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

2015

OMB No 1545-0052

Department of the Treasury Internal Revenue 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

For ca	lenda	r year 2015, or tax year beginning	, 2015	, and ending			
GRAF	IAM	FOUNDATION			Α	Employer identification nui 31–1497257	nber
P.O.	BO	X 12489 LE, TN 37912-0489			В	Telephone number (see inst	ructions)
		- ,			С	If exemption application is	pending, check here
G Ch	eck a	il that apply Initial return	Initial return of a form	ner public charity	D	1 Foreign organizations, chec	ck here
		Final return	Amended return			2 Foreign organizations meet	L
H Ch	eck ty	Address change /pe of organization. X Section 5	X Name change 01(c)(3) exempt private t	foundation	1	here and attach computation	
11 011		ection 4947(a)(1) nonexempt charitable			E	If private foundation status	was terminated
			counting method. X C	ash Accrual	1	under section 507(b)(1)(A)	, check here . ►
(tro		II, column (c), line 16)	Other (specify)		F	If the foundation is in a 60	
Part	<u> </u>	587, 974. (Part nalysis of Revenue and	I, column (d) must be or	_ 	<u> </u>	under section 507(b)(1)(B)	
	E co sa	xpenses (The total of amounts in plumns (b), (c), and (d) may not neces arily equal the amounts in column (a) ee instructions).)	(a) Revenue and expenses per books	(b) Net investmer income	nt	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc, received (attach schedule)	235,000.				
	2	Ck ► If the foundation is not required to attach Sch	3				
	3	Interest on savings and temporary cash investments .	400.	40	00.	400.	
	4	Dividends and interest from securities 3 Gross rents	10.001	10.00	\ 1	10 001	
	1 - :	Net rental income or (loss) 13, 102	18,091.	18,09	<u>, T '</u>	18,091.	
R	6 6	Net gain or (loss) from sale of assets not on line 10					
E V	_'	Gross sales price for all assets on line 6a .	<u> </u>				
Ë	8	Capital gain net income (from Part IV, line 2) Net short-term capital gain	.}				
ü	9	Income modifications					
E	10 a	Gross sales less returns and					
	l t	Less Cost of		<u> </u>			
		goods sold . [Gross profit or (loss) (attach schedule).		<u> </u>			
	11	Other income (attach schedule)				<u> </u>	
	12	Total. Add lines 1 through 11	252 401	18,49	1	10 401	
	13	Compensation of officers, directors, trustees, etc	253,491. 0.	18,49	21.	18,491.	
	14	Other employee salaries and wages					
	15	Pension plans, employee benefits				7	
A D	1	Legal fees (attach schedule) See St 1 Accounting fees (attach sch)	1,065.	K	<u>=[/</u>		
M !	1	Other prof. fees (attach sch) .				 	
OI	17	Interest		THE OCT I	7	2016	
P S E T R R	18	Taxes (attach scheduleXsee instrs)			•	10	
E Ť R A T	19	Depreciation (attach schedule) and depletion	7,817.	07/81	7/1	11	
NY	20	Occupancy ,	7,017.	0.557.01			
GÉ	21	Travel, conferences, and meetings.					
A E N X D P	22	Printing and publications Other expenses (attach schedule)	`[· · · · · · · · · · · · · · · · · · ·			
E		See Statement 2	5,021.	4,98	39.		
AND ENSES	24	Total operating and administrative	1				
Š	25	expenses. Add lines 13 through 23	13,903. 175,550.	12,80	16.		175,550.
	26	Total expenses and disbursements.					
	27	Add lines 24 and 25 Subtract line 26 from line 12:	189,453.	12,80	16.	0.	175,550.
		Excess of revenue over expenses					7
		and disbursements	64,038.	<u> </u>			
	1	Net investment income (if negative, enter -0-) .		5,68	35.	10 401	
		Adjusted net income (if negative, enter -0-) .				18,491.	

Par	t II.	Balance Sheets column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest-bearing	(a) DOOK Value	(b) DOOK Value	(c) I all Ivial Net Value
	2	Savings and temporary cash investments	319,769.	391,274	. 391,274.
	3		319, 109.	371,214	331,214.
]]	Less: allowance for doubtful accounts			
	1	Pledges receivable			+
	~	Less: allowance for doubtful accounts			
	5	Grants receivable			+
	6	Receivables due from officers, directors, trustees, and other			
	ľ	disqualified persons (attach schedule) (see instructions).	200.		
	7	Other notes and loans receivable (attach sch)			
A		Less: allowance for doubtful accounts ▶			
š	8	Inventories for sale or use.			
A S E T	9	Prepaid expenses and deferred charges			
Ś	10:	a Investments – U.S. and state government obligations (attach schedule).			
	1	b investments — corporate stock (attach schedule)			
	,	c Investments — corporate bonds (attach schedule) .			
	11	Investments – land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach schedule)			
	i i	Investments – mortgage loans			-
	13	`			
	14	200/0001			
		Less: accumulated depreciation (attach schedule) See Stmt .3 - 38,298.	229,519.	221,702	. 196,700.
		Other assets (describe Total assets (to be completed by all filers — see the instructions. Also, see page 1, item I)	549,488.	612,976	. 587,974.
	17				
I A	18	` ` `			7
B	19	 			7
- !	20	Loans from officers, directors, trustees, & other disqualified persons			7
Ī	21	Mortgages and other notes payable (attach schedule)			
Ţ	22	Other liabilities (describe See Statement 4)	2,625.	2,075	<u>.</u>]
Ë	23	Total liabilities (add lines 17 through 22)	2,625.	2,075	
3	23	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.	2,023.	2,013	†
NF	24	Unrestricted	546,863.	610,901	_
E U	25	Temporarily restricted .			_
ΔD	26	Permanently restricted			_
A B S A L T A		Foundations that do not follow SFAS 117, check here . And complete lines 27 through 31.	1		
EL	27	Capital stock, trust principal, or current funds .		_ 	
SN	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
o E	29	Retained earnings, accumulated income, endowment, or other funds			
RS	30	Total net assets or fund balances (see instructions) .	546,863.	610,901	<u>. </u>
	31	Total liabilities and net assets/fund balances (see instructions).	549,488.	612,976	
Par	t III I	Analysis of Changes in Net Assets or Fund Balance			<u>· L </u>
		il net assets or fund balances at beginning of year – Part II, colur		iree with	
'	end-	of-year figure reported on prior year's return).	· · · · · · · · · · · · · · · · · · ·	1	546,863.
2		er amount from Part I, line 27a		2	
3	Other	increases not included in line 2 (itemize)		3	
4	Add	lines 1, 2, and 3		4	610,901.
5		eases not included in line 2 (itemize)		5	
6	Tota	Il net assets or fund balances at end of year (line 4 minus line 5)	- Part II, column (b), li	ne 30 . 6	610,901.

