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For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015

Name of foundation CROUL FAMILY FOUNDATION		<b>A Employer identification number</b> 20-1222760	
% C/O FIRST FOUNDATION ADVISOR			
Number and street (or P O box number if mail is not delivered to street address) 18101 VON KARMAN AVENUE Suite 700		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code IRVINE, CA 92612		<b>B</b> Telephone number (see instructions) (877) 968-6328	
<b>G</b> Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>C</b> If exemption application is pending, check here <input type="checkbox"/> <b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> <b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> <b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
<b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation			
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) <b>\$</b> 23,529,604		<b>J</b> Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis )	

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</i>		Revenue and expenses per books <b>(a)</b>	Net investment income <b>(b)</b>	Adjusted net income <b>(c)</b>	Disbursements for charitable purposes <b>(d)</b> (cash basis only)
Revenue	<b>1</b> Contributions, gifts, grants, etc , received (attach schedule) . . . . .	1,000,000			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	<b>3</b> Interest on savings and temporary cash investments . . . . .	25,542	25,542	25,542	
	<b>4</b> Dividends and interest from securities . . . . .	467,694	467,694	467,694	
	<b>5a</b> Gross rents . . . . .				
	<b>b</b> Net rental income or (loss) _____				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10 _____	1,562,955			
	<b>b</b> Gross sales price for all assets on line 6a _____ 16,790,278				
	<b>7</b> Capital gain net income (from Part IV , line 2) . . . .		1,562,955		
	<b>8</b> Net short-term capital gain . . . . .				
	<b>9</b> Income modifications . . . . .				
	<b>10a</b> Gross sales less returns and allowances _____				
Operating and Administrative Expenses	<b>b</b> Less Cost of goods sold . . . . .				
	<b>c</b> Gross profit or (loss) (attach schedule) . . . . .				
	<b>11</b> Other income (attach schedule) . . . . .	 51,872	51,872	51,872	
	<b>12 Total.</b> Add lines 1 through 11 . . . . .	3,108,063	2,108,063	545,108	
	<b>13</b> Compensation of officers, directors, trustees, etc . . . . .				
	<b>14</b> Other employee salaries and wages . . . . .				
	<b>15</b> Pension plans, employee benefits . . . . .				
	<b>16a</b> Legal fees (attach schedule). . . . .				
	<b>b</b> Accounting fees (attach schedule). . . . .	 25,495	12,747	12,748	12,748
	<b>c</b> Other professional fees (attach schedule) . . . . .	 37,070			37,070
	<b>17</b> Interest . . . . .	1,441	1,441	1,441	
	<b>18</b> Taxes (attach schedule) (see instructions) . . . . .	 66,065	7,151	7,151	
	<b>19</b> Depreciation (attach schedule) and depletion . . . .				
	<b>20</b> Occupancy . . . . .				
	<b>21</b> Travel, conferences, and meetings. . . . .				
	<b>22</b> Printing and publications . . . . .				
	<b>23</b> Other expenses (attach schedule). . . . .	 208,192	192,309	192,309	
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	338,263	213,648	213,649	49,818
	<b>25</b> Contributions, gifts, grants paid . . . . .	1,481,900			1,481,900
	<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	1,820,163	213,648	213,649	1,531,718
	<b>27</b> Subtract line 26 from line 12				
	<b>a Excess of revenue over expenses and disbursements</b>	1,287,900			
	<b>b Net investment income</b> (if negative, enter -0-)		1,894,415		
	<b>c Adjusted net income</b> (if negative, enter -0-)			331,459	



Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing . . . . .	1,430,719	763,609	763,609
	2	Savings and temporary cash investments . . . . .			
	3	Accounts receivable ▶ 1,220			
		Less allowance for doubtful accounts ▶	1,220	1,220	1,220
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions). . . . .			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less allowance for doubtful accounts ▶			
	8	Inventories for sale or use . . . . .	33,159	33,159	33,159
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .	11,924,588	10,913,188	10,913,188
	c	Investments—corporate bonds (attach schedule) . . . . .	829,512	3,111,265	3,111,265
	Liabilities	11	Investments—land, buildings, and equipment basis ▶		
		Less accumulated depreciation (attach schedule) ▶			
12		Investments—mortgage loans . . . . .			
13		Investments—other (attach schedule) . . . . .	10,699,313	8,687,056	8,687,056
14		Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
15		Other assets (describe ▶)	21,057	14,563	20,107
16		Total assets(to be completed by all filers—see the instructions Also, see page 1, item I)	24,939,568	23,524,060	23,529,604
17		Accounts payable and accrued expenses . . . . .			
18		Grants payable . . . . .			
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 ▶)				
23	Total liabilities(add lines 17 through 22) . . . . .		0		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds . . . . .			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	17,543,155	14,931,993	
	29	Retained earnings, accumulated income, endowment, or other funds	7,396,413	8,592,067	
	30	Total net assets or fund balances(see instructions) . . . . .	24,939,568	23,524,060	
	31	Total liabilities and net assets/fund balances(see instructions) . . . . .	24,939,568	23,524,060	

