DLN: 93491319025976

OMB No 1545-0052

2015

Department of the Treasury

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

Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its instructions is at <a href="www.irs.gov/form990pf">www.irs.gov/form990pf</a>. Internal Revenue Service Inspection , and ending 12-31-2015 For calendar year 2015, or tax year beginning 01-01-2015 A Employer identification number THE LILLIAN SHERWOOD GRISWOLD FOUNDATION 33-0668667 BTelephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) 2803 BARRANCA PKWY (949) 653-2607 City or town, state or province, country, and ZIP or foreign postal code IRVINE, CA 92606 C If exemption application is pending, check here G Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return A mended return Address change Name change 2. Foreign organizations meeting the 85% test, check here and attach computation If private foundation status was terminated  $\checkmark$ Section 501(c)(3) exempt private foundation H Check type of organization under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation IFair market value of all assets at end **J**Accounting method Cash ✓ Accrual F If the foundation is in a 60-month termination of year (from Part II, col (c), under section 507(b)(1)(B), check here Other (specify) line 16) >\$ 554,010 (Part I, column (d) must be on cash basis ) Part I **Analysis of Revenue and Expenses** Disbursements Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see Net investment Adjusted net for charitable expenses per books income ıncome purposes (a) (d) (cash basis only) Contributions, gifts, grants, etc , received (attach 775,000 2 Check ► ☐ If the foundation is **not** required to attach Sch B Interest on savings and temporary cash investments 3 4 Dividends and interest from securities Net rental income or (loss)\_ b Net gain or (loss) from sale of assets not on line 10 6a b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) . Net short-term capital gain . . . . 8 9 Income modifications . 10a Gross sales less returns and allowances b Less Cost of goods sold . . . Gross profit or (loss) (attach schedule) . c 11 Other income (attach schedule) • 19 775.029 10 10 12 Total.Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc Other employee salaries and wages . . 14 Pension plans, employee benefits . 15 Operating and Administrative Expenses Legal fees (attach schedule). . . 16a آوچە 1,364 341 1,023 Accounting fees (attach schedule). . . b Other professional fees (attach schedule) c 17 (چ 10 10 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 20 Occupancy Travel, conferences, and meetings. 21 22 Printing and publications . . . (چە 146 23 Other expenses (attach schedule). Total operating and administrative expenses. 24 Add lines 13 through 23 . . . . 1.520 392 1.128 382,295 382,295 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 392 383.815 383.423 27 Subtract line 26 from line 12 391.214 а Excess of revenue over expenses and disbursements

b

Net investment income (if negative, enter -0-)

Adjusted net income(if negative, enter -0-)

10

Рa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	Er	ıd of	year
			(a) Book Value	(b) Book Value	_	(c) Fair Market Value
	1	Cash—non-interest-bearing	998		998	998
	2	Savings and temporary cash investments	161,748	553,0	)12	553,012
	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶				
	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 ▶				
S	8	Inventories for sale or use				
<b>4ssets</b>	9	Prepaid expenses and deferred charges				
As	10a	Investments—U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)				
	с	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis ▶				
		Less accumulated depreciation (attach schedule) ▶				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment basis >				
		Less accumulated depreciation (attach schedule) ▶				
	15	Other assets (describe ►)				
	16	<b>Total assets</b> (to be completed by all filers—see the				
		ınstructions Also, see page 1, item I)	162,746	554,0	010	554,010
	17	Accounts payable and accrued expenses				
_	18	Grants payable				
Se	19	Deferred revenue				
abilities	20	$Loans\ from\ officers,\ directors,\ trustees,\ and\ other\ disqualified\ persons$	51		101	
<u> </u>	21	Mortgages and other notes payable (attach schedule)				
_	22	Other liabilities (describe ►)	1,355	1,:	355	
	23	Total liabilities(add lines 17 through 22)	1,406	1,4	456	
		Foundations that follow SFAS 117, check here				
ses		and complete lines 24 through 26 and lines 30 and 31.				
Balance	24	Unrestricted				
<u>8</u>	25	Temporarily restricted				
	26	Permanently restricted				
Fund		Foundations that do not follow SFAS 117, check here				
ō		and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds				
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
ď	29	Retained earnings, accumulated income, endowment, or other funds	161,340	552,	554	
Net	30	Total net assets or fund balances(see instructions)	161,340	552,	554	
_	31	<b>Total liabilities and net assets/fund balances</b> (see instructions)	162,746	554,0	010	
Pa	rt 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 a	gree		
		with end-of-year figure reported on prior year's return)		<b>1</b>		161,340
2		Enter amount from Part I, line 27a		2		391,214
3		Other increases not included in line 2 (itemize)		3		
4		Add lines 1, 2, and 3				552,554
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)—F	Part II, column (b), l	ine 30 . <b>6</b>		552,554