Form !	990-PF (2015) GRAHAM FO	UNDATION			3	1-1497257	Page 3
Part		Losses for Tax on Investmen	t Income				
	(a) List and describe 2-story brick warehous	e the kind(s) of property sold (e.g., r se, or common stock, 200 shares ML	eal estate, .C Company)	(b) How acq P — Purch D — Donat	ase	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	N/A				$\neg \neg$		
b							
С							
d							
е							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal			(h) Gain or (e) plus (f) m	
a							
b				1			
С							
d							
е		<u>[</u>					
		ing gain in column (h) and owned b		69		(I) Gains (Col.	
	(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			in minus col. (k), b n -0-) or Losses (fr	
a							
b							
С							
d							
e			 				
2 (Capital gain net income or (ne	t capital loss) If gain, also	enter in Part I, line 7 er -0- in Part I, line 7	[[
		L _		· · L	2		
3 1	let short-term capital gain or	(loss) as defined in sections 1222(5)	and (6):	1	ľ		
ĺ	f gain, also enter in Part I, line	e 8, column (c) (see instructions). If	(loss), enter -0-	1	١ .		
	n Part I, line 8		d Tours Mot Investor		3		
Part		r Section 4940(e) for Reduce			me		
(For op	tional use by domestic private it	oundations subject to the section 4940(a) tax on het investment inc	onie)			
lf sect	on 4940(d)(2) applies, leave t	this part blank.					
14/ 46					-	Πv	€ No.
		ction 4942 tax on the distributable at	, ,	ase penou	۲.	∐Yes	X No
		alify under section 4940(e). Do not co					
		each column for each year, see the ins		entries.			
	(a) Base period years	(b) Adjusted qualifying distributions	(c) Net value of	i		(d) Distribution	ratio
С	alendar year (or tax year beginning in)	a salara danny mg arama anama	noncharitable-use ass	ets	(col. ((b) divided by a	ol. (c))
		 		0.55			0 000645
	2014	115,630.	 	2,065.			0.302645
	2013	243,340.		2,771.			0.504049
	2012	179,001.		,224.			0.596225
	2011	108,045.		408.			0.708919
	2010	43,800.	66	,142.			0.662212
	Takal at luar 1 - aluman (d)			1	,		0 774050
	otal of line 1, column (d).		•••	·	2		2.774050
3 /	Average distribution ratio for the foundation of the foundation of the foundation is the foundation of	ne 5-year base period — divide the to n has been in existence if less than	otal on line 2 by 5, or by th 5 vears	ne	3		0.554810
	differ of years the foundation	in has been in existence in less than	o youru .	<u> </u>	-		0.334010
4 E	Inter the net value of nonchar	table-use assets for 2015 from Part	X. line 5		4		454,019.
			•	-	$\overline{}$		
5 N	fultiply line 4 by line 3 .			.]	5		251,894.
e =	inter 1% of net investment in	come (1% of Part I, line 27b)]	6		c 7
6 E	inter 170 of thet hivestilletif IUC	come (1 % or rait), line 2/0)	•	}-			57.
7 /	Add lines 5 and 6 .				7		251,951.
•				-			201, 201.
8 E	inter qualifying distributions fr	om Part XII, line 4		Į	8		175,550.
li F	line 8 is equal to or greater that Part VI instructions	n line 7, check the box in Part VI, line	1b, and complete that part u	sing a 1% t	tax rat	te. See the	

Pai	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see in	nstruction	s)		
	a 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 instrs)				
ŀ	Domestic foundations that meet the section 4940(e) requirements in Part V,	1 [114.
	check here. ► ☐ and enter 1% of Part I, line 27b				
•	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)	1			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
_	foundations only. Others enter -0-).	2			0.
3	Add lines 1 and 2 .	3			114.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5		3	114.
6	Credits/Payments:		_		
a	a 2015 estimated tax pmts and 2014 overpayment credited to 2015 . 6 a	Ì			
t	Exempt foreign organizations – tax withheld at source	İ			
C	Tax paid with application for extension of time to file (Form 8868) 6c 91.	- 1			
C	Backup withholding erroneously withheld 6d	ł			
7	Total credits and payments Add lines 6a through 6d	7			91.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed .	9			23.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . •	10			
_11		11			
Par	t VII-A Statements Regarding Activities				
1 a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?	•	1 a		_X_
Ł	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?		1 b		X
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.				
c	Did the foundation file Form 1120-POL for this year?		1 c		Х
c	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation . >\$ 0. (2) On foundation managers >\$	<u> </u>			•
E	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers.				ļ
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		Х
_	If 'Yes,' attach a detailed description of the activities.	•			
	·				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		3		Х
4 2	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4 a	X	
	of Yes,' has it filed a tax return on Form 990-T for this year?		4 b	X	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If 'Yes,' attach the statement required by General Instruction T.				- ^
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
_	By language in the governing instrument, or				
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 		6	Х	ĺ
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV		7	X	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	TN				
t	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? If 'No,' attach explanation .		8 b	х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4	1942(1)(5)			
9	for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete	Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names				
	and addresses See Statement		10	X	
BAA		۲o	rm 99()-PF (2	.015)