Part 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 24,939,568
2	Enter amount from Part I, line 27a . . . . .	2 1,287,900
3	Other increases not included in line 2 (itemize) ▶	3 -2,703,408
4	Add lines 1, 2, and 3 . . . . .	4 23,524,060
5	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 23,524,060



Part IV

Capital Gains and Losses for Tax on Investment Income

List and describe the kind(s) of property sold (e g , real estate, <b>(a)</b> 2-story brick warehouse, or common stock, 200 shs MLC Co )		How acquired P—Purchase <b>(b)</b> D—Donation	Date acquired <b>(c)</b> (mo , day, yr )	Date sold <b>(d)</b> (mo , day, yr )
<b>1a</b>	See Additional Data Table			
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				

<b>(e)</b> Gross sales price	Depreciation allowed <b>(f)</b> (or allowable)	Cost or other basis <b>(g)</b> plus expense of sale	Gain or (loss) <b>(h)</b> (e) plus (f) minus (g)
<b>a</b>	See Additional Data Table		
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0- ) or Losses (from col (h)) <b>(l)</b>
<b>(i)</b> F M V as of 12/31/69	Adjusted basis <b>(j)</b> as of 12/31/69	Excess of col (i) <b>(k)</b> over col (j), if any	
<b>a</b>	See Additional Data Table		
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b>	Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	<b>2</b>	1,562,955
<b>3</b>	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 . . . . .			

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )  
If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No  
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

**1** Enter the appropriate amount in each column for each year, see instructions before making any entries

<b>(a)</b> Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	<b>(c)</b> Net value of noncharitable-use assets	<b>(d)</b> Distribution ratio (col (b) divided by col (c))
2014	1,315,384	23,578,863	0 055787
2013	1,616,994	21,973,577	0 073588
2012	1,120,957	20,794,170	0 053907
2011	935,471	18,486,585	0 050603
2010	871,896	18,649,923	0 046751

<b>2</b>	Total of line 1, column (d). . . . .	<b>2</b>	0 280636
<b>3</b>	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	0 056127
<b>4</b>	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5. . . . .	<b>4</b>	23,841,503
<b>5</b>	Multiply line 4 by line 3. . . . .	<b>5</b>	1,338,152
<b>6</b>	Enter 1% of net investment income (1% of Part I, line 27b). . . . .	<b>6</b>	18,944
<b>7</b>	Add lines 5 and 6. . . . .	<b>7</b>	1,357,096
<b>8</b>	Enter qualifying distributions from Part XII, line 4. . . . .	<b>8</b>	1,531,718

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See  
the Part VI instructions



**Part VI** Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ <b>(attach copy of letter if necessary—see instructions)</b>		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	18,944
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	18,944
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	18,944
<b>6</b>	Credits/Payments		
<b>a</b>	2015 estimated tax payments and 2014 overpayment credited to 2015	<b>6a</b>	34,140
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868). . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	34,140
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	189
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . <b>▶</b>	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . <b>▶</b>	<b>10</b>	15,007
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2015 estimated tax</b> <b>▶</b> 15,007 <b>Refunded</b> <b>▶</b>	<b>11</b>	

**Part VII-A** Statements Regarding Activities

<b>1a</b>	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		<b>Yes</b>	<b>No</b>
<b>b</b>	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . <i>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</i>			<b>No</b>
<b>c</b>	Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .			<b>No</b>
<b>d</b>	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year <b>(1)</b> On the foundation <b>▶</b> \$ _____ <b>(2)</b> On foundation managers <b>▶</b> \$ _____			
<b>e</b>	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <b>▶</b> \$ _____			
<b>2</b>	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	<b>2</b>		<b>No</b>
<b>3</b>	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? <i>If "Yes," attach a conformed copy of the changes</i>	<b>3</b>		<b>No</b>
<b>4a</b>	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	<b>Yes</b>	
<b>b</b>	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	<b>Yes</b>	
<b>5</b>	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	<b>5</b>		<b>No</b>
<b>6</b>	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	<b>6</b>		<b>No</b>
<b>7</b>	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . . .	<b>7</b>	<b>Yes</b>	
<b>8a</b>	Enter the states to which the foundation reports or with which it is registered (see instructions) <b>▶</b> CA, DE _____			
<b>b</b>	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 G? <i>If "No," attach explanation</i> .	<b>8b</b>	<b>Yes</b>	
<b>9</b>	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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i> . . . . .	<b>9</b>		<b>No</b>
<b>10</b>	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	<b>10</b>		<b>No</b>