		the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs	•	How acquired P—Purchase (b) D—Donation	Date acquired	Date sold (d) (mo , day, yr )
1a						
b						
С						
d						
e						
(e	) Gross sales price	Depreciation allowed  (f) (or allowable)		or other basis expense of sale		n or (loss) s (f) minus (g)
а						
b						
С						
d						
е е						
Co	mplete only for assets	showing gain in column (h) and owne	d by the foundation	on 12/31/69	Gains (Co	l (h) gain minus
	FM V as of 12/31/69	A djusted basis (j) as of 12/31/69	Exc	ess of col (ı) col (j), ıf any	col (k), but n	ot less than -0-) <b>or</b> (from col (h))
а						
b						
С						
d						
e						
	If gain, also enter in in Part I, line 8  V Qualification (	al gain or (loss) as defined in section  Part I, line 8, column (c) (see instru   Jnder Section 4940(e) for R  private foundations subject to the seleave this part blank	ctions) If (loss), er	nter -0 -   · · ·   Net Investme		
f"Yes,	" the foundation does n	e section 4942 tax on the distributa ot qualify under section 4940(e) Do	not complete this	part		⊤ Yes 🔽 No
<b>1</b> Ent		unt in each column for each year, se	ee instructions befo	re making any ent		
	(a) period years Calendar or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of nonchar	itable-use assets	<b>(d</b> Distribution (col (b) divide	on ratio
	2014	389,151		133,349		2 91829
	2013	206,160		94,770		2 17537
	2012	146,354		102,433		1 42878
	2011	8,808		65,081		0 13534
	2010	146,959		100,742		1 45877
2 3	Average distribution	n (d)	ride the total on line	e 2 by 5, or by	2	8 116545
		the foundation has been in existence f noncharitable-use assets for 2015	•	_	3	1 623309
4			•	<b>⊢</b>	4	473,810
5		23		<u> </u>	5	769,140
6		stment income (1% of Part I, line 27	•	<b>⊢</b>	6	
7				<u> </u>	7	769,140
8		ibutions from Part XII, line 4			8	383,423
	If line 8 is equal to oi the Part VI instruction	greater than line 7, check the box i	n Part VI, line 1b, a	and complete that	part using a 1% ta	x rate See

	990-PF (2015)			age <b>4</b>
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst	ructio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here ► ☐ and enter "N/A" on line 1			
	Date of ruling or determination letter			
	(attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0
	here ► Tand 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)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
3	Add lines 1 and 2			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others			
	enter -0-) 4			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			
6	Credits/Payments			
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 154			
b	Exempt foreign organizations—tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			154
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10			154
11	Enter the amount of line 10 to be Credited to 2015 estimated tax 154 Refunded 11			
	t VII-A Statements Regarding Activities		Γ	l
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
	it participate or intervene in any political campaign?	1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions	414		N-
	for definition)?	1b		No
	published or distributed by the foundation in connection with the activities			
с	Did the foundation file <b>Form 1120-POL</b> for this year?	<b>1</b> c		No
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			-110
-	(1) On the foundation ► \$ (2) On foundation managers ► \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers 🕨 \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		No
	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		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	4b		No
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		No
	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		Į	
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions		)	ļ
	that conflict with the state law remain in the governing instrument?	6	Yes	
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	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	►CA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney	OL.	V	
_	General (or designate) of each state as required by General Instruction G? If "No," attach explanation.	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)?			
	If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			110
	and addresses **	10	Yes	
			1	•