	rt VII-A Statements Regarding Activities (continued)	<u> </u>	71231		
	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 pers advisory privileges? If 'Yes,' attach statement (see instructions)	on had	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemptio Website address • N/A	n application	? . 13	Х	
14	The books are in care of RAY WARREN Telephone	no. • (8	65) 693	<u>-700</u>	0
15	Located at P.O. BOX 12489 KNOXVILLE TN ZIP + 4 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	3 <u>7912</u> . ► 15	<u>N</u> /7	<u></u>	∏ N/A
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority bank, securities, or other financial account in a foreign country?	ـــــــا	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country				
Pai	t 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
1 a	During the year did the foundation (either directly or indirectly):				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X	No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?		No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X	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)?	Yes X	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.)	Yes X	No		
ł	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)	?	. 1b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here	►			
(Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?		. 10		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):				
á	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?	Yes X	No		
	If 'Yes,' list the years ► 20 , 20 , 20 , 20		j		
į	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942) all years listed, answer 'No' and attach statement — see instructions.)	(a)(2) (a)(2) to	2 b	N	/A
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years	nere			
	► 20 , 20 , 20	10.01			
3 8	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X	No		
i	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 approve 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)	d	. 3h	N	/A
4 :	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4 a		Х
į	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?		. 4b		X
BAA			Form 99	0-PF ((2015)