**Part VII-A Statements Regarding Activities (continued)**


<b>11</b>	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).	<b>11</b>		<b>No</b>
<b>12</b>	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)	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <a href="http://croulfoundation.org">http://croulfoundation.org</a>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of ► <u>CO FIRST FOUNDATION ADVISORS</u> Telephone no ► <u>(877) 968-6328</u> Located at ► <u>18101 VON KARMAN AVE SUITE 700 IRVINE CA</u> ZIP+4 ► <u>92612</u>			
<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . ► <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . ► <b>15</b>			
<b>16</b>	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ►	<b>16</b>	<b>Yes</b>	<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
<b>1a</b>	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(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 ). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	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 section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Organizations relying on a current notice regarding disaster assistance check here. . . . . ► <input type="checkbox"/>	<b>1b</b>	
<b>c</b>	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 2015? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>1c</b>	<b>No</b>
<b>2</b>	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))		
<b>a</b>	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20____, 20____, 20____, 20____		
<b>b</b>	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 <b>all</b> years listed, answer "No" and attach statement—see instructions ). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>2b</b>	<b>No</b>
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____		
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If "Yes," did it have excess business holdings in 2015 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 2015 ). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>3b</b>	
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>	<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	<b>4b</b>	<b>No</b>



**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required *(Continued)*

<b>5a</b> During the year did the foundation pay or incur any amount to				
<b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>(2)</b> Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b> If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?		<b>5b</b>		
Organizations relying on a current notice regarding disaster assistance check here. 				
<b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?				
<input type="checkbox"/> Yes <input type="checkbox"/> No				
If "Yes," attach the statement required by Regulations section 53.4945–5(d)				
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		<b>6b</b>		<b>No</b>
If "Yes" to 6b, file Form 8870				
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?				
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>b</b> If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		<b>7b</b>		


**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
JOHN V CROUL 18101 VON KARMAN AVE STE 700 IRVINE, CA 92612	CEO 5 0	0		
JOHN BRADFORD CROUL 18101 VON KARMAN AVE STE 700 IRVINE, CA 92612	CFO 5 0	0		
SPENCER BEHR CROUL 18101 VON KARMAN AVE STE 700 IRVINE, CA 92612	SECRETARY 5 0	0		

**2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances

**Total** number of other employees paid over \$50,000. 



Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

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

Total 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 of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

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	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 . . . . . ▶	



**Part X Minimum Investment Return**

(All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	13,389,276
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	1,097,164
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	9,718,132
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	24,204,572
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	24,204,572
<b>4</b>	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	363,069
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	<b>5</b>	23,841,503
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	1,192,075

**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.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	1,192,075
<b>2a</b>	Tax on investment income for 2015 from Part VI, line 5. . . . .	<b>2a</b>	18,944
<b>b</b>	Income tax for 2015 (This does not include the tax from Part VI ). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	18,944
<b>3</b>	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	<b>3</b>	1,173,131
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	1,173,131
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	<b>7</b>	1,173,131

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
<b>a</b>	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	<b>1a</b>	1,531,718
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	<b>2</b>	0
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	0
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	0
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	1,531,718
<b>5</b>	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). . . . .	<b>5</b>	18,944
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	1,512,774

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



Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				1,173,131
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only. . . . .			0	
b Total for prior years 2013 , 2012 , 2011		0		
3 Excess distributions carryover, if any, to 2015				
a From 2010. . . . .	44,138			
b From 2011. . . . .	44,011			
c From 2012. . . . .	170,074			
d From 2013. . . . .	533,805			
e From 2014. . . . .	170,578			
f Total of lines 3a through e. . . . .	962,606			
4 Qualifying distributions for 2015 from Part XII, line 4 ► \$ 1,531,718				
a Applied to 2014, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions). . . . .				
c Treated as distributions out of corpus (Election required—see instructions). . . . .				
d Applied to 2015 distributable amount. . . . .				1,173,131
e Remaining amount distributed out of corpus	358,587			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,321,193			
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. . . . .				
d Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015 . . . . .				0
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). . . . .				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions). . .	44,138			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a . . . . .	1,277,055			
10 Analysis of line 9				
a Excess from 2011. . . .	44,011			
b Excess from 2012. . . .	170,074			
c Excess from 2013. . . .	533,805			
d Excess from 2014. . . .	170,578			
e Excess from 2015. . . .	358,587			



Part XIV

Private Operating Foundations (see instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling. . . . .

b

Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

2a

Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .

Tax year	Prior 3 years			(e) Total
(a) 2015	(b) 2014	(c) 2013	(d) 2012	
b 85% of line 2a . . . . .				
c Qualifying distributions from Part XII, line 4 for each year listed . . . . .				
d Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .				
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .				

3 Complete 3a, b, or c for the alternative test relied upon

a

"Assets" alternative test—enter

(1)

Value of all assets . . . . .

(2)

Value of assets qualifying under section 4942(j)(3)(B)(i)

b

"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .

c

"Support" alternative test—enter

(1)

Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .

(2)

Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .

(3)

Largest amount of support from an exempt organization

(4)

Gross investment income

Part XV

Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1

Information Regarding Foundation Managers:

a

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

JOHN V CROUL

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a

The name, address, and telephone number or email address of the person to whom applications should be addressed

See Additional Data Table

b

The form in which applications should be submitted and information and materials they should include

See Additional Data Table

c

Any submission deadlines

See Additional Data Table

d

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

See Additional Data Table

Form 990-PF (2015)



Part XV

Supplementary Information(continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total . . . . .			▶ 3a	1,481,900
b Approved for future payment				
Total . . . . .			▶ 3b	



Enter gross amounts unless otherwise indicated

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2015)



<b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			<b>Yes</b>	<b>No</b>
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of				
<b>(1)</b> Cash. . . . .		<b>1a(1)</b>		<b>No</b>
<b>(2)</b> Other assets. . . . .		<b>1a(2)</b>		<b>No</b>
<b>b</b> Other transactions				
<b>(1)</b> Sales of assets to a noncharitable exempt organization. . . . .		<b>1b(1)</b>		<b>No</b>
<b>(2)</b> Purchases of assets from a noncharitable exempt organization. . . . .		<b>1b(2)</b>		<b>No</b>
<b>(3)</b> Rental of facilities, equipment, or other assets. . . . .		<b>1b(3)</b>		<b>No</b>
<b>(4)</b> Reimbursement arrangements. . . . .		<b>1b(4)</b>		<b>No</b>
<b>(5)</b> Loans or loan guarantees. . . . .		<b>1b(5)</b>		<b>No</b>
<b>(6)</b> Performance of services or membership or fundraising solicitations. . . . .		<b>1b(6)</b>		<b>No</b>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .		<b>1c</b>		<b>No</b>
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received				

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes  
☒ No

b If "Yes," complete the following schedule		
(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

<div style="border-bottom: 1px solid black; text-align: center;">*****</div> Signature of officer or trustee	<div style="border-bottom: 1px solid black; text-align: center;">2016-11-15</div> Date	<div style="border-bottom: 1px solid black; text-align: center;">*****</div> Title
--	--	--

May the IRS discuss this return with the preparer shown below  
 (see instr.)? ☒ Yes ☐ No

<b>Paid Preparer Use Only</b>	Print/Type preparer's name SEAN KELLY	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P00733845
	Firm's name <input type="checkbox"/> HEIN & ASSOCIATES LLP			Firm's EIN <input type="checkbox"/>	
	Firm's address <input type="checkbox"/> 100 SPECTRUM CENTER DR 650 IRVINE, CA 92618			Phone no <input type="checkbox"/>	(949) 428-0288



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

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr )	(d) Date sold (mo , day, yr )
MORGAN STANL 012764 ST COVERED	P		
MORGAN STANL 012764 LT COVERED	P		
JPM ALERIAN MLP	P		2015-02-06
MORGAN STANL 012759 ST COVERED	P		
MORGAN STANL 012759 LT COVERED	P		
MORGAN STANL 012759 LT NON COV	P		
MORGAN STANL 012555 ST COVERED	P		
MANDARIN ORIENTAL INT LTD RTS	P	2015-03-18	2015-03-23
MORGAN STANL 012555 LT COVERED	P		
MORGAN STANL 012555 LT NON COV	P		

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
6,568,833		6,967,685	-398,852
1,349,329		1,173,675	175,654
601,544		498,184	103,360
1,675,822		1,846,345	-170,523
1,022,968		889,962	133,006
380,217		220,121	160,096
64,123		55,689	8,434
1,313			1,313
1,487,229		1,134,824	360,308
41,366		45,351	-3,985

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(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	
			-398,852
			175,654
			103,360
			-170,523
			133,006
			160,096
			8,434
			1,313
			352,405
			-3,985



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

List and describe the kind(s) of property sold (e g , real estate, <b>(a)</b> 2-story brick warehouse, or common stock, 200 shs MLC Co )	How acquired P—Purchase <b>(b)</b> D—Donation	Date acquired <b>(c)</b> (mo , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
2,365 10 UNITS - BEACH POINT TOTAL RETURN	P		
CAPITAL GAIN DIVIDENDS	P		

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

<b>(e)</b> Gross sales price	Depreciation allowed <b>(f)</b> (or allowable)	Cost or other basis <b>(g)</b> plus expense of sale	Gain or (loss) <b>(h)</b> (e) plus (f) minus (g)
3,483,436		2,403,390	1,080,046
			1,868

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) <b>or</b> <b>(l)</b> Losses (from col (h))
<b>(i)</b> F M V as of 12/31/69	Adjusted basis <b>(j)</b> as of 12/31/69	Excess of col (i) <b>(k)</b> over col (j), if any	
			1,080,046



**Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

<b>a</b>	The name, address, and telephone number of the person to whom applications should be addressed  CROUL FAMILY FOUNDATION 18101 VON KARMAN AVENUE SUITE 700 IRVINE, CA 92612 (877) 968-6328
<b>b</b>	The form in which applications should be submitted and information and materials they should include  SEE STATEMENT FOR LINE 2A
<b>c</b>	Any submission deadlines  SEE STATEMENT FOR LINE 2A
<b>d</b>	Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors  SEE STATEMENT FOR LINE 2A



- a** The name, address, and telephone number of the person to whom applications should be addressed

CO FIRST FOUNDATION ADVISORS  
18101 VON KARMAN AVENUE SUITE 700  
IRVINE, CA 92612  
(877) 968-6328

- b** The form in which applications should be submitted and information and materials they should include

