Part II, col (c), line 16) Other (specify) termination under section 613, 856 (Part I, column (d) must be on cash basis.) ▶ \$ 507(b)(1)(B), check here Part | Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), for charitable expenses per (c), and (d) may not necessarily equal the income ıncome purposes (cash basis only) amounts in column (a) (see instructions)) books **SCANNED OCT 2 5 2016** 12,918 12,919 12,919 Interest on savings and temp. cash investments Dividends and interest from securities 4 Gross rents b Net rental income or (loss) ~ (A/40) 6a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for Capital gain net income (from Part IV, line 2) . O Ă 444 11. Net short-term capital gain 0 Income modifications ... 10a Gross sales less returns & allowances
b Less Cost of
goods sold · · · · 1/2/10 ,~ş*/ ° ž. c Gross profit or (loss) (attach schedule) Other income (attach schedule) 12,918 12,919 12,919 Total. Add lines 1 through 11 12 Compensation of officers, directors, trustees, etc 6,821 23,760 6,821 Other employee salaries and wages . **Operating and Administrative Expenses** Pension plans, employee benefits · · · 150 43 43 16a Legal fees (attach schedule) . . . #1. 387 387 1,347 **b** Accounting fees (attach schedule) #2. per professional fees (attach schedule) Taxes (attach schedule) (se matruction # う Depreciation (attach sch.) and depletion $3,\overline{971}$ $3,\overline{971}$ 13,832 18 B 20 4,548 1,306 1,306 Travel Conterences and meetings rinting and publications 23 Other expenses (attach schedule) #4 1,696 486 486 24 Total operating and administrative 45,338 13,015 13,015 expenses. Add lines 13 through 23 Contributions, gifts, grants paid. 16,060 16,060 Total exp. & disbursements. 61,398 13,015 13,015 16,060 Add lines 24 and 25' Subtract line 26 from line 12 a Excess of revenue over expenses -48,480and disbursements b Net investment income (if neg, enter -0-) c Adjusted net income (if neg , enter -0-)

For Paperwork Reduction Act Notice, see instructions. BWF 990

14 990PF1

Form **990-PF** (2014)

726027718 Part II . Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See inst.) Beginning of year End of year (a) Book Value (b) Book Value (c) Fair Market Value Cash -- non-interest-bearing 127 1. 617,039 613,729613,729 Savings and temporary cash investments Accounts receivable ▶ Less allowance for doubtful accts Pledges receivable ▶ Less allowance for doubtful accts. > 5 Grants receivable . 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 Inventories for sale or use Prepaid expenses and deferred charges . 10a Investments -- U.S. and state govt. obligations (attach schedule) **b** Investments -- corporate stock (attach schedule) 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) 14 Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) 15 Other assets (describe Total assets (to be completed by all filers -- see the 617,172 613,856 instructions Also, see page 1, item l) 613,856 2,118 17 Accounts payable and accrued expenses ... 4,661 18 Grants payable . . . Liabilities 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe 2,118 4,66 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. Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Fund Foundations that do not follow SFAS 117, check here ▶ 🔀 þ and complete lines 27 through 31. Assets 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds . . . 615,054 609,195 š 30 615,054 609,195 Total net assets or fund balances (see instructions) 617,172 613,856 Total liabilities and net assets/fund balances (see instructions) Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year -- Part II, column (a), line 30 (must agree with 1 615,054 Enter amount from Part I, line 27a -2 -48,480 3 Other increases not included in line 2 (itemize) 3 566,574 4 4 Decreases not included in line 2 (itemize) ▶ 5

