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Form **990-PF**

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www irs gov/form990pf

Depa	rtmen	t of the Treasury	i .					y numbers on				1 2013
Intern	nal Rev	venue Service			on abou	t For	m 990-PF and	its separate		-	s gov/form990pf	Open to Public Inspection
		idar year 2015 (or tax year	beginning					, and e	nding	Tri tr	
Nar	me of	foundation									A Employer identification	number
C	ג ס ו	IN FAMI	יא דיר	ייי ע כווענדו	TON						38-3618818	
		nd street (or POb				treet e	nddress)			Room/suite	†	
		5 GRATI					,			11001111001110	B Telephone number (313)396-3	000
		own, state or pr			P or fore	uan n	netal code			I	_	
		ROIT, M	T 48	3207-2	913	igii p	OSIBI COUC				C If exemption application is p	ending, check here
		all that apply:		Initial retur			Initi	al return of a f	ormer nublic	charity	D 1. Foreign organization:	e check here
•	,,,,,,,,,,	an anat appry.		Final return				ended return	ormor public	onunty	1. Foreign organization	s, direck field
				Address ch				ne change			Foreign organizations me check here and attach co	peting the 85% test,
H (Check	type of organiz	ation:			(3) ex	cempt private	<u>-</u>			E If private foundation sta	•
	Se	ction 4947(a)(1				. ,		private found	ation		under section 507(b)(1	
2 Fa	air ma	arket value of all	assets at	end of year	J Acc	ounti	ng method:	X Cash	Acc	rual	F If the foundation is in a	
	rom I	Part II, col (c),	line 16)				ther (specify)				under section 507(b)(1)	
	\$	_	1,237	7,8 4 3.	(Part I,	colu	mn (d) must	be on cash i	basis)			
	ārīt, l	Analysis of R (The total of amo	evenue an	nd Expenses	d (d) mav r	ot		enue and		rvestment	(c) Adjusted net	(d) Disbursements for charitable purposes
5 —		necessarily equa	il the amoun	ts in column (a))		expense	s per books		ome	income	(cash basis only)
Š	1	Contributions,					V 300-1 X V V V 300-1240		Modiff of the	uje-justic	N/A mate	Constitution of the second
	2	Check X			o attach Sch	В			TENER FAIR			
<u>.</u>	3	Interest on saving cash investments					<u> </u>	<u> </u>	ļ	C 540		
<u>Z</u>	4	Dividends and	interest fro	om securitie:	S			6,518.	2	6,518.		STATEMENT 1
<u> </u>	5a						Section (Address)	entickéhora a a s	. 4~4 m2753633436	964478943	No. of the State of the Community of the	
してできる。	b		_				2000 200 200 200 200 200 200 200 200 20	349.	ACCOUNTS	erio esperanta de la compansión de la comp La compansión de la compa		AREA ACARANTALA
<u> </u>	H	Net gain or (loss) Gross sales price		_	™ 10 , 891	٠	on accordance	<u> </u>	ARATELIAE.			110.00
, Revenu	7	assets on line 6a Capital gain net in			,051	<u></u>	200 1 100 AV 22 1 1 2 2 2 3 2 4 4 1 2 2 4 1 1 1 1 1 1 1 1 1 1 1 1 1	alini termenen Willeberge	100000000000000000000000000000000000000	349.	TO SECURE AND ASSESSED ASSESSED.	
Be B	8	Net short-term				11/	241.7E	1/55/2003		Jay.	The state of the s	
	9	Income modifi		L/C	5 🗗 🗓	ŧΛ						A STANDARD CONTRACTOR OF THE STANDARD CONTRACTOR
	1	Gross sales less r	eturns	L			A 10					PROGRAMMA & L
	1 .	Less Cost of goo	ds sold	MA I≅	Y 2	5 2	016		4 4 2 X 2	NACH TERMINE		Y - 14,1480 3 F 3730
		Gross profit or	1				ď		Print.	A CHILLIAN		PERMIT
	11	Other income	ì	Ω	DE	N	IIT.					438W4.65/194
	-12	-TotalAdd line	s-1 throug	<u> h-1:1</u>		14,	<u> </u>	.6 .,867.	2	6,867.	-	Acres (Marie Plane)
	13	Compensation of	officers, dire	ctors, trustees	, etc			0.		0.		0.
	14	Other employe	e salaries a	and wages								
	15	Pension plans,	employee	benefits								
ses	16a	Legal fees				_				1 000		
Dec	Ь	Accounting fee				2		3,800.		1,900.		1,900.
Ĕ	17 18 19 20 21	Other profession	onal fees	S'	PMT :	3	<u> </u>	9,130.		9,130.		0.
<u>¥</u>	17	Interest		CI.	nsem.	A	-	6,854.		410.	1	
tra	18	Taxes			rmt ·	#		0,034.	-	410.		0.
inis	19	Depreciation ar Occupancy	iu depiello	MI								200
Ē	20	Travel, confere	nege and	mootinge					 			
d bue	22	Printing and pu		-					-			
		Other expenses			PMT	5		20.	<u> </u>	0.		20.
ţi	24	Total operating				-						200
Operating]	expenses Add	_				1	9,804.	1	1,440.	<u> </u>	1,920.
õ	25	Contributions,						2,703.	T		41.764	62,703.
		Total expenses										
	L	Add lines 24 ar					8	2,507.	1	<u>1,440.</u>		64,623.
	27	Subtract line 2	6 from line	: 12:				Star Con	444	1 05	Arrive F	
	a	Excess of revenue	over expens	ses and disbur	sements		- 5	5,640.			10/41	
	b	Net investmen	t income (if negative, ent	er -0-)			** ***	1	5,427.	ر اید کرد کرد	2.327
	l c	Adjusted net in	come of a	egative, enter -	0-)		ł		ł		N/A	