Part VII.E. Statements Regarding Activities for Which Form 4720 May Be Required (continued)	Form 990-PF (2015) GRAHAM FOUNDATION			31-14	97257 Page
(3) Provide a grant to an unput of any open complete public election (see section 4955); or to carry (3) Provide a grant to an individual for trend study of the registron of the section 4950 ((4)(A)) (see instructions) (4) Provide a grant to an individual for trend study of the section 4950 ((4)(A)) (see instructions) (5) Provide a grant to an individual for trend study of the section 4950 ((4)(A)) (see instructions) (6) Provide a grant to an organization other than a chantable, etc. organization described in section 4950((4)(A)) (see instructions) (6) Provide for any purpose other than reliquous, chartable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals? (6) Provide for any purpose other than reliquous, chartable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals? (6) If any answers is "Yes" to Squ'l, 5, did any of the transactions fall to qualify under the exceptions described in Regulations, section 53,445 for in a current notice regarding desaster assistance (see instructions) Organizations relying on a current notice regarding desaster assistance check here (a) It has answer is "Yes" to Squ'l, does the foundation claims of the foundation cannot be fall to foundation or the law because il maintained expenditure responsibility for the grant? If "Yes is "No It "Yes" to No It			n 4720 May Be Req	uired (continued)	
(3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an individual for travel, study, or other similar purposes? (5) Provide a grant to an individual for travel, study, or other similar purposes? (6) Provide a grant to an individual for travel, study, or other similar purposes? (7) Provide a grant to an individual for travel, study, or other similar purposes? (8) Provide for any purpose other than religious, charitable, etc. organization described in section 345(0)(4)(7) (5) and any of the transactions fail to guilify under the exceptions described in Regulation section 33495 or of the prevention of cruely to children or animals? (8) Provide for any purpose other than religious, charitable, scientific, letrary, or educational regulator in Section 33495 or of the prevention of current notice regarding disaster assistance of the sameware is Yes to guestion 53(4), does the foundation claim exemption from the tas because it maintained expenditure responsibility for the grants. (9) Fight and the statement required by Regulations section 33 4945 or indirectly, to pay premiums on a personal benefit contract. (8) Abd the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract. (8) A travel to 65, the Form 8370 (9) A travel to 65, the Form 8370 (9) A travel to 65, the Form 8370 (1) A travel to 65, the Form 8370 (1) Travel to 65, the Form 8370 (1) Travel to 65, the Form 8370 (2) A travel transaction? (3) A travel travel to the transaction? (4) A travel transaction? (5) Travel to 65, the Form 8370 (6) Travel to 65, the Form 8370 (7) Travel to 65, the Form 8370 (8) A travel transaction? (9) Compensation of five highest-paid employees (their hina those included on line 1 - see instructions). If none	- · ·	•			.
on, directly or indirectly, any voter registration drive? 3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an individual for travel, study, or other similar purposes? (5) Provide for any purpose other than religious, charlatable, etc., organization described in section 4945(0)(4)(5) (5) cere instructions? (5) Provide for any purpose other than religious, charlatable, seematide, literary, or edicational purposes, or for the prevention of cruely to children or animable? (6) Provide for any purpose other than religious, charlatable, seematide, literary, or edicational purposes, or for the prevention of cruely to children or animable? (8) If yes a comparison section 53,484-5 or in a current religious disaster assistance check them. (9) Criganizations series assistance section of disaster assistance sections seems to a personal terminal contract of the foundation of the substance of the section of the substance sections of the substance of the substance check them. (1) Yes, attach the statument required by Regulations section 53,4945-5(d) (2) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? (3) A religious of the foundation will be substance check them. (4) If Yes (2) A, the Form 8377 (5) A religious of the student required by Regulations section 53,4945-5(d) (6) List all officers, directors, trustees, foundation aparty to a prohibited tax sheller transaction? (4) Name and address of each employee power of the foundation of the provision of the provisio	(1) Carry on propaganda, or otherwise attem	pt to influence legislation	on (section 4945(e))?	∐ Yes [X	No
(d) Provide for any purpose other than a charitable, etc, organization described in section \$945(0)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, iterary, or educational purposes, or for the prevention of cruelty to children or animals? (b) If any answer is "set to Sa(1)-60, id all my of the transactions fatto qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here (ii) If he answer is "set to quastion 53.40, does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? (iii) Yes, "attach the statement required by Regulations section 53.494-5(d) 5a Die the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?. (b) If the foundation during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? (b) If the foundation during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? (b) If the foundation during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? (b) If the foundation managers and their compensation (A)	(2) Influence the outcome of any specific put on, directly or indirectly, any voter registr	olic election (see sectionation drive? .	n 4955); or to carry	Yes X	No
in section 4945(g)(4)(A)? (See instructions) (S) Provide for any purposes other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (B) If any answers is 'Na's to Said,' (S), it day not first transactions fat to qualify under the exceptions of the control of the transactions fat the control of the	(3) Provide a grant to an individual for travel	, study, or other sımılar	purposes? .	Yes X	No
educational purposes, or for the prevention of cruelty to children or ammials? Ves X No	(4) Provide a grant to an organization other to in section 4945(d)(4)(A)? (see instruction	than a charitable, etc, o s) .	rganization described	Yes X	No
Compensation of five highest-paid employee (a) Name and address of each employee pand nore than \$50,000	(5) Provide for any purpose other than religious educational purposes, or for the prevention	ous, charitable, scientifion of cruelty to children	c, literary, or or animals?	Yes X	No
Organizations relying on a current notice regarding disaster assistance check here c if the answer is Yes' to question 53(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If Yes', statish the statement required by Regulations section 53 4945-5(3) 6.5 Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?. b Did the foundation, during the year, receive any funds, directly or indirectly, on a personal benefit contract?. b Did the foundation during the year, pay premiums, directly or indirectly, on a personal benefit contract?? 7. At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction? 7. Types No 6.b X We No 6.b X We No 6.b X We No 6.b X If Yes' to 6b, file Form 8870 7. At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction? No No 7. A Type No 7. A Type No 8. No	b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or if (see instructions)?	the transactions fail to n a current notice regar	qualify under the excep ding disaster assistance	otions	5h N/A
c If the answer is "Yes" to question 5x(4), ideas the foundation claim exemption from the lax because it maintained expenditure responsibility for the grant? If "Yes", attach the statement required by Regulations section \$3.4945-5(d) 6 a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?. b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?. b Did the foundation during the year, was the foundation a party to a prohibited tax shelter transaction? Yes No bit "Yes," did the foundation receive any proceeds or have any not norter attributable to the transaction? N/A 7b bit "Yes," did the foundation for the foundation managers and their compensation (see instructions). Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see instructions).	•	arding disaster assistan	ce check here .		
6 a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	c If the answer is 'Yes' to guestion 5a(4), does	the foundation claim ex		N/A ∏Yes □	No
on a personal benefit contract? bid the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7 a At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction? 8 and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (a) Name and address (a) Name and address (b) Title, and average for house prewed devoted to position (c) Compensation (d) Contributions to expensation 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 for the paid more than \$50,000	·	, ,	5-5(d)		
# Yes' to 6b. file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	6 a Did the foundation, during the year, receive a on a personal benefit contract?		lirectly, to pay premium	s Yes X	No
7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? No bill Yes, did the foundation receive any proceeds or have any net income attributable to the transaction? No 7 billinformation 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 (b) Title, and average devoted to position for the paid, enter -0. P. o. BOX 12489 C. o. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	b Did the foundation, during the year, pay prem	nums, directly or indirec	ctly, on a personal bene	fit contract?	. 6b X
B II **Yes, did the foundation receive any proceeds or have any not income attributable to the transaction? N/A 7b					
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 (b) Title, and average devoted to position (c) Compensation (fine paid, enter -0) (d) Contributions to enter allowances of the paid of the paid, enter -0) (e) Expense account, other allowances of the paid of the paid, enter -0) (e) Expense account, other allowances of the paid of the paid, enter -0) (e) Expense account, other allowances of the paid of the paid, enter -0) (e) Expense account, other allowances of the paid of the paid, enter -0) (e) Expense account, other allowances of the paid of the pai					
TIM A. GRAHAM P. O. BOX 12489 RNOXVILLE, TN 37912 2 Compensation of five highest-paid employees (other than those included on paid more than \$50,000 (a) Name and address of each employee benefit plans and deferred compensation (through plans and deferred plans and plans					
1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title, and average devoted to position (c) Compensation employee benefit plans and deferred compensation. TIM A. GRAHAM Trustee 2.00 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 None (b) Title, and average devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation. (d) Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE: (e) Expense account, other allowances of each employee devoted to position None Total number of other employees paid over \$50,000	Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	Employees,
(a) Name and address (b) Title, and average devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation of the 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 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation of tive highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE' (c) Compensation (d) Contributions to employee paid more than \$50,000 (d) Title, and average hours per week devoted to position (e) Compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee the plans and deferred compensation (d) Contributions to employee the plans and deferred compensation (d) Contributions (d) Contributions (d) Contributions (d) Contributio		on managers and their	compansation (see incl	ructions)	
(a) Name and address by the devoted to position devoted to positio	List dii officers, directors, trastees, toditadit				(e) Expense account
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EXPONSIBLE, TN 37912 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 hours per week devoted to position (b) Title, and average hours per week devoted to position (c) Compensation employee benefit plans and deferred compensation (o) Expense account, other allowances (o) Expense account	TIM A. GRAHAM	Trustee	0.	0.	0
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(a) Name and address of each employee paid more than \$50,000 None Total number of other employees paid over \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances					
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None Total number of other employees paid over \$50,000	(a) Name and address of each employee				
None	paid more than \$50,000	hours per week	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	employee benefit	other allowances
Total number of other employees paid over \$50,000		devoted to position			
	None				
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	t VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
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
Noi		
<u> </u>	·	
		JI
		1
		L
Tota	number of others receiving over \$50,000 for professional services	0
	t IX-A Summary of Direct Charitable Activities	<u> </u>
organ	e foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of zations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	N/A	
-	****	
2		
_	~	
	~	
3		
3	~	
_		
4	~	
) 	
Par	TIX-B Summary of Program-Related Investments (see instructions)	
Desc	ribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1		
	N/A	
2		
All (other program-related investments. See instructions.	
3		
3		
	Add lines 1 through 3	0

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes: a Average monthly fair market value of securities 1 a **b** Average of monthly cash balances . 1 b 264,233. c Fair market value of all other assets (see instructions) 1 c 196,700. 460,933 1 d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1 e 0 2 Acquisition indebtedness applicable to line 1 assets . 3 460,933 Subtract line 2 from line 1d. Cash deemed held for charitable activities. Enter 1-1/2% of line 3 6,914 (for greater amount, see instructions) 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 454,019. Minimum investment return. Enter 5% of line 5 6 22,701. Part XI | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and do not complete this part.) and certain foreign organizations check here Minimum investment return from Part X, line 6 1 22,701. 2a Tax on investment income for 2015 from Part VI, line 5 2a 114. 2b b income tax for 2015 (This does not include the tax from Part VI) c Add lines 2a and 2b 2 c 114. 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 22,587. Recoveries of amounts treated as qualifying distributions. 4 Add lines 3 and 4 5 22,587. 6 Deduction from distributable amount (see instructions) 7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 22,587. Part XII | Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 . . . 1 a 175,550 **b** Program-related investments - total from Part IX-B . 1 b 2 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes. Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) 3 a 3 b **b** Cash distribution test (attach the required schedule) 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 175,550 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

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.