6

6

566,574

, , ,	the kind(s) of property sold (e.g., re louse, or common stock, 200 shs. M	•	(b) How acquired P Purchase	• •	acquired lay, yr.)	(d) Date sold (mo., day, yr.)
1a	0000, 01 001111011 010011, 200 0110111	.20 00.,	D Donation	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	y , y,	(1101, 04),)
b					<u></u>	
c				-		
d						
е						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis opense of sale			or (loss)) minus (g)
<u>a</u>		ļ	- · -····			
<u>b</u>	 					
d d		 				-
- <u></u> -	 -	-				
	L owing gain in column (h) and owned	t by the foundation	on on 12/31/60	(1) ((I-X
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exc	cess of col (i)		k), but not l	(h) gain minus less than -0-) or om col. (h))
a	45 51 12/51/55		ooi. (j), ii uiiy			(,/
b						
c	 					
d			· · · · · · · · · · · · · · · · · · ·		_	
e						
2 Capital gain net income or (i		also enter in Part , enter -0- in Pai		2		
3 Net short-term capital gain of	or (loss) as defined in sections 1222(,			
If any polon cotor in Don't Lie	0	t (\	-			
n gain, also enter in Part I, III	ne 8, column (c) (see instructions) If	i (ioss),				
enter -0- in Part I, line 8	ne 8, column (c) (see instructions) it	· · · · · · · · · · · · · · · · · · ·	🖈	3		(
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enter -0- in Part I, line 8 Part V Qualification For optional use by domestic pr f section 4940(d)(2) applies, lead Was the foundation liable for the	Under Section 4940(e) for twate foundations subject to the section	Reduced Ta tion 4940(a) tax of e amount of any	on net investment inco	nent Inc	ome	Yes 🛛 No
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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 inst.)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			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 Part I, line 12, col (b).				
2	· · · · · · · · · · · · · · · · · · ·	2			0
3	<u> </u>	3			
4	the state of the s	4			0
5		5			0
6	Credits/Payments	\.\.			į
a b	2014 estimated tax payments and 2013 overpayment credited to 2014	÷ , , , ,	,	*	
c	To and the set of the	٠. ا			
d	Backup withholding erroneously withheld	*	, <u>(</u> ,		ě,
7		7	مند د.		~
8		8			
9		9			
10		10			
11	_ '.'	11			
Pai	t VII-A Statements Regarding Activities				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate	e or	1 m	Yes	No
	intervene in any political campaign?		. 1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for				
	definition)?		. 1b	<u> </u>	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publishe	d		3	7
	or distributed by the foundation in connection with the activities		1.1		x
С	Did the foundation file Form 1120-POL for this year?		· 1c	2000000	1
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		<u>,</u>	7.00	"
	(1) On the foundation		0		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers.		1.79		'
2	on foundation managers \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		2		- x 1
_	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		x ¹
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	1	×
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/.A 4b	1	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		. 5		×
	If "Yes," attach the statement required by General Instruction T.		5	/ ' '	
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		×
7	Did the foundation have at least \$5,000 in assets at any time during the yr.? If "Yes," complete Part II, col (c), & Part	t XV	7	X	ļ
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
L	► LA If the appropriatives to line 7, has the foundation furnished a copy of Form CCC. DE to the Atternory Consequence.		-		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or		OF	. 。	-
9	designate) of each state as required by General Instruction G? If "No," attach explanation		8Ь	X	
3	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," comp	nlete			ļ - ^j
	Part XIV Part XIV	hiere	9		x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names		· -	+	
	and addresses		10		x