SEE STATEMENT FOR LINE 2A

- c** Any submission deadlines

SEE STATEMENT FOR LINE 2A

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

SEE STATEMENT FOR LINE 2A



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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
AIRPORT WORKING GRP INC 1048 IRVINE AVE NUMBER 467 NEWPORT BEACH,CA 92660	N/A	PC	PROGRAM SUPPORT	500
ALS ASSN ORANGE CO CHAPTER 3002 DOW AVE STE 204 TUSTIN,CA 92780	N/A	PC	PROGRAM SUPPORT	2,000
ARIZONA STATE UNIVERSITY 1151 S FOREST AVENUE TEMPE,AZ 85281	N/A	PC	PROGRAM SUPPORT	500
BENTLEY UNIVERSITY 175 FOREST STREET WALTHAM,MA 02452	N/A	PC	PROGRAM SUPPORT	500
Big Brother Big Sisters Of Orange 14121 Yorba St Tustin,CA 92780	N/A	PC	PROGRAM SUPPORT	10,000
Boys & Girls Club Of Santa Ana Inc 250 NORTH GOLDEN CIRCLE SANTA ANA,CA 92705	N/A	PC	PROGRAM SUPPORT	20,000
Bridgewater State University 131 Summer Street Bridgewater,MA 02325	N/A	PC	PROGRAM SUPPORT	500
California Charter Schools 250 E 1st St STE 1000 LOS ANGELES,CA 90012	N/A	PC	PROGRAM SUPPORT	100,000
California State University Fullerton 800 N State College Blvd Fullerton,CA 92831	N/A	PC	PROGRAM SUPPORT	3,000
CATALINA ISLAND SEARCH AND 330 Golden shore suite 170 Long Beach,CA 90802	N/A	PC	PROGRAM SUPPORT	500
CHILD ABUSE PREVENTION CENT 2390 E Orangewood Ave STE 300 Anaheim,CA 92806	N/A	PC	PROGRAM SUPPORT	5,000
Claremont McKenna College Bauer Center Second Floor Claremont,CA 91711	N/A	PC	PROGRAM SUPPORT	15,000
CONCORDIA UNIVERSITY NEBRAS 800 N Columbia Ave Seward,NE 68434	N/A	PC	PROGRAM SUPPORT	500
Crystal Cove 5 CRYSTAL COVE NEWPORT COAST,CA 92657	N/A	PC	PROGRAM SUPPORT	6,000
DELAWARE VALLEY UNIV 700 E Butler ave doylestown,PA 18901	N/A	PC	PROGRAM SUPPORT	500
Total . . . . . ▶ 3a				1,481,900



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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
DIOCESE OF ORANGE 5520 Trabuco rd Irvine, CA 92620	N/A	PC	PROGRAM SUPPORT	1,000
Families Forward 8 Thomas Irvine, CA 92618	N/A	PC	PROGRAM SUPPORT	15,000
FISHER HOUSE FDN 111 rockville pike suite 420 rockville, MD 20850	N/A	PC	PROGRAM SUPPORT	20,000
Food Bank 8014 Marine Way Irvine, CA 92618	N/A	PC	PROGRAM SUPPORT	15,000
Foothill House of Hospitality 230 S Church St Grass Valley, CA 95945	N/A	PC	PROGRAM SUPPORT	15,000
Free Wheelchair Mission 15279 Alton Pkwy Ste 300 Irvine, CA 92618	N/A	PC	PROGRAM SUPPORT	10,000
FRIENDS OF OASIS 801 narcissus avenue corona del mar, CA 92625	N/A	PC	PROGRAM SUPPORT	300
Georgia Southern University 1332 Southern Dr Statesboro, GA 30458	N/A	PC	PROGRAM SUPPORT	1,000
Get Inspired 6192 Santa Rita Ave Garden Grove, CA 92845	N/A	PC	PROGRAM SUPPORT	20,000
Gold Country Community Council 841 Old Tunnel Rd Grass Valley, CA 95945	N/A	PC	PROGRAM SUPPORT	15,000
HART COMMUNITY HOME INC 2807 e lincoln ave Anaheim, CA 92806	N/A	PC	PROGRAM SUPPORT	25,000
High School Inc Foundation 1631 W Sunflower Ave C-35 SANTA ANA, CA 90503	N/A	PC	PROGRAM SUPPORT	15,000
Higher Ground 160 7th St W 2c Ketchum, ID 83340	N/A	PC	PROGRAM SUPPORT	20,000
Hoag Hospital Foundation 500 SUPERIOR AVENUE SUITE 350 NEWPORT BEACH, CA 92663	N/A	PC	PROGRAM SUPPORT	1,500
IDAHO COMM FDN 210 west state street boise, ID 83702	N/A	PC	PROGRAM SUPPORT	25,000
<b>Total . . . . . ▶ 3a</b>				1,481,900