Adjusted qualifying distributions. Subtract line 5 from line 4

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175,550.

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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				22,587.
2 Undistributed income, if any, as of the end of 2015:				
a Enter amount for 2014 only			0.	
b Total for prior years 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010 . 39, 495.				
b From 2011 . 100, 427.				
c From 2012 164,037.				
d From 2013 216, 466.				
e From 2014 96, 527.				
f Total of lines 3a through e	616,952.			
4 Qualifying distributions for 2015 from Part				
XII, line 4 ► \$175,550.			0.	
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus (Election required – see instructions).	0.			22,587.
d Applied to 2015 distributable amount				22,301.
e Remaining amount distributed out of corpus	152,963.			0.
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			
6 Enter the net total of each column as indicated below: a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	769,915.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable amount — see instructions		0.		
e Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016				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).	0			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	39,495			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	730,420			
10 Analysis of line 9.				
a Excess from 2011 100, 427.				
b Excess from 2012 164,037.				
c Excess from 2013 216,466.				
d Excess from 2014 96,527.		1		
e Excess from 2015 152, 963.				Form 990-PF (2015)

See Statement for Line 2a

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3 Grants and Contributions Paid During the Ye	ar or Approved for Fut	ure Paymen	it	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of		Amount
Name and address (home or business)	substantial contributor	recipient		<u> </u>
a Paid during the year				
See Statement 7			}	
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Total	;· · ·	,	. ► 3a	175,550.
b Approved for future payment	!			ļ
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	L		<u> </u>	
Total			> 3b	

Part XVI-A Analysis of Income-Producing Activities

inter gross amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by	section 512, 513, or 514	(e)
1. Program convice revenue:	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions.)
1 Program service revenue:			code		
a <u>NONE</u>	 				
b			 -	 }	
c					
d			 		
e			 -		 _
¹ <u></u>	 		 		
g Fees and contracts from government agencies			 		
2 Membership dues and assessments	L		 		
3 Interest on savings and temporary cash investments			ļ ļ		400.
4 Dividends and interest from securities	<u> </u>				
5 Net rental income or (loss) from real estate:	<u> </u>		 		
a Debt-financed property	ļ		 _		
b Not debt-financed property	531110	13,102.	<u> </u>		
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:			l		
a	<u> </u>				
b					
С	1				
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		13,102.			400.
13 Total. Add line 12, columns (b), (d), and (e)				13	13,502.
See worksheet in line 13 instructions to verify calculate	ons.)				_

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.)
N/A	
	
	

Form 990-PF (2015) GRAHAM FOUNDATION 31-1497257 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

describ	e organization direct bed in section 501(c) g to political organiz	of the Code (o	ngage in any of the f ther than section 501	ollowing with (c)(3) organiz	any other organizations or in section !	on 527,		Yes	No
a Transfe	ers from the reportin	ig foundation to	a noncharitable exer	npt organizati	ion of.				Ì
(1) Ca	sh					'	1 a (1)		X
(2) Ot	her assets .		•				1 a (2)		X
b Other t	transactions:								
(1) Sa	les of assets to a no	ncharitable exe	mpt organization				1 b (1)	1	Х
(2) Pu	rchases of assets fro	om a noncharita	ble exempt organiza	tion			1 b (2)		X
(3) Re	ntal of facilities, equ	iipment, or othe	r assets				1 b (3)		X
(4) Re	imbursement arrang	ements	•				1 b (4)		X
(5) Lo.	ans or loan guarante	es .					1 b (5)		X
(6) Pe	rformance of service	s or membersh	ip or fundraising solid	citations			1 b (6)		X
			sts, other assets, or p		· ·		1c		<u>X</u>
o onann	g or racingoo, oquip.	morne, manning me	7.0, 0.1.10, 000010, 01 p	a.a. cp.c, cc					
d If the a the goo any tra	nswer to any of the ds, other assets, or so insaction or sharing	above is 'Yes,' ervices given by arrangement, si	complete the following the reporting foundation to the column (d) the	ng schedule. On If the foundate value of the	Column (b) should alw ation received less than goods, other assets,	vays show the fair n i fair market value in or services received	narket vali d.	ue of	
(a) Line no.	(b) Amount involved	(c) Name (of noncharitable exempt org	anization	(d) Description of tran	sfers, transactions, and s	haring arran	gement	s
N/A			·						
			-, -					-	
									
									
		 							
		 							
									
		 							
		 							
									
		 							
		 							
		1							
		1			· · · · · · · · · · · · · · · · · · ·				
		<u> </u>							
describ	ed in section 501(c)	of the Code (of	d with, or related to, on ther than section 501	e or more tax-e (c)(3)) or in se	exempt organizations ection 527?		Yes	X	No
	complete the follow	. 		:					
	a) Name of organiza	tion	(b) Type of o	rganization	(c	Description of rela	tionship		
N/A									
Sign correct	penalties of perjury, I decl t, and complete Declaration	are that I have exam on or preparer (other	ined this return, including ac than taxpayer) is based on a	companying sched all information of w	dules and statements, and to which preparer has any know	the best of my knowledge ledge	May the if	RS disci	uss
Here	$\langle \omega \rangle$		1/0	14/16	Trustee		preparer s	shown b	elow i
Sign	nature of officer or trustee		Date		Title		X	Yes	No
	Print/Type preparer's n	ame	Preparer's signate	Re	Date /	Check X if	PTIN		لتنب
D=1:1			Jahr To		9/30/16		P01062	ກາດ	
Paid	Van T. Elki			kins	1 / 30/18			029	
Preparer	_		and Associat			Firm's EIN ► 62-10	17975		
Use Only	_		Street #2150	<u>'</u>					
	<u></u>	Knoxville,	TN 37929			Phone no (865)			
BAA							Form 990)-PF (2	2015)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