Par	t VII-A Statements Regarding Activities (continued)			-3
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person			
	had advisory privileges? If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			<u> </u>
14	The books are in care of ▶ SEE ATTACHMENT #5 Telephone no. ▶			
	Located at ▶ ZIP+4 ▶			
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 2014, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	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 90-22.1). If "yes," enter		l	
	the name of the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	v	Yes	No
1a	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?			1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	, Q'40	3	[
	a disqualified person?	<i>*</i> ,		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No		. ** <u>*</u>	7.3
	(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)?	,	,	1.3
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		14	
	if the foundation agreed to make a grant to or to employ the official for a period	A	* * ;; '	
	after termination of government service, if terminating within 90 days.)	*	*9%	70.4
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in	> ,		1
	Regulations 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 ▶ ☐	*	٠,	1
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	٠ ،		
	that 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	, ć ,	,4	,
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		,*}	1
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d	;		۲, ۰
	and 6e, Part XIII) for tax year(s) beginning before 2014?	ŵ₩.	,	ļi
	If "Yes," list the years · · · · ▶ 20 <u>13</u> , 20 <u>12</u> , 20 <u>11</u> , 20	1	٠ ا	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	wig.i.,	١٠,	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement see instructions.)	2b	X	<u> </u>
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20 <u> </u>	, to 2		:
3а	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	17.		
	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	<u> </u>	X
4a	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 chantable]
	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		X
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Par	t VI	-B Statements Regarding Act	tivities for Which	Form 4720 May B	e Required (continu	ed)		
5a		ing the year did the foundation pay or incur				_		ر,	10. 11
	(1)	Carry on propaganda, or otherwise attempt	t to influence legislatio	on (section 4945(e))?	· UYes	<u> </u>	No i	1 *-	!
	(2)	Influence the outcome of any specific publ	ic election (see section	n 4955), or to carry	_	_			
		on, directly or indirectly, any voter registrat			Ц		No 📑		
	(3)	Provide a grant to an individual for travel,	study, or other similar p	purposes?	· · · · · · · · L Yes	<u> </u>	No '	, "	
	(4)	Provide a grant to an organization other th	an a chantable, etc., o	rganization described	_	_		,	,
		in section 4945(d)(4)(A)? (see instructions)			[_] Yes		No ^	1*	
	(5)	Provide for any purpose other than religiou	ıs, charitable, scientific	, literary, or	_	_			
		educational purposes, or for the prevention	n of cruelty to children	or animals?	· · · · · [Yes	X I	No		
þ	If ar	ny answer is "Yes" to 5a(1)-(5), did any of t	he transactions fail to o	qualify under the exception	ns described in		~ <u>~</u>		<u>.</u> .
		julations section 53.4945 or in a current notic				-	<u>A</u> . 5	b	<u> </u>
	Org	anizations relying on a current notice regard	ling disaster assistance	e check here		▶	∐ ·	`	
С	If th	e answer is "Yes" to question 5a(4), does th	e foundation claim exe	•		_	. 9"	i by	, ,
	bec	ause it maintained expenditure responsibility	for the grant?	•	· N / A. 🗌 Yes	· 📙	No 📑	/ · ` * · · ` ·	
	If "Y	es," attach the statement required by Regul	ations section 53 4945	-5(d)			1	* *	
6a	Did	the foundation, during the year, receive any	funds, directly or indir	rectly, to pay premiums		_			
		a personal benefit contract?		•••	· · · · · · · · · · · · Yes		No 🖺		
b	Did	the foundation, during the year, pay premiu	ms, directly or indirect	ly, on a personal benefit o	contract?		6	ь	X
		es" to 6b, file Form 8870.			_			ري اعد	
7a		ny time during the tax year, was the founda				_			
		es," did the foundation receive any proceed							<u> </u>
Pa	t VI		Directors, Truste	ees, Foundation M	anagers, Hig	nly P	ald Emp	oloyee	s,
1	Liei	and Contractors all officers, directors, trustees, foundation	on managers and the	ir companyation (see ir	netructione)				
<u></u>	LIS	an officers, directors, trustees, foundation	(b) Title, and avg.	(c) Compensation	(d) Contribution	ns to	(e) Expe	nee acc	
		(a) Name and address	hours per week devoted to position	(if not paid, enter -0-)	employee benef	t plans		allowan	
SEI	3 A	TTACHMENT #6	devoted to position		and delened o	omp.			
2	Cor	npensation of five highest-paid employe	es (other than those	included on line 1 se	ee instructions).				
	If n	one, enter "NONE."					_		
	A NIA	me and address of each employee paid	(b) Title, and avg.		(d) Contribution		(e) Expe	200 200	ount
(4	ı) ıva	more than \$50,000	hours per week	(c) Compensation	employee be plans and def		1	allowani	
			devoted to position		compensati		01.101		
NOI	ΝE								
		:		,					
		•							
			<u> </u>	l			J		
		bber of other employees paid over \$50,000				• • • • • •	Form 9 !	P	(2014)
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Part VIII	Information About Officers, Directors, Trustees and Contractors (continued)	, Foundation Managers, Hig	hly Paid Employees,
3. Five high	est-paid independent contractors for professional services (s	ee instructions). If none, enter "NC	NE."
(a) Na	me 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 services		. •
Part IX-A	Summary of Direct Charitable Activities		
	on's four largest direct charitable activities during the tax year. Include relevant and other beneficiaries served, conferences convened, research papers produc		Expenses
1			
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see in	structions)	
	o largest program-related investments made by the foundation du		Amount
1			
2			
All other progra	m-related investments. See instructions.		
3			