Par	t VII-A Statements Regarding Activities (continued)			age -
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person ha	d		
	advisory privileges? If "Yes," attach statement (see instructions)	. 12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►N/A			
14	The books are in care of ►CAROL BORNMAN Telephone no ►(94)	19)653	-2607	
	Located at ►2803 BARRANCA PKWY IRVINE CA ZIP+4 ►92675			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here		▶	_
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	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 ▶			
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
<b>1</b> 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?	o   		 
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	0   		 
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	o   		 
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	o		 
	(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)?	0   		 
	(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 )			
ь	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)?	.   1b		No
	Organizations relying on a current notice regarding disaster assistance check here			
	Γ			
c	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?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
а	operating foundation defined in section 4942(j)(3) or 4942(j)(5))  At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
u	and 6e, Part XIII) for tax year(s) beginning before 2015? Yes V			
	If "Yes," list the years ▶ 20, 20, 20		İ	! 
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 )	2b		No
c	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			
3а	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?	o   	1	 
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, <b>(2)</b> 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 <b>(3)</b>			
	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 )	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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		No

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	t VII-B	Statements Reg				ich Form 4720	мау ве	Required (Co	ntınu	ed)	
5a	-	year did the foundation	' '	•							
	• • •	on propaganda, or othe		·	_	•		☐ Yes	✓ No		ļ
	` '	nce the outcome of any		,		<i>,</i> ,	,				
	on, dir	ectly or indirectly, any	vote	registration drive?.	•			· · · \ \ Yes	✓ No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes Volume							,			
		e a grant to an organiz tion 4945(d)(4)(A)? (s						· · · ˈ Yes	✓ No		
		e for any purpose othe tional purposes, or for		- ·	•			· · 「Yes	√ No		
b				ıd <b>any</b> of the transac	tions	fail to qualify under	the excep	tions described	ın	i i	j
Regulations section 53 4945 or in a current notice regarding disaster assist				lisaster assistance	see instru	ictions)?		5b	No		
	O rganızatı	ions relying on a curre	nt not	ice regarding disast	eras	sistance check here	e		<b>-</b>		
c	If the answ	wer is "Yes" to questio	n 5a(	4), does the foundat	ion c	laım exemption from	n the				
	tax becaus	se it maintained expen	diture	responsibility for th	ne gr	ant?		· · · $ extstyle  extstyle$	✓ No	,	
	If "Yes," at	tach the statement requ	ured l	y Regulations section	n 53	4945-5(d)					
<b>6</b> a	Did the for	undation, during the ye	ar, re	ceive any funds, dire	ectly	or indirectly, to pay	premiums	on			
	a personal	benefit contract?						· Tyes	✓ No	,	
b	Did the fou	undation, during the ye	ar, pa	y premiums, directly	yorı	ndırectly, on a perso	onal benefi	t contract?		6b	No
	If "Yes" to	6b, file Form 8870									
7a	At any tım	e during the tax year,	was tl	ne foundation a party	y to a	a prohibited tax shel	ter transa	ction? Tyes	√ No	,	
b	If yes, did	the foundation receive	any	proceeds or have an	y ne	t income attributable	e to the tra	nsaction?	.'.	7b	No
	a verre	Information Abou	it Of	ficers, Directors	s, Tı	ustees, Founda	tion Ma	nagers, High	ly Pai	d Empl	oyees,
		and Contractors									
_1_	List all offi	cers, directors, trustee	es, fou	ındation managers a	nd t	heir compensation (	see instrud				
	<b>(a)</b> Nam	ne and address	(b)	Title, and average hours per week devoted to position	` `	Compensation(If not paid, enter -0-)	employ	(d) atributions to see benefit plans red compensations	1	Expense other all	account, owances
DAVID	E GRISWOLD		Pres	ıdent		0					
2803	BARRANC	CA PARKWAY	5 00								
IRVI	NE,CA 92	:606									
DORIS	MEYERS		_	retary	0						
IRVI	NE,CA 92	CA PARKWAY 1606	5 00								
	OLSEN	SA DA DIVINA V	Trea 5 0 0	isurer N	0						
	NE,CA 92	CA PARKWAY 1606		,							
		ion of five highest-pai	d emp	loyees (other than	thos	e included on line 1-	-see instru	ctions). If none	, enter	"NONE."	
	ne and addr	(a) ress of each employee e than \$50,000		Title, and aver hours per wee (b) devoted to pos	age ek	(c) Compensatio	n l	Contributions to employee benef plans and deferre compensation	o It		account, lowances
NON	E										
				1							