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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
INDIANA UNIV PURDUE UNIV IN 735 W New York St Indianapolis, IN 46202	N/A	PC	PROGRAM SUPPORT	500
Intellectual Virtues Academy 3601 Linden Avenue Long Beach, CA 90807	N/A	PC	PROGRAM SUPPORT	50,000
Kidworks Community Development 1902 W Chestnut Ave Santa Ana, CA 92703	N/A	PC	PROGRAM SUPPORT	5,000
Louisiana State University 3810 West Lakeshore Drive Baton Rouge, LA 70808	N/A	PC	PROGRAM SUPPORT	500
MA COLLEGE OF PHARMACY & HE 179 Longwood Ave Boston, MA 02115	N/A	PC	PROGRAM SUPPORT	500
Mercy House Transitional Living Centers 45 SW Ankeny St Portland, OR 97204	N/A	PC	PROGRAM SUPPORT	15,000
MIDNIGHT MISSION 601 S An Pedro St LOS ANGELES, CA 90014	N/A	PC	PROGRAM SUPPORT	15,000
MIND Research Institute 111 Academy Dr 100 Irvine, CA 92617	N/A	PC	PROGRAM SUPPORT	200,000
Montana State University 1501 South 11th Ave Bozeman, MT 59717	N/A	PC	PROGRAM SUPPORT	1,000
NEW YORK UNIVERSITY 44 weat fourth st new york, NY 10012	N/A	PC	PROGRAM SUPPORT	500
NEWPORT BALBOA SAILING & SE 1801 bayside dr corona del mar, CA 92625	N/A	PC	PROGRAM SUPPORT	60,000
Newport Harbor Sailing Foundation 4041 MACARTHUR BLVD SUITE 350 NEWPORT BEACH, CA 92660	N/A	PC	PROGRAM SUPPORT	3,000
NO ONE LEFT BEHIND PO Box 3641 Merrifield, VA 22116	N/A	PC	PROGRAM SUPPORT	10,000
NORTHERN MIC UNIV 1401 presque isle avenue marquette, MI 49855	N/A	PC	PROGRAM SUPPORT	500
Ocean Institute 24200 DANA POINT HARBOR DR DANA POINT, CA 92629	N/A	PC	PROGRAM SUPPORT	40,000
<b>Total . . . . . ▶ 3a</b>				1,481,900



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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
OHIO STATE UNIVERSITY 281 W lane ave columbus,OH 43210	N/A	PC	PROGRAM SUPPORT	1,000
Olivet Nazarene University one university avenue Bourbonnais,IL 60914	N/A	PC	PROGRAM SUPPORT	10,000
ORANGE CATH FDN 12020 chapman ave PMB 257 Garden Grove,CA 92840	N/A	PC	PROGRAM SUPPORT	252,500
ORANGE COUNTY COUNCIL BOY S 1211 east dyer road Santa Ana,CA 92705	N/A	PC	PROGRAM SUPPORT	5,000
ORANGE COUNTY RESCUE MISSIO 13280 Champman ave Garden Grove,CA 92840	N/A	PC	PROGRAM SUPPORT	15,000
Orangewood Children's Foundation 1575 E 17TH ST SANTA ANA,CA 92705	N/A	PC	PROGRAM SUPPORT	20,000
Oregon State University 104 KERR ADMINISTRATION BUILDING CORVALLIS,OR 97331	N/A	PC	PROGRAM SUPPORT	500
PEBBLE BEACH CO FDN PB Box 1767 Pebble Beach,CA 93953	N/A	PC	PROGRAM SUPPORT	3,000
Planes Of Fame 7000 Merrill Ave 17 Chino,CA 91710	N/A	PC	PROGRAM SUPPORT	15,000
Project Access Inc 3900 BIRCH STREET SUITE 113 NEWPORT BEACH,CA 92660	N/A	PC	PROGRAM SUPPORT	10,000
PROJECT DIGNITY 3900 BIRCH STREET SUITE 113 newport,CA 92660	N/A	PC	PROGRAM SUPPORT	6,000
Project HOPE School Foundation 2258 Woodruff Rd Simpsonville,SC 29681	N/A	PC	PROGRAM SUPPORT	20,000
PROVIDENCE SPEECH AND HEARI 1301 W Providence Ave Orange,CA 92868	N/A	PC	PROGRAM SUPPORT	5,000
Scholars First 3701 E Plano Parkway Plano,TX 75074	N/A	PC	PROGRAM SUPPORT	500
Second Harvest Food Bank 750 Curtner Avenue San Jose,CA 95125	N/A	PC	PROGRAM SUPPORT	32,500
<b>Total . . . . . ▶ 3a</b>				1,481,900