Pá	Minimum Investment Heturn (All domestic foundations must complete this part. Foreign four see instructions.)	ndations,	
1,	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	: JAK	
	purposes		
а	Average monthly fair market value of secunties	1a	615,384
b	Average of monthly cash balances	1b	130
С	Fair market value of all other assets (see instructions)	1c	
đ	Total (add lines 1a, b, and c)	1d	615,514
е	Reduction claimed for blockage or other factors reported on lines 1a and	7.	
	1c (attach detailed explanation) 1e	144	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	615,514
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	9,233
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	606,281
6	Minimum investment return. Enter 5% of line 5	6	30,314
Pa	Tt 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	Minimum investment return from Part X, line 6	1	30,314
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)		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	30,314
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	30,314
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	_	20 214
	line 1	7	30,314
Pa	t XII 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	18	16,060
b	Program-related investments total from Part IX-B	1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	*** **********************************	
а	Suitability test (prior IRS approval required)	3a	
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	16,060
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	16,060
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	e foundation	
	qualifies for the section 4940(e) reduction of tax in those years.		

Form 990-PF (2014)

Рa	Undistributed income (se				
1,	Distributable amount for 2014 from Part XI,	(a)	(b)	(c)	(d)
٠,		Corpus	Years pnor to 2013	2013	2014 30,314
2	line 7				30,314
	Undistributed income, if any, as of the end of 2014			36,221	
a	Enter amount for 2013 only		20,261	30,221	
b	Total for prior years 20 <u>12</u> , 20 <u>11</u> , 20		20,201		
3	Excess distributions carryover, if any, to 2014				
a	From 2009				
b	From 2010				
C	From 2011			·	
đ	From 2012		4		1
е.	From 2013				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2014 from Part XII,				
	line 4 ▶ \$ 16,060				*
a	Applied to 2013, but not more than line 2a			15,960	
b	Applied to undistributed income of prior years			,	,
	(Election required see instructions)				
С	Treated as distributions out of corpus			*	>
	(Election required see instructions)			<i>'</i> *	·*
d	Applied to 2014 distributable amount				
е	Remaining amount distributed out of corpus .			(n	<u> </u>
5	Excess distributions carryover applied to 2014	***			
	(If an amount appears in column (d), the same	** , **	, '\$*		
	amount must be shown in column (a))	Á	,#* / __		
6	Enter the net total of each column as		·		,
	indicated below:	, s a 3/2 2007			
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5				
b	,	, y ** ***		` >'	W
	line 4b from line 2b		20,261		
С	Enter the amount of prior years' undistributed	•		"	*
	income for which a notice of deficiency has been				.1
	issued, or on which the section 4942(a) tax has			Ì	
	been previously assessed				λ
d	Subtract line 6c from line 6b. Taxable				
	amount see instructions		20,261		
е	Undistributed income for 2013. Subtract				•
	line 4a from line 2a. Taxable amount				
_	see instructions.			20,261	
f	Undistributed income for 2014. Subtract				
	lines 4d and 5 from line 1. This amount				00.000
_	must be distributed in 2015				30,314
7	Amounts treated as distributions out of				!
	corpus to satisfy requirements imposed			İ	t
	by section 170(b)(1)(F) or 4942(g)(3) (Elec-			İ	
_	tion may be required-see instructions)				
8	Excess distributions carryover from 2009				
	not applied on line 5 or line 7 (see				
	instructions)				· · · · · · · · · · · · · · · · · · ·
9	Excess distributions carryover to 2015.				•
•	Subtract lines 7 and 8 from line 6a				·
0	Analysis of line 9	{			
	Excess from 2010				
b	Excess from 2011.				
C	Excess from 2012				
d				1	
е	Excess from 2014.		 	Į.	