2015

Name of the organization		Employer identification number
GRAHAM FOUNDATION		31-1497257
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organiza	tion
	4947(a)(1) nonexempt charitable trust n	ot treated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust tr	eated as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Gene	eral Rule or a Special Rule.	
Note. Only a section 501(c)(7), (8), or (10) or	rganization can check boxes for both the Gener	al Rule and a Special Rule See instructions.
General Rule		
\fbox{X} For an organization filing Form 990, 990-property) from any one contributor. Comp	EZ, or 990-PF that received, during the year, concluded Parts I and II. See instructions for determinations	ontributions totaling \$5,000 or more (in money or ning a contributor's total contributions.
Special Rules		
For an organization described in section sunder sections 509(a)(1) and 170(b)(1)(A)(vireceived from any one contributor, during Form 990, Part VIII, line 1h, or (ii) Form 9	501(c)(3) filing Form 990 or 990-EZ that met the point that checked Schedule A (Form 990 or 990-EZ), the year, total contributions of the greater of (990-EZ, line 1. Complete Parts I and II.	e 33-1/3% support test of the regulations Part II, line 13, 16a, or 16b, and that 1) \$5,000 or (2) 2% of the amount on (i)
For an organization described in section section during the year, total contributions of morpurposes, or for the prevention of cruelty	501(c)(7), (8), or (10) filing Form 990 or 990-EZ re than \$1,000 <i>exclusively</i> for religious, charitat to children or animals. Complete Parts I, II, an	I that received from any one contributor, ble, scientific, literary, or educational d III.
during the year, contributions exclusively \$1,000. If this box is checked, enter here charitable, etc., purpose. Do not complete	501(c)(7), (8), or (10) filing Form 990 or 990-EZ for religious, charitable, etc., purposes, but no the total contributions that were received during any of the parts unless the General Rule apptable, etc., contributions totaling \$5,000 or more	such contributions totaled more than ig the year for an <i>exclusively</i> religious, lies to this organization bec <u>a</u> use
Caution. An organization that is not covered 990-PF), but it must answer 'No' on Part IV, Part I, line 2, to certify that it does not meet	by the General Rule and/or the Special Rules of line 2, of its Form 990; or check the box on line the filing requirements of Schedule B (Form 99 structions for Form 990, 990-EZ, or 990-PF.	loes not file Schedule B (Form 990, 990-EZ, or e H of its Form 990-EZ or on its Form 990-PF, 0, 990-EZ, or 990-PF). Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

	B (Form 990, 990-EZ, or 990-PF) (2015)	Page	1 of 1 of Part I
lame of org GRAHAN	A FOUNDATION	' '	r identification number 497257
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space	is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GRAHAM GP		Person X Payroll
	P. O. BOX 12489 KNOXVILLE, TN 37912-0489	\$135,000.	Noncash
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	TIGER GP	\$ 100,000.	Person X Payroll Noncash
	P.O. BOX 12489 KNOXVILLE, TN 37912-0489	100,000.	(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
			(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash
			(Complete Part II for noncash contributions.)
3 A A C			3 000 ET 000 DE\ (004 E\

Page

1 to

1 of Part II

Name of organization

GRAHAM FOUNDATION

Employer identification number

31-1497257

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional s	pace is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
~			
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	 -
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ 	
RΛΛ	Sche	edule B (Form 990, 990-F)	7 or 990-PF) (2015

(e)
Transfer of gift
Transferee's name, address, and ZIP + 4
Relationship of transferor to transferee

2015	Federal Statements	Page 1
	GRAHAM FOUNDATION	31-1497257
Statement 1 Form 990-PF, Part I, Line 16a Legal Fees	(a) (b) Net (c)	(d)
LEGAL FEES	Expenses Investment Adjusted Net Income \$ 1,065. Total \$\frac{1}{5}\$ 1,065.	Charitable Purposes
Statement 2 Form 990-PF, Part I, Line 23 Other Expenses		
OFFICE SUPPLIES Rental Expenses .	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 32. 4,989. \$ 4,989. Total \$ 5,021. \$ 4,989. \$ 0.	(d) Charitable Purposes 0.
Statement 3 Form 990-PF, Part II, Line 14 Land, Buildings, and Equipme		
Category	Accum. Book Basis Deprec. Value	Fair Market <u>Value</u>
Buildings Land Miscellaneous	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	0. 0. 196,700. 196,700.
Statement 4 Form 990-PF, Part II, Line 22 Other Liabilities		
TENANT DEPOSITS .		2,075. 2,075.
Statement 5 Form 990-PF, Part VII-A, Line Substantial Contributors Duri	10 ng the Tax Year	
Name of Substantial Cont	Address of Substantial Contribu	tor

Federal Statements

Page 2

GRAHAM FOUNDATION

31-1497257

Statement 5 (continued)
Form 990-PF, Part VII-A, Line 10
Substantial Contributors During the Tax Year

TIGER, G.P.

PO BOX 12489 KNOXVILLET, TN 37912-0489

Statement 6 Form 990-PF, Part XV, Line 2a-d Application Submission Information

Name of Grant Program:

Tim A. Graham

Name: Care Of:

P.O. Box 12489

Street Address: City, State, Zip Code: Telephone:

Knoxville, TN 37912-0489 (865) 693-7000

E-Mail Address:

Form and Content:

Letter along with charitable exemption

Submission Deadlines:

No No

Restrictions on Awards:

Statement 7 Form 990-PF, Part XV, Line 3a **Recipient Paid During the Year**

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	 Amount
GRACE BAPTIST CHURCH 7171 OAK RIDGE HIGHWAY KNOXVILLE TN 37931	N/A	PC	FOR PROGRAMS	\$ 320.
KNOXVILLE LEADERSHIP FOUNDATION 318 NORTH GAY ST. #210 KNOXVILLE TN 37917	N/A	PC	FOR PROGRAMS	2,500.
NATIONAL CENTER FOR FATHERING 1600 WEST SUNSET AVE, STE B SPRINGDALE AR 72762	N/A	PC	FOR PROGRAMS	1,000.
EMERALD AVE YOUTH FOUNDATION 1718 N. CENTRAL STREET KNOXVILLE TN 37917	N/A	PC	YOUTH PROGRAMS	20,000.