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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
Serving People In Need Inc 151 KALMUS DR H2 COSTA MESA,CA 92626	N/A	PC	PROGRAM SUPPORT	20,000
Share Our Selves 1550 Superior Ave Costa Mesa,CA 92627	N/A	PC	PROGRAM SUPPORT	15,000
Sierra Streams Institute 431 Uren St Nevada City,CA 95959	N/A	PC	PROGRAM SUPPORT	15,000
Someone Cares Soup Kitchen 720 W 19th St Costa Mesa,CA 92627	N/A	PC	PROGRAM SUPPORT	15,000
SOUTH CO OUTREACH 7 Whatney Ste B Irvine,CA 92618	N/A	PC	PROGRAM SUPPORT	15,000
ST MICHAELS ABBEY 31641 LA NOVIA AVE SAN JUAN CAPISTRRA,CA 92675	N/A	PC	PROGRAM SUPPORT	10,000
St John Vianney 314 Marine Ave Newport Beach,CA 92662	N/A	PC	PROGRAM SUPPORT	2,600
St Margaret Of Scotland Episcopal School 31641 LA NOVIA AVE SAN JUAN CAPISTRRA,CA 92675	N/A	PC	PROGRAM SUPPORT	10,000
Strength in Support 23461 South Pointe Drive STE 310 Laguna Hills,CA 92653	N/A	PC	PROGRAM SUPPORT	20,000
Sun Valley Ctr For The Arts 191 5th St E Ketchum,ID 83340	N/A	PC	PROGRAM SUPPORT	1,000
Surfing Heritage 110 CALLE IGLESIA SAN CLEMENTE,CA 92672	N/A	PC	PROGRAM SUPPORT	75,000
Surfrider Foundation 942 CALLE NEGOCIO SUITE 350 SAN CLEMENTE,CA 92673	N/A	PC	PROGRAM SUPPORT	10,000
The Colleagues 3312 Pico Blvd Santa Monica,CA 90405	N/A	PC	PROGRAM SUPPORT	2,000
THE LITERACY PROJECT 124 Tustin Ave Ste 103 NEWPORT BEACH,CA 92663	N/A	PC	PROGRAM SUPPORT	40,000
Tiger Woods 121 Innovation Drive Ste 150 Irvine,CA 92617	N/A	PC	PROGRAM SUPPORT	20,000
Total . . . . . ▶ 3a				1,481,900



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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
TROUT UNLTD CONSERVATION FU 121 INNOVATION DRIVE Irvine, CA 92617	N/A	PC	PROGRAM SUPPORT	500
UCI Foundation 555 Aldrich Hall Irvine, CA 92697	N/A	PC	PROGRAM SUPPORT	10,000
UNIV CA LOS ANGELES 5151 State University Drive LOS ANGELES, CA 90032	N/A	PC	PROGRAM SUPPORT	2,000
UNIV OF NH 105 main Street Durham, NH 03824	N/A	PC	PROGRAM SUPPORT	500
UNIV OF NORTH GA 82 College Circle Dahlonega, GA 30597	N/A	PC	PROGRAM SUPPORT	500
UNIVERSITY OF ARKANSAS 425 Administration building Fayetteville, AR 72701	N/A	PC	PROGRAM SUPPORT	500
University of Califo Santa Cruz 1156 high street santa cruz, CA 95064	N/A	PC	PROGRAM SUPPORT	500
University of California Berkeley 200 California Hall 1500 berkeley, CA 94720	N/A	PC	PROGRAM SUPPORT	1,000
University Of California San Diego 9500 Gilman Dr La Jolla, CA 92093	N/A	PC	PROGRAM SUPPORT	500
University Of California Santa Barbara 5221 Cheadle Hall Santa Barbara, CA 93106	N/A	PC	PROGRAM SUPPORT	2,000
University Of Florida 201 Crister Hall Gainesville, FL 32611	N/A	PC	PROGRAM SUPPORT	500
University Of Georgia THE UNIVERSITY OF GEORGIA ATHENS, GA 30602	N/A	PC	PROGRAM SUPPORT	500
University Of La Verne 1950 3rd st la verne, CA 91750	N/A	PC	PROGRAM SUPPORT	500
University of Montana 32 Campus Drive Missoula, MT 59812	N/A	PC	PROGRAM SUPPORT	1,000
University Of Pennsylvania 3401 Walnut Street Suite 440A Philadelphia, PA 19104	N/A	PC	PROGRAM SUPPORT	1,000
<b>Total</b> . . . . . ▶ <b>3a</b>				1,481,900



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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
University Of Southern California 1200 N State St 6610 LOS ANGELES,CA 90033	N/A	PC	PROGRAM SUPPORT	1,000
UNIVERSITY OF SOUTHERN INDI 8600 UNIVERSITY BLVD EVANSVILLE,IN 47712	N/A	PC	PROGRAM SUPPORT	2,000
University Of WisconsinWhitewater 800 W Main Street Whitewater,WI 53190	N/A	PC	PROGRAM SUPPORT	500
Valencia Community College 190 South Orange Avenue Orlando,FL 32801	N/A	PC	PROGRAM SUPPORT	500
Wood River YMCA 101 Saddle Creek Road Ketchum,ID 83340	N/A	PC	PROGRAM SUPPORT	25,000
<b>Total . . . . . ▶ 3a</b>				1,481,900



## TY 2015 Accounting Fees Schedule

**Name:** CROUL FAMILY FOUNDATION

**EIN:** 20-1222760

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	25,495	12,747	12,748	12,748



**Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.**

## **TY 2015 Depreciation Schedule**

**Name:** CROUL FAMILY FOUNDATION

**EIN:** 20-1222760



**TY 2015 Investments Corporate Bonds Schedule****Name:** CROUL FAMILY FOUNDATION**EIN:** 20-1222760

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
M. STANLEY - VARIOUS-EXHIBIT 5	2,867,679	2,867,679
M. STANLEY - VARIOUS-EXHIBIT 6	243,586	243,586