Pai	T XIV .Private Operating For	undations (see in	structions and Part V	II-A, question 9)		
1a	If the foundation has received a ruling of	or determination lette	er that it is a private of	perating		
•	foundation, and the ruling is effective for	or 2014, enter the da	te of the ruling	▶		
' ь	Check box to indicate whether the four	dation is a private o	perating foundation (described in section	4942(J)(3) or	4942(J)(5)
2a	Enter the lesser of the adjusted net	Tax year		Pnor 3 years		
	income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
	investment return from Part X for each year listed	<u> </u>	(4) = 3.5	(0) = 1	(-/	0
b	85% of line 2a					0
c	Qualifying distributions from Part XII.					
•	line 4 for each year listed					l 0
ч	Amounts included in line 2c not used					
•	directly for active conduct exempt act		İ			0
е	Qualifying distributions made directly					
٠	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					0
3	Complete 3a, b, or c for the alternative					
3	test relied upon					
_	"Assets" alternative test enter]			
a						0
	(1) Value of all assets					0
	(2) Value of assets qualifying under					
b	section 4942(j)(3)(B)(i) "Endowment" alternative test enter					0
-	2/3 of min. investment return shown in					_
	Part X, line 6 for each year listed ·		-			0
С	"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)					0
	(2) Support from general public and					
	5 or more exempt organizations as provided in section 4942(j)(3)					
	(B)(III) · · · · · · ·					0
	(3) Largest amount of support from					
	an exempt organization .					0
	(4) Gross investment income					0
Pai	t XV Supplementary Inform			, if the foundati	on had \$5,000 ·	or more in assets
	at any time during the		nstructions.)			
1	Information Regarding Foundation M	-				
а	List any managers of the foundation wh				ceived by the founda	ation before the
	close of any tax year (but only if they ha	ave contributed more	e than \$5,000). (See :	section 507(d)(2).)		
NOI						
b	List any managers of the foundation wh				ly large portion of th	e ownership
	of a partnership or other entity) of which	n the foundation has	a 10% or greater int	erest.		
<u>101</u>		<u></u>		<u> </u>		
2	Information Regarding Contribution,					
	Check here ▶ 🛛 if the foundation onl					
	requests for funds. If the foundation ma	ikes gifts, grants, etc	(see instructions) to	ındıvıduals or organ	izations under other	conditions,
	complete items 2a, b, c, and d.					
a	The name, address, and telephone nur	nber or e-mail of the	e person to whom ap	plications should be	addressed	
		<u> </u>				
b	The form in which applications should t	oe submitted and inf	formation and materia	als they should includ	le.	
С	Any submission deadlines					
d	Any restrictions or limitations on awards	s, such as by geogra	phical areas, charital	ole fields, kinds of ins	titutions, or other fac	otors:

FDA

Part XV . Supplementary Information (continued)

,	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient	Contribution	
а	Paid during the year				
EE	ATTACHMENT #7				
				ţ	
	Total · · · · · · · · · · · · · · · · · · ·			·	3a 16,0
b	Approved for future payment				
				1	
				I	
		-			

CRAWFORD FOUNDATION 726027718 Page 12

Enter gross amounts unless otherwise indicated	Unrelated	business income	Excluded	by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(c) Excl.	(d) Amount	Related or exempt function income (See instructions.)
1 Program service revenue	code		code		(000 111011011011)
a					
b					
c					
d					
e			1		_
f					-
g Fees & contracts from government agencies			1		· -
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments				12,918	
4 Dividends and interest from securities			1 1		
5 Net rental income or (loss) from real estate		73. ;	, ~3.		## TO
a Debt-financed property		,			
b Not debt-financed property					
6 Net rental income or (loss) from personal property .			1		
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events .			1		
10 Gross profit or (loss) from sales of inventory.					-
11 Other revenue a					
b					
С			i i		
ď	·				
e					
12 Subtotal Add columns (b), (d), and (e)	MARK	(0 3 2 3	12,918	0
13 Total. Add line 12, columns (b), (d), and (e)				13	12,918

(See worksheet in line 13 instructions to verify calculations.)