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

**2**a Tax on investment income for 2015 from Part VI, line 5. . . . . . 2a Income tax for 2015 (This does not include the tax from Part VI). . . 2b

Distributable amount before adjustments Subtract line 2c from line 1. . . . . . . . . . . . . . . .

Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . .

Expenses, contributions, qifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . . .

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

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

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

2c

3

4

5

6

7

1a

1b

2

3а

3b

4

5

23,691

23.691

23.691

383,423

383,423

383,423

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Recoveries of amounts treated as qualifying distributions. . . . . . . . . .

**Qualifying Distributions** (see instructions)

Amounts set aside for specific charitable projects that satisfy the

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

3

4

5

6

7

1

2

4

5

Part XII

Undistributed Income (see instructions)

Part XIII

		(a)	(b)	(c)	(d)
	Distributable amount for 2015 from Part XI, line 7	Corpus	Years prior to 2014	2014	2015
	Undistributed income, if any, as of the end of 2015				23,031
	Enter amount for 2014 only				
	Total for prior years 20				
	Excess distributions carryover, if any, to 2015				
	From 2010				
b	From 2011 5,588				
c	From 2012 141,252				
d	From 2013 201,421				
е	From 2014 382,484				
f	Total of lines 3a through e	872,679			
4	Qualifying distributions for 2015 from Part				
	XII, line 4 🕨 \$ 383,423				
а	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	0			
ч	required—see instructions)				23,691
	Remaining amount distributed out of corpus	359,732			25,032
	Excess distributions carryover applied to 2015	335,732			
3	(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:	4 222 444			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,232,411			
b	Prior years' undistributed income Subtract line 4b from line 2b				
C	Enter the amount of prior years' undistributed income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
٨	tax has been previously assessed Subtract line 6c from line 6b Taxable amount				
u	—see instructions				
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see				
£	Undistributed income for 2016 Subtract				
•	lines 4d and 5 from line 1. This amount must				
	be distributed in 2015				0
7	A mounts 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				
Ī	applied on line 5 or line 7 (see instructions)	141,934			
9	Excess distributions carryover to 2016.	1 000 177			
	Subtract lines 7 and 8 from line 6a	1,090,477			
	Analysis of line 9				
	Excess from 2011 5,588				
	Excess from 2012 141,252				
	Excess from 2013 201,421  Excess from 2014 382,484				
е	Excess from 2015 359,732			 	<u> </u> Form <b>990-PF</b> (2015)
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	art XIV Private Operating Foundat				9)	
La	If the foundation has received a ruling or detern foundation, and the ruling is effective for 2015,					
b	Check box to indicate whether the organization	is a private opera	ting foundation de	scribed in section	4942(J)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(5, 1512)
	yearlisted					
	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	A mounts included in line 2c not used directly for active conduct of exempt					
е	activitiesQualifying 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					
а	"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					
С	"Support" alternative test—enter  (1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments					
	on securities loans (section 512(a)(5)), or royalties)					
	(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					
Pa	rt XV Supplementary Information (			e organizatio	n had \$5,000 o	r more in
_	assets at any time during the Information Regarding Foundation Managers:	year—see ins	tructions.)			
а	List any managers of the foundation who have c before the close of any tax year (but only if they					ation
	DAVID E GRISWOLD					
b	List any managers of the foundation who own 10 ownership of a partnership or other entity) of wh				large portion of the	e
2	Information Regarding Contribution, Grant, Gift	t, Loan, Scholarshi	p, etc., Programs:			
	Check here $\blacktriangleright \boxed{\checkmark}$ if the foundation only makes c unsolicited requests for funds. If the foundation	makes gifts, gran				
	other conditions, complete items 2a, b, c, and d	l 				
а	The name, address, and telephone number or e	maıl address of th	e person to whom	applications shou	ld be addressed	
b	The form in which applications should be submi	itted and informati	on and materials t	they should includ	e	
c	Any submission deadlines					
d	Any restrictions or limitations on awards, such	as by geographic	al areas, charitabl	e fields, kinds of i	nstitutions, or other	-
<b>.</b>	factors		I. III J G.			