2015	Federal Stat	tements		Page 3
	GRAHAM FOU	NDATION		31-1497257
Statement 7 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				
Name and Address	Donee <u>Relationship</u>	Found- ation <u>Status</u>	Purpose of <u>Grant</u>	Amount
FELLOWSHIP OF CHRISTIAN ATHLETES 502 S. GAY ST, STE 401 FIDELITY BLD KNOXVILLE TN 37902	N/A	PC	FOR PROGRAMS	\$ 25,350.
ANGELIC MINISTRIES 1218 N. CENTRAL STREET KNOXVILLE TN 37917	N/A	PC	FOR PROGRAMS	1,000.
CARTER HIGH FOOTBALL BOOSTER CLUB 210 N. CARTER SCHOOL RD STRAWBERRY PLAINS TN 37871	N/A	PC	FOR PROGRAMS	1,000.
FOCUS ON THE FAMILY P.O. BOX 2816 OMAHA NE 68172	N/A	PC	FOR PROGRAMS	1,000.
JONI & FRIENDS 1540 ROBINSON ROAD KNOXVILLE TN 37923	N/A	PC	FOR PROGRAMS	2,500.
JUVENILE DIABETES RESEARCH FOUNDATION 355 TRANE LANE KNOXVILLE TN 37919	N/A	PC	FOR PROGRAMS	2,500.
RON HERROD EVANGELISM MINISTRIES P.O. BOX 6447 SEVIERVILLE TN 37864	N/A	PC	FOR PROGRAMS	3,500.
SCORE INTERNATIONAL PO BOX 9994 CHATTANOOGA TN 37412	N/A	PC	MISSIONARY SPONSORSHIP	200.
SPECIAL OLYMPICS-KNOXVILLE CHAPTER P.O. BOX 34024 KNOXVILLE TN 37930	N/A	PC	FOR PROGRAMS	2,500.
ST. JUDE'S CHILDREN RESEARCH HOSPITAL 501 ST. JUDE PLACE MEMPHIS TN 38105	N/A	PC	FOR PROGRAMS	1,000.
FOREVER FAMILIES P.O. BOX 7368 KNOXVILLE TN 37921	N/A	PC	FOR PROGRAMS	1,000.

2015	Federal Sta	tements		Page 4
	GRAHAM FOU	NDATION		31-1497257
Statement 7 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				
Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of <u>Grant</u>	Amount
HOPE RESOURCE CENTER 2700 PAINTER AVENUE KNOXVILLE TN 37919	N/A	PC	FREE CONFIDENTIAL SERVICES REGARDING PREGNANCY AND SEXUAL HEALTH CONCERNS	\$ 10,000
MUSCULAR DYSTROPHY ASSOCKNOXVILLE OFFC 6408 PAPERMILL DRIVE, #230 KNOXVILLE TN 37931	N/A	PC	FOR PROGRAMS	800.
SALVATION ARMY P.O. BOX 669 KNOXVILLE TN 37901	N/A	PC	MINISTRY AND MEETING HUMAN NEEDS	10,000
THE GIDEONS INTERNATIONAL P.O. BOX 560 POWELL TN 37849	N/A	PC	FOR PROGRAMS	5,000
KIWANIS CLUB OF NORWOOD PO BOX 12573 KNOXVILLE TN 37912	N/A	PC	FOR PROGRAMS	300.
KNOXVILLE YOUTH FALCONS 2509 N. BROADWAY KNOXVILLE TN 37917	N/A	PC	FOSTER AMATEUR SPORTS COMPETITION	100
RCE INTERNATIONAL PO BOX 4528 WHEATON IL 60189	N/A	PC	ASSIST/EQUIP CHRISTIAN EDUCATION MINISTRIES	2,000.
AFRICAN INLAND MISSION P.O. BOX 178 PEARL RIVER NY 10965	N/A	PC	MISSIONARY PROGRAMS	2,000.
HALLS HIGH SCHOOL ACADEMIC BOOSTER CLUB 4321 EAST EMORY ROAD KNOXVILLE TN 37938	N/A	PC	FOR PROGRAMS	1,000.
KNOXVILLE FIREFIGHTERS ASSOCIATION 614 NORTH CENTRAL STREET KNOXVILLE TN 37917	N/A	PC	FOR PROGRAMS	500.
SAMARITAN'S PURSE P.O. BOX 3000 BOONE NC 28607	N/A	PC	FOR PROGRAMS	1,000.

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2015	Federal Sta	tements		Page !
	GRAHAM FOU	NDATION		 31-149725
Statement 7 (continued) Form 990-PF, Part XV, Line 3a				
Recipient Paid During the Year				
Recipient Paid During the Year Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	 <u>Amount</u>

Name and Address	Donee <u>Relationship</u>	round- ation <u>Status</u>	Purpose of <u>Grant</u>	Amount
TIM LEE MINISTRIES P.O. BOX 461674 GARLAND TX 75046	N/A	PC	FOR PROGRAMS	\$ 1,000.
ANDY WILSON SCHOLARSHIP FUND 455 NORTH WOODDALE STRAW PLAINS TN 37871	N/A	PC	SCHOLARSHIP FUNDRAISER VIA GOLF TOURNAMENT	200.
BIG BROTHERS BIG SISTER OF EAST TN 119 W. SUMMIT HILL DRIVE, STE 101 KNOXVILLE TN 37902	N/A	PC	ASSISTANCE FOR INDIGENT CHILDREN	5,000.
EAST TN CHILDREN'S HOSPITAL PO BOX 15010 KNOXVILLE TN 37901	N/A	PC	FUNDS FOR PEDIATRIC MEDICAL CENTER	5,000.
MANE SUPPORT 2919 DAVIS FORD ROAD MARYVILLE TN 37804	N/A	PC	ASSISTANCE TO INDIGENT CHILDREN	2,000.
ONE VISION INTERNATIONAL PO BOX 20608 KNOXVILLE TN 37940	N/A	PC	HAITA MISSION TRIP	5,000.
SERTOMA CENTER INC. 1400 EAST FIFTH AVE KNOXVILLE TN 37917	N/A	PC	MINISTRY	10,000.
KNOX AREA RESCUE MINISTRY 733 HALL OF FAME DRIVE KNOXVILLE TN 37917	N/A	PC	GENERAL ANNUAL CONTRIBUTION TO HELP FEED AND SHELTER HOMELESS	10,000.
WEST PARK BAPTIST CHURCH 8833 MIDDLEBROOK PIKE KNOXVILLE TN 37923	N/A	PC	SUPPORT CHURCH MISSION TRIP	200.
CARTER HIGH ALUMNI FUND 210 N. CARTER SCHOOL ROAD STRAWBERRY PLAINS TN 37871	N/A	PC	GOLF TOURNAMENT	100.
CEREBRAL PALSY CENTER 241 E. WOODLAND AVENUE KNOXVILLE TN 37917	N/A	PC	HELPING INDIVIDUALS WITH DISABILITIES ACHIEVE AS MUCH INDEPENDENCE AS POSSIBLE.	1,000.