Part XVI−B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.
▼ Explain below how each activity for which income is reported in column (e) of Part XVI−A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)

FDA

Form 990-PF (2014)

Form 990-PF (2014)

Pai	rt X\	VII.	Information Exempt Org	-	ransters to ar	nd Transa	ctions a	ind Relation	onships Wi	ith Noncha	ritable	!
1	Ďıd	the org			age in any of the foll	owing with a	ny other o	rganization de	escribed in sec	ction	Yes	No
•					(3) organizations) or					,		1
а	Tran	 nsfers f	rom the reporting	foundation to a	noncharitable exemp	ot organizatio	n of	•			'	
			, -	•		-				1a(1)		X
												X
ь	• •		sactions									
	(1)			nchantable exem	pt organization							X
	(2)				le exempt organizati					<u> </u>	+	X
	(3)				assets					<u> </u>		X
	(4)		bursement arrang							1		X
	(5)		s or loan guarante							1		X
	(6)		_		or fundraising solic					<u> </u>		X
c	٠,			•	other assets, or paid						+	X
d		_		_	mplete the following					L	e of the	
_					reporting foundation							
					the value of the good					alde in any ira	i i sactioi	
	01 31	naing	arrangement, six	ow in column (a)	the value of the got	os, other ass	sets, Or ser	I VICES I ECEIVE	u.			
(a) Li		/b) A	mount involved	(c) Name of no	ncharitable exempt	organization	(d) Doss	nation of transf	are transactions	, and sharing arra		
(4)	ne iio.	(2)/(anount involved	(c) Italie of no	Heriamable exempt	organization	(4) 5000	TIP COLOT COLOT	ers, transactions	, and snaring are	- Ingenient	
		•										
		1										
				1								
							Ì					
				1								
				J			<u></u>					
2a	Is th	e foun	dation directly or	indirectly affiliated	d with, or related to,	one or more	tax-exem	pt organizatio	ns described i			_
	sect	ion 501	1(c) of the Code (other than section	n 501(c)(3)) or in sec	ction 527? .		• • • • • • • • • •		· 🔲 ۱	′es 🛚 🗵	No
b	If "Y	es," co	mplete the follow	ring schedule								
		(a) f	Name of organiza	ation	(b) Type o	of organizatio	n	((c) Description	n of relationshi	р	
						<u> </u>						
	Т	Under	penalties of perjury,	I declare that I have	examined this return, in	cluding accomp	anying sch	edules and state	ments, and to th	e best of my kno	wledge a	nd
Sigr	۱ I	beliet,	it is true, correct, an	d complete. Declara	tion of preparer (other t	han taxpayer) is	based on a	Il information of	which preparer	has any knowled	ge.	
Here		N	(RT1	eline 1	M. 1	120 /261	PRES	TDENT		ay the IRS discu		
	~	Sic	nature of officer	or trustee	Date	.J. V // W	Title	· 14 1		ith the preparer : ee instructions)?	X Yes	۱۳.
			rint/Type prepare	name	Preparer's signal	ture		Date	Check	if PTIN	-4 -00	
Paic	i	ينك			STEPHEN S		I .		, ,	ployed P01	2250	a7
Pre	oare		on's name III	DE TOV CD) T LIVIN	<u>. т т и </u> О	10-20-2				91
مواا	On	IV H	mins name	AD INV CK	OUP INC				rims EIN 🕨	<u>4318718</u>	40	

Phone no. 2252914678

2014 FORM 990 SCHEDULE OF LEGAL FEES

ATTACHMENT 1: PAGE 1 - 990-PF PAGE 1, PART I, LINE 16A OPEN TO PUBLIC

INSPECTION For calendar year 2014, or tax period beginning 10-01-2014, and ending 09-30-2015