Form 990-PF (2015)

Part XV Supplementary Information(continued) Page **11** 

3 Grants and Contributions Paid		roved for Fu	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year See Additional Data Table	or substantial contributor	recipient		
Total			▶ 3a	382,295
<b>b</b> Approved for future payment				
Total		<del>'</del>	▶ 3b	

Part XVI-	A Analysis of Income-Produc	ing Activitie	:S			
Enter gross	amounts unless otherwise indicated	Unrelated bu	usiness income	Excluded by section	n 512, 513, or 514	(e) Related or exempt
<b>1</b> Program	service revenue	(a) Business code	<b>(b)</b> A mount	(c) Exclusion code	(d) A mount	function income (See instructions)
a						
<b>g</b> Fees a	nd contracts from government agencies					
	ship dues and assessments					
	on savings and temporary cash ents					10
	Is and interest from securities					10
	al income or (loss) from real estate					
	nanced property					
	bt-financed property					
	al income or (loss) from personal					
7 Other in	vestment income					
	(loss) from sales of assets other than					
	me or (loss) from special events					
	rofit or (loss) from sales of inventory					
	venue <b>a</b> <u>Securities litigation</u>			1	1:	9
	Add columns (b), (d), and (e).				11	
	d line 12, columns (b), (d), and (e)				13	29
	rksheet in line 13 instructions to verify <b>Relationship of Activities to</b>		plishment of E	xempt Purpos	es	
Line No.	Explain below how each activity for wh	ich income is re	ported in column (	e) of Part XVI-A c	ontributed importa	
<b>▼</b>	the accomplishment of the foundation's instructions )	s exempt purpos	ses (other than by	providing funds for	such purposes)	(See
	madactions )					

ronni 99	U-PF											Pag	ge ⊥.
Part 2	(VII	Information Re Noncharitable					sactio	ns and	Relationships	With			
		rganization directly or i	ndirectly e	engage i	n any of	the following wi		_				Yes	No
		01(c) of the Code (other	r than sec	ction 50	1(c)(3) c	organizations ) c	or in sec	tion 527,	relating to politica	al		163	-140
<b>a</b> Tran	sfers	from the reporting four	dation to	a nonch	arıtable	exempt organiz	ation of						
(1)	Cash	1									1a(1)		No
(2)	O the	erassets									1a(2)		No
<b>b</b> Othe	r tra	nsactions											
		s of assets to a noncha			-						1b(1)		No
(2)	Purc	hases of assets from a	noncharit	able exe	empt orga	inization					1b(2)		No
(3)	Rent	al of facilities, equipme	nt, or othe	erassets	5						1b(3)		No
(4)	Reim	bursement arrangemen	ts								1b(4)		No
		s or loan guarantees.									1b(5)		No
<b>(6)</b> P	erfor	mance of services or m	embership	p or fund	lraising s	olicitations.					1b(6)		No
	_	f facilities, equipment, i	-	•							<b>1</b> c		No
of the	e god y tra	wer to any of the above ods, other assets, or se nsaction or sharing arra  (b) Amount involved	rvices giv angement,	en by th , show ir	e reporti n column	ng foundation	If the foo of the go	undation ods, othe	received Íess than	fair marke es receive	et value ed		ıts
desc <b>√</b> N	ribec o	indation directly or indi in section 501(c) of th complete the following : (a) Name of organization	ne Code (o schedule		, in section	•	ın secti		· · · · · ·	tion of relation	·	es	
								_					
				+				-					
Sign Here	the	ler penalties of perjury, best of my knowledge a rmation of which prepar *****	nd belief,	ıt ıs tru	e, correct		Declar			n taxpayeı May ti return		ed on	all
	<b>y</b>	Signature of officer or t	rustee			Date		Title		below	nstr )?	_	
		Print/Type preparer's Sherrin Fielder	name	Prepar	er's Sıgn	ature	Date		Check if self- employed ► ✓	PTIN P(	002487	'27	
Paid Prepa Use	rer		PA a PC	•			· · · · · · · · · · · · · · · · · · ·		Firm's EIN ▶				
Only			Firm's address   12277 SOARING WAY STE 104 TRUCKEE, CA 961613320  Phone no (530) 550-9600								00		