**TY 2015 Investments Corporate Stock Schedule****Name:** CROUL FAMILY FOUNDATION**EIN:** 20-1222760

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
M. STANLEY - VARIOUS-EXHIBIT 1	2,228,620	2,228,620
M. STANLEY - VARIOUS-EXHIBIT 2	1,247,886	1,247,886
M. STANLEY - VARIOUS-EXHIBIT 3	7,124,182	7,124,182
M. STANLEY - VARIOUS-EXHIBIT 4	312,500	312,500



**TY 2015 Investments - Other Schedule**

**Name:** CROUL FAMILY FOUNDATION  
**EIN:** 20-1222760

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
BEACH POINT TOTAL RETURN	FMV	0	0
MS CREDIT PTRS OFFSHORE	FMV	261,044	261,044
MS EMERGING PRIVATE MARKET	FMV	416,755	416,755
MS GLOBAL DISTRESSED	FMV	557,667	557,667
NATURAL RESOURCES PARTHERS LP	FMV	1,939	1,939
RCP FUND I, LP	FMV	0	0
SELECTINVEST MULTISTRATEGY LTD	FMV	62,935	62,935
YORK CREDIT OPPORTUNITIES	FMV	1,934,804	1,934,804
OCM MEZZANINE FUND II, LP	FMV	175,077	175,077
OAKTREE PRIVATE INVESTMENT FUN	FMV	392,636	392,636
PIMCO BRAVO FUND SPECIAL ONSHO	FMV	132,758	132,758
PIMCO BRAVO FUND OFFSHORE FEED	FMV	2,600	2,600
MILLENIUM STRATEGIC CAPITAL LT	FMV	1,452,641	1,452,641
MS GLOBAL SEC. OPP. FUND II	FMV	369,387	369,387
PIMCO BRAVO FUND II SP ONSHORE	FMV	332,237	332,237
PIMCO BRAVO FUND OFFSHORE III	FMV	7,653	7,653
PIMCO BRAVO II OFFSHORE AIV I	FMV	120,670	120,670
BLACKSTONE REAL ESTATE FUND I	FMV	542,830	542,830
RIVERVIEW STRATEGIC OPP FUND I	FMV	449,507	449,507
BLACKSTONE REAL ESTATE INC II	FMV	1,005,463	1,005,463
PETERSHILL II OFFSHORE LP	FMV	313,579	313,579
N. HAVEN CR PRTNRS OFFSHORE	FMV	154,874	154,874



**TY 2015 Other Assets Schedule****Name:** CROUL FAMILY FOUNDATION**EIN:** 20-1222760

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
NET INTANGIBLE ASSETS	20,107	20,107	20,107
DUE FROM DIRECTOR	950	0	0
RCP FUND I, LP	0	-5,544	0



**TY 2015 Other Expenses Schedule****Name:** CROUL FAMILY FOUNDATION**EIN:** 20-1222760

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEE	150			
BUSINESS REGISTRATION FEES	416			
INVESTMENT EXPENSES	42,659	42,659	42,659	
MGMT FEES	149,650	149,650	149,650	
UNRELATED BUSINESS EXPENSE	15,317			



**TY 2015 Other Income Schedule****Name:** CROUL FAMILY FOUNDATION**EIN:** 20-1222760

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
OTHER INVESTMENT INCOME	51,872	51,872	51,872



**TY 2015 Other Increases Schedule****Name:** CROUL FAMILY FOUNDATION**EIN:** 20-1222760

Description	Amount
RECONCILE DIFF BETWEEN BK/TAX PER K-1	-92,246
CHANGE IN FMV OF INVESTMENTS	-2,611,162



**TY 2015 Other Professional Fees Schedule****Name:** CROUL FAMILY FOUNDATION**EIN:** 20-1222760

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ADVISOR FEES	37,070			37,070



## TY 2015 Taxes Schedule

**Name:** CROUL FAMILY FOUNDATION

**EIN:** 20-1222760

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	7,151	7,151	7,151	
INCOME TAXES	58,914			



Schedule B

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

Department of the Treasury  
Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

2015

Name of the organization	Employer identification number
CROUL FAMILY FOUNDATION	20-1222760

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input checked="" type="checkbox"/> 501(c)( 3 ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.  
**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . . ▶ \$ \_\_\_\_\_

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



<b>Name of organization</b> CROUL FAMILY FOUNDATION	<b>Employer identification number</b> 20-1222760
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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	JACK V CROUL	\$ 1,000,000	Person <input checked="" type="checkbox"/>
	1901 BAYADERE TERRACE		Payroll <input type="checkbox"/>
	CORONA DEL MAR, CA 92625		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )







Name of organization CROUL FAMILY FOUNDATION	Employer identification number 20-1222760
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed

(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, and ZIP 4	Relationship 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		
	Transferee's name, address, and ZIP 4	Relationship 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		
	Transferee's name, address, and ZIP 4	Relationship 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		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	
	_____	_____	
	--	_____	
	_____	_____	