Name of Organization Employer Identification Number CRAWFORD FOUNDATION 72-6027718

CRAWFORD FOUNDATION		72-6027718			
Legal Description	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charity	
LEGAL	150	43			
		:			
		;			
		i			
		İ			
Total:	150	43	43		

2014 FORM 990 SCHEDULE OF ACCOUNTING FEES

ATTACHMENT OPEN TO PUBLIC 2: PAGE 1 - 990-PF PAGE 1, PART I, LINE 16B INSPECTION 10-01-2014, and ending For calendar year 2014, or tax period beginning 09-30-2015 Name of Organization **Employer Identification Number** CRAWFORD FOUNDATION Net Investment Adjusted Disbursements for Amount **Accounting Category** Income Net Income Charity 387 ACCOUNTING/TAX PREP 1,347 387 Total: 1,347 387 387

2014 FORM 990 SCHEDULE OF TAXES PAID

ATTACHMENT OPEN TO PUBLIC 3: PAGE 1 - 990- PF PAGE 1, PART I, LINE 18

INSPECTION 10-01-2014, and ending 09-30-2015 For calendar year 2014, or tax period beginning

Name of Organization Employer Identification Number

CRAWFORD FOUNDATION		72-6027718			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charity	
MEDICARE SOCIAL SECURITY EXISE	345 1,473 12,014	423	423		
		:			
Total:	13,832	3,971	3,971		

2014 FORM 990 OTHER EXPENSES SCHEDULE

ATTACHMENT 4: PAGE 1 990-PF PAGE 1, PART I, LINE 23 OPEN TO PUBLIC

INSPÉCTION 10-01-2014, and ending 09-30-2015 For calendar year 2014, or tax period beginning Employer Identification Number Name of Organization

72-6027718 CRAWFORD FOUNDATION

CRAWFORD FOUNDATION [72-6027718					
Description of Activity	Revenue and Expenses	Net Investment Income	Adjusted Net Income	Disbursements for Charity	
BANK FEES	124	64	64		
POSTAGE/SHIPPING	202	58	58		
UTILITIES	205	59	59		
TELEPHONE	80	23	23		
	416	119			
OFFICE SUPPLIES					
EQUIPMENT MAINTENANCE	640	155			
PENALTY	29	8	8		
		į			
	İ				
	•				
				İ	
,					
				•	
	i				
	1				
		•	•		
Total:	1,696	486	486		
· · · · · · · · · · · · · · · · · · ·			L	\- <u></u>	

2014 FORM 990 BOOKS ARE IN CARE OF

	CHMENT	5 - 9	990-PF	PAGE 5,	PART V	II-A, LINE	14	
	TO PUBLIC							
INSPÉC	CTION	For calend	iar year 2014	, or tax period	beginning	10-01	, and ending	09-30-2015
Name of C	Organization							Employer Identification Number
CRAWF	FORD FO	UNDA	CION					72-6027718
Part VII-A	A - Line 14							
Individual or Business I						CATHER	RINE GINN	
								<u> </u>
Street Add	dress .					. <u>3639</u> C	CLAYCUT RD	
U S. Addr	ress							
	_	0806		City <u>BA</u>	TON ROU	GE	Sta	te <u>LA</u>
or Foreign Ad								
C	City	•	•					
Pr	Province or S	tate						
Co	Country							<u></u>
Po	ostal code							···· ·
PI	Phone Numbe	er	••••					(225) 383-732
Fa	ax Number		-					

2014 FORM 990 CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

ATTACHMENT 6: PAGE 1 - 990-PF PAGE 6, PART VIII

OPEN TO PUBLIC

INSPECTION For calendar year 2014 or tay perced beginning 10-01-2014 and ending 09-30-2015