Form 990PF Part XV Line 3 - Gr	ants and Contributions	Paid During	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	Foundation status of recipient	Purpose of grant or contribution	A mount						
Name and address (home or business)	or substantial contributor	recipient								
<b>a</b> Paid during the year										
ALTERNATIVE ENERGY INSTITUTE 2803 BARRANCA PARKWAY IRVINE,CA 92606		501-C3	GENERAL SUPPORT	145,000						
FOR OUR COUNTRY-US 1800 F STREET NW WASHINGTON,DC 20405		501-C3	GENERAL SUPPORT	10,000						
SCIENTIFIC BEING RESEARCH 2803 BARRANCA PARKWAY IRVINE,CA 92606		501-C3	GENERAL SUPPORT	100,000						
PAUL D WHITE INSTITUTE 1500 Palma Drive Ventura,CA 93003		501-C3	GENERAL SUPPORT	115,000						
PAUL D GRIMES ASSOCIATION 15702 Trapp Ridge Court Chesterfield, MO 63017	NONE	501-C3	General Support	2,000						
TRUCKEE ROUNDHOUSE CHANDELLE WAY TRUCKEE,CA 96161	NONE	501-C3	GENERAL SUPPORT	10,295						
Total			▶ 3a	382,295						

TY 2015 Accounting Fees Schedule						
Name:	THE LILLIAN SHERWOOD GRISWOLD FOUNDATION					
EIN:	33-0668667					
Software ID:	15000324					

DLN: 93491319025976

1,023

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

PROFESSIONAL

SERVICES

Soft	ware Version: 201	5v2.0		
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

341

1,364

TY 2015 Other Expenses Schedule		
Name:	THE LILLIAN SHERWOOD GRISWOLD FOUNDATION	
EIN:	33-0668667	
Software ID:	15000324	
Software Version:	2015v2.0	

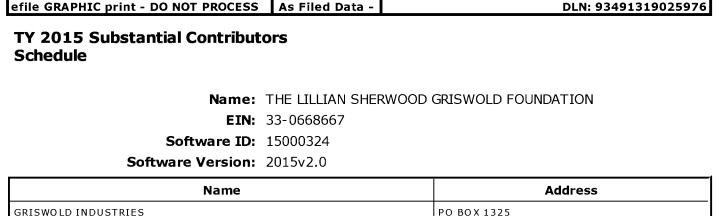
DLN: 93491319025976

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Software Ver	sion: 2015v2.0			
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEES	51	51		
CORP FILING FEE	95			95

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	l: 93491319025976
TY 2015 Other Income Schedu	ıle			
Name:	THE LILLIAN SHE	ERWOOD GRIS	WOLD FOUNDATION	Ν
EIN:	33-0668667			
Software ID:	15000324			
Software Version:	2015v2.0			
Description		Revenue And enses Per Books	Net Investment Income	Adjusted Net Income
Securities litigation		19		1

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491319025976
TY 2015 Other Liabilities Schee	dule		
Name:	THE LILLIAN SHERV	VOOD GRISWOLD FOUNDAT	ION
EIN:	33-0668667		
Software ID:	15000324		
Software Version:	2015v2.0		
Description		Beginning of Year - Book Value	End of Year - Book Value
Due To AEI		1,355	1,355



NEWPORT BEACH, CA 926590325

efile GRAPHIC print - DO	NOT PROCESS	As File	ed Data -		DI	N: 93491319025976
TY 2015 Taxes Sch	edule					
	Name:	THE LILI	LIAN SHEF	RWOOD GR	ISWOLD FOUNDATI	ON
	EIN:	33-0668	3667			
S	oftware ID:	1500032	24			
Softwa	re Version:	2015v2.	0			
Category	Amour	nt		estment ome	Adjusted Net Income	Disbursements for Charitable Purposes