523501 11-24-15 LHA For Paperwork Reduction Act Notice, see instructions.

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	IN FAMILY FOUNDA'					3	<u>8-361</u>	8818	Page 3
	and Losses for Tax on In		Income	In year					
2-story brick wa	cribe the kind(s) of property sold (e.g. arehouse; or common stock, 200 shs			(b) How ac P - Purch D - Dona	tion	(c) Date a (mo., da	ay, yr.)	(d) Dat (mo., da	ау, ут.)
1a CHARLES SCHWAB						VARI(VARIO	
	#55-6304					VARI		VARIO	
	A CORP.				2 '	VARI	<u>ous</u>	VARIO	<u>us</u>
d CAPITAL GAINS	DIVIDENDS								
_e				<u> </u>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				aın or (loss s (f) mınus	(g)	
a 89,904.			94,22						,316.
b 198,231.			212,32	2.				-14	,091.
c 426.									426.
d 18,330.								18	,330.
е									
Complete only for assets showing	ng gain in column (h) and owned by t	he foundation	on 12/31/69				ol. (h) gain		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col. (j), if any		col.	(k), but r Losses	not less tha (from col (n -0-) or (h))	
8								-4	,316.
b									,091.
C									426.
d								18	,330.
e									
2 Capital gain net income or (net ca	apıtal loss) { If gaın, also enter If (loss), enter -0	ın Part I, line - ın Part I, line	7 7	} 2					349.
3 Net short-term capital gain or (lost if gain, also enter in Part I, line 8,		d (6):							
If (loss), enter -0- in Part I, line 8) 3			N/A		
Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	Investme	ent Inco	me			
(For optional use by domestic private	e foundations subject to the section 4	940(a) tax on	net investment in	come.)					
	,			,					
If section 4940(d)(2) applies, leave t	his part blank.								
Was the foundation liable for the sec	tion 4942 tax on the distributable am	ount of any ve	ar in the base per	iod?				Yes	X No
If "Yes," the foundation does not qua			•						
	each column for each year; see the in			ntries.					
(a) Base period years	(b)			(c)				(d) bution ratio	
Base period years Calendar-year-(or-tax-year-beginni	Advised available of a	tributions	Net value of no		use assets_		Distrii (col. (b).dr).	bution ratio vided by col	(c))
2014		2,220.		1.33	2,070		,		<u> 16709</u>
2013		3,945.			3,923				47938
2012		1,865.			1,171				47436
2011		1,565.			1,152				47942
2010		6,765.			5,593				45390
2010		0,,000		1,15	,,,,,				10000
2 Total of line 1, column (d)						2	l	. 2	35415
3 Average distribution ratio for the	E year boss pared douds the total	on line O by E	or bu the number	of woore		+		• 23	73113
•	·	on line 2 by 5,	or by the number	UI years		,		n.	47083
the foundation has been in existe	rice ii less than 5 years					3		• 0	± / 0 0 3
							1	1 270	025
4 Enter the net value of noncharitat	ble-use assets for 2015 from Part X,	ine 5				4	ļ <u>.</u>	1,279	, 043.
							1	C 0	250
5 Multiply line 4 by line 3						5		60	<u>,258.</u>
							1		1 - 4
6 Enter 1% of net investment incor	ne (1% of Part I, line 27b)					6	——		154.
							1		410
7 Add lines 5 and 6						7	<u> </u>	60	<u>,412.</u>
							1	~ 4	CO 2
8 Enter qualifying distributions from	m Part XII, line 4					1 8	1	64	,623.