INSPECTION	For calendar year 2014, or ta	ax period beginning 1	0-01-2014, and		
Name of Organization					ification Number
CRAWFORD F	FOUNDATION			72-60277	18
	ame and Address	(B) Title and Average Hrs per Week	(C) Compensation (If not paid, enter 0)	(D) Cont. to Employee Ben. Plans & Def. Comp.	(E) Expense Account & Other Allowances
CATHERINE		PRESIDENT			
3639 CLAYO		2.00			
BATON ROUG	SE, LA 70806		23,760		
ישארים אים מיים	remin				
STACY BENN 3639 CLAYO		SECRETARY/TRE			
	GE, LA 70806	2.00			
3711011 11000	JE, 111 /0000	2.00			
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FDA

2014 FORM 990 GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 7: PAGE 1 990-PF PAGE 11, PART XV LINE 3A

OPEN TO PU
INSPECTION For calendar year 2014, or tax period beginning 10-01-2014, and ending 09-30-2015.

Name of Organization Employer Identification Number

CRAWFORD FOUNDATION	· · · · · · · · · · · · · · · · · · ·	72-6027718			
Recipient	If Recipient is an Individual, Show any Relationship to Any Foundation Manager	l Basisiani	Purpose of Grant or Contribution	Amount	
Name and Address (home or business)	or Substantial Contributor	Recipient			
SEE ATTACHED LIST - DETAIL STMNT #2				16,060	
				,	

2014 DETAIL STATEMENTS

CRAWFORD FOUNDATION 726027718

PAGE 1

			
SAVINGS ACCT	NING ENDING 28,215 162,167	G BOOK ENDING 0 0	
TOTAL CARRIED TO 990-PF PG 2	617,039	9 0	0
STATEMENT #2 - INTER INVESTMENT EXC AMERICAN EQUITY ANNUITY		3,932 3,258 1,392 4,329	` , ,
STATEMENT #3 - ACCT. PAYABLE AND EXPAYROLL TAXES - FED	E	0-EO PG 11 LINE BEGINNING 1,040 368 368 170 86 86	17A) ENDING 0 0 0 0 0 0
TOTAL CARRIED TO 990-EO PG 11 LINE	17A	2,118	0

PAGE II PARI XV	
RECIPIENT	AMOUNT
FIRST BAPTIST CHURCH	4980
GUIDEPOST FOUNDATION	810
AMERICAN INSTITUTE OF CANCER	100
MUSCULAR DYSTROPHY ASSOCIATION	100
AMFAR	100
MADD	100
UNICEF	200
CARE	`200
AMERICAN HEART ASSOC	100
PARALYZED VETERANS OF AMERICA	, , , , , , , , , , , , , , , , , , ,
AMERICAN PARKINSON DISEASE	100
MEMORIAL SLOAN KETTERING	100
THE HERITAGE FOUNDATION	, 100
ISTROMA AREA BOY SCOUTS	· 100
BURDEN HORTICULTURAL SOCIETY	100
INTERNATIONAL RESCUR COMM	100
ST JUDE RESEARCH HOSPITAL	100
GREATER BATON ROUGE FOOD BANK	400
FINCA	300
CHRISTIAN APPALACHIAN PROJECT	100
BOYS TOWN	100
FAMILY OF FAITH	4980
LAKESHORE LIONS CLUB	190
FRIENDS OF LPB	100
COMPASSION INTERNATIONAL	100
MEDICALERT FOUNDATION	200
THE PROVIDENCE FUND	100
BURN RESCUE	100
MAP INTERNATIONAL	200
MERCY CORPS	100
HELP ME SEE	200
NATL LAW ENFORCEMENT	100

RECIPIENT	AMOUNT
BLINDED VETERANS ASSOC	100
AMERICAN KIDNEY FUND	100
ALS ASSOCIATION	100
CHILDRENS CANCER RESEARCH	100
LOUISIANA STATE TROOPERS ASSOC	100
FOOD FOR THE POOR	100
FOR THE TROOPS	100
GUIDE DOG FOUNDATION	200
MISSION DIGNITY	100
JDRF	100
ST JOSEPH HOSPICE	100
GMHC	100
TOTAL	16060

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