2015	Federal Sta	tements		Page 6
	GRAHAM FOU	NDATION		31-1497257
Statement 7 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				
Name and Address	Donee <u>Relationship</u>	Found- ation <u>Status</u>	Purpose of Grant	 Amount
CARTER HIGH SCHOOL 210 N. CARTER SCHOOL ROAD STRAWBERRY PLAINS TN 37871	N/A	PC	BOOSTER CLUB DONATION	\$ 700.
AMERICAN CANCER SOCIETY 871 WEISGARBER RD KNOXVILLE TN 37909	N/A	PC	VOLUNTARY HEALTH ORGANIZATION DEDICATED TO ELIMINATING CANCER AS A MAJOR HEALTH PROBLEM	100.
CARTER SOCCER ASSOCIATION 210 N. CARTER SCHOOL RD STRAWBERRY PLAINS TN 37871	N/A	PC	FOSTER AMATEUR SPORTS	50.
CENTRAL MISSIONARY CLEARINGHOUSE PO BOX 219228 HOUSTON TX 77218	N/A	PC	MISSIONARY ENDEAVORS	5,000.
CLEAR SPRINGS BAPTIST CHURCH 3709 CLEAR SPRINGS RD MASCOT TN 37806	N/A	PC	DONATION TO MINISTRY	100.
GREAT SCHOOLS PARTNERSHIP-NORWOOD COMMUN 1909 MERCHANT DR KNOXVILLE TN 37912	N/A	PC	MAKING KNOX COUNTY SCHOOLS GLOBALLY COMPETATIVE	5,000.
HOPE THROUGH HIM MINISTRIES PO BOX 1555 POWELL TN 37849	N/A	PC	MISSIONS	500.
JOSH MCDOWELL MINISTRIES 2001 W PLANO PARKWAY, STE 2400 PLANO TX 75075	N/A	PC	TO EQUIP THROUGH CUTTING-EDGE MINISTRY RESOURCES	2,500.
KARNS ELEMENTARY SCHOOL 8108 BEAVER RIDGE RD KNOXVILLE TN 37931	N/A	PC	SCHOOL PROGRAMS	250.
KARNS MIDDLE SCHOOL 2925 GRAY HENDRIX RD KNOXVILLE TN 37931	N/A	PC	SCHOOL PROGRAMS	250.
KNOX COUNTY JUVENILE COURT 3323 DIVISION STREET KNOXVILLE TN 37919	N/A	PC	PROGRAMS	100.

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2015	Federal Sta	tements		Page 7
	GRAHAM FOU	NDATION		31-1497257
Statement 7 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				
Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	 Amount
KROGER COMMUNITY FUND 2620 ELM HILL PIKE NASHVILLE TN 37214	N/A	PC	GOLF TOURNAMENT	\$ 1,500.
MCALISTER MEMORIAL PRESBYTERIAN CHURCH 900 N ALLEGHANY AVE COVINGTON VA 24426	N/A	PC	SCOTT SCHOLARSHIP FUND	100.
MEDIC SAMARITAN PO BOX 1616 POWELL TN 37849	N/A	PC	SUSTAINABLE COMMUNITY HEALTH PROGRAMS IN RURAL HAITIAN VILLAGES	1,000.
OPERATION LIFESHIELD INC PO BOX 741722 BOYNTON FL 33474	N/A	PC	INTERNATIONAL RELIEF	16,000.
PROVIDENCE CHURCH 1432 LOVELL RD KNOXVILLE TN 37932	N/A	PC	BRAZIL MISSIONS	1,000.
SPARTAN INVASION FOUNDATION 11 W 14 MILE RD, STE 201B CLAWSON MI 48017	N/A	PC	PHILANTHROPY, VOLUNTARISM & GRANTMAKING	250.
THE MUSE KNOXVILLE 516 N BEAMAN STREET KNOXVILLE TN 37914	N/A	PC	INTERACTIVE MUSEUM FOR KIDS OF EXHIBITS ON LIFE, PHYSICAL & EARTH SCIENCES	1,000.
TNT MINISTRIES, INC - TONY NOLAN PMB312, 130 PROMINENCE POINT PKWY CANTON GA 30114	N/A	PC	RELIGION RELATED, SPIRITUAL DEVELOPMENT	1,000.
VOLUNTEERS FOR CHRIST 1250 HERITAGE LAKE BLVD KNOXVILLE TN 37922	N/A	PC	OUTREACH MINISTRY OF CORNERSTONE CHURCH OF KNOXVILLE AT UT KNOXVILLE CAMPUS	500.
NORTH KNOXVILLE YOUNG MARINES 700 IRWIN RD POWELL TN 37849		PC	YOUTH EDUCATION AND DEVELOPMENT PROGRAM	500.

2015 [`]	Federal Sta	tements		Page
	GRAHAM FOU	NDATION		31-14972
Statement 7 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				
Name and Address	Donee <u>Relationship</u>	Found- ation <u>Status</u>	Purpose of Grant	Amount
SALVATION ARMY P.O. BOX 669 KNOXVILLE TN 37901	N/A	PC	ANGEL TREE CHRISTMAS GIFTS FOR CHILDREN	\$ 58
			Tota	al \$ 175,55
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