10

TAXES

10

efile GRAPHIC print -	DO NOT PROCESS	As Filed Data	-		D	LN: 93491319025976
Schedule B		Sched	lule of Contributors	 'S		OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	▶ Information at	oout Schedule B (	o Form 990, 990-EZ, or 990-F Form 990, 990-EZ, or 990-PF <u>www irs gov/form990</u>		ıs at	2015
Name of the organization		INDATION		Em	ployer iden	tification number
——————————————————————————————————————	OOD GRISWOLD FOR	JNDATION		33.	-0668667	
Organization type (ch	eck one)					
Filers of:	Section:					
Form 990 or 990-EZ	┌─ 501(c)( )	(enter number) o	rganızatıon			
	4947(a)(1	) nonexempt char	ritable trust <b>not</b> treated as a	private foundation		
	527 politic	al organization				
Form 990-PF	<b>√</b> 501(c)(3)	exempt private fo	pundation			
	4947(a)(1	) nonexempt char	ritable trust treated as a priva	ate foundation		
	501(c)(3)	taxable private fo	oundation			
other property	-		F that received, during the ye arts I and II See instructions f		-	
Special Rules						
under sections t received from ai	509(a)(1) and 170(b)(	1)(A)(vı), that che rıng the year, tota	g Form 990 or 990-EZ that me ecked Schedule A (Form 990 Il contributions of the greater rts I and II	or 990-EZ), Part II, line	e 13, 16a, o	or 16b, and that
during the year,		more than \$1,000	or (10) filing Form 990 or 990 exclusively for religious, cha aplete Parts I, II, and III			
during the year, this box is checl purpose Do not	contributions <i>exclusi</i> ked, enter here the tot complete any of the p	<i>vely</i> for religious, rall contributions the contributions the contributions the contributions.	or (10) filing Form 990 or 990 charitable, etc., purposes, but were received during the seneral Rule applies to this or more during the year	ut no such contributior year for an exclusive organization because	ns totaled m ely religious, it received	nore than \$1,000 lf , charitable, etc , nonexclusively
990-EZ, or 990-PF), but	ıt <b>m ust</b> answ er "No"	on Part IV, line 2,	ule and/or the Special Rules of its Form 990, or check the does not meet the filing requ	e box on line H of its		

Name of organization

THE LILLIAN SHERWOOD GRISWOLD FOUNDATION

Employer identification number 33-0668667

Part I	Contributors (see instructions) Use duplicate copies of Part I if a	dditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1			Person 🗸
	GRISWOLD INDUSTRIES PO BOX 1325		Payroll
	· · · · · · · · · · · · · · · · · · ·	<u>\$ 775,000</u>	│ │ Noncash ┌─
	NEWPORT BEACH, CA 926590325		<b>'</b>
			(Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
			Payroll
		<u>\$</u>	Noncash —
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
110.	rame, address, and 2n · 4	Total contributions	Person
	1		Percell
		s	Payroll
			Noncash —
			(Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person
			Payroll
		<u>\$</u>	│ │ Noncash ┌─
			(Complete Part II for noncash
	<u> </u>		contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
			Payroll
		<u>\$</u>	│ │ Noncash ┌─
			(Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person
			Payroll
		<u> </u>	Noncash —
			(Complete Part II for noncash contributions )

Employer identification number

(c) FMV (or estimate) (see instructions)  (c) FMV (or estimate) (see instructions)	(d) Date received  (d) Date received
FMV (or estimate) (see instructions)  s (c) FMV (or estimate)	Date received (d)
FMV (or estimate) (see instructions)  s (c) FMV (or estimate)	Date received (d)
(c) FMV (or estimate)	
FMV (or estimate)	
—	
(c) FMV (or estimate) (see instructions)	(d) Date received
(c) FMV (or estimate) (see instructions)	(d) Date received
(c) FMV (or estimate) (see instructions)	(d) Date received
s	
(c) FMV (or estimate) (see instructions)	(d) Date received
Schedule B (Form 9	90, 990-EZ, or 990-PF)
	(c) FMV (or estimate) (see instructions)