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

	990-PF (2015) CRAIN FAMILY FOUNDATION	38-	<u>36188</u>	18	F	age 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 - :	see ins	truc	tions	<u>) </u>
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 here X and enter 1%	1			15	54.
	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).	\sqcup				
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			1:	<u>4.</u>
	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			1:	54.
6	Credits/Payments:					
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 3,750.	4				
	Exempt foreign organizations - tax withheld at source	4				
	Tax paid with application for extension of time to file (Form 8868)	-				
	Backup withholding erroneously withheld				\ 	
	Total credits and payments. Add lines 6a through 6d	7			3,7	50.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
-	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			3,59	3.6
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2016 estimated tax 3,596. Refunded	10	-		, 5:	0.
	Enter the amount of line 10 to be: Credited to 2016 estimated tax 7,596 • Refunded rt VII-A Statements Regarding Activities	11				<u> </u>
			Г		Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interveni	: 111	ŀ	1a	. 03	X
_	any political campaign?			1b	-	X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	-	<u> </u>	-"		^
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	ed Of				ŀ
•	distributed by the foundation in connection with the activities Did the foundation file Form 1120-POL for this year?			1c		_ <u>X</u> _
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		ŀ	-		
·	(1) On the foundation. \triangleright \$ 0 • (2) On foundation managers. \triangleright \$ 0 •		·	Ì		Ì
۵	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	_				1
Ū	managers. ► \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		ľ	2	1	X
	If "Yes." attach a detailed description of the activities					~
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	r		- 1		`
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		<u> </u>
b	If "Yes," has it filed a tax return on Form 990-T_for this year?	N	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		Ļ	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:			l		
	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	e law				
	remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XI	/		7	X	
				ŀ		ļ
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
_	MI		i			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		ļ			
_	of each state as required by General Instruction G? If "No," attach explanation		ŀ	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call	enoar	}			
40	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV		}	9 10		X
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses		For)-PF	(2015)

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3b

4a

N/A

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2015)

had not been removed from jeopardy before the first day of the tax year beginning in 2015?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

X

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Form 990-PF (2015) CRAIN FAMILY FOUNDATION		618818 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Man Paid Employees, and Contractors (continued)	agers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	······································	-
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(-) -)/	
1012		
		<u> </u>
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		:-
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informa number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	tion such as the	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	2.	Amount
1 N/A		-
2		 -
		_
All other program-related investments See instructions.		
3		
Total. Add lines 1 through 3	<u> </u>	0.
		Form 990-PF (2015)

	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	dations	s, see instructions)
_	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	1,251,227.
a b	Average of monthly cash balances	1b	1,251,227.
C	Fair market value of all other assets	1c	
ا	Total (add lines 1a, b, and c)	10	1,299,315.
	Reduction claimed for blockage or other factors reported on lines 1a and		
е	1c (attach detailed explanation) 1e 0 •		
•	To (attach defined department)	2	0.
2	Acquisition indebtedness applicable to line 1 assets Subtract line 2 from line 1d	3	1,299,315.
3	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	19,490.
4		5	1,279,825.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	6	63,991.
ਰੀ	Minimum investment return. Enter 5% of line 5 art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an		
Ŀ	foreign organizations check here and do not complete this part.)	u certan	1
-	Minimum investment return from Part X, line 6	1	63,991.
	Tax on investment income for 2015 from Part VI, line 5	7, 3	
b	Income tax for 2015 (This does not include the tax from Part VI.)	2 %	
C	Add lines 2a and 2b	2c	154.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	63,837.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	63,837.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	63,837.
_	AT VIII		
_	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	64,623.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	a.c	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3ь	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	64,623.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
_	-income. Enter 1% of Part-I,-line 27b	5_	154.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	64,469.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	jualifies	for the section
	4940(e) reduction of tax in those years.		

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+ YIII	Undistributed	Income	(eac instructions)
		HICOHIC	(see instructions)

				
	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,	,		, ,	62.025
line 7	<u> </u>			63,837.
2 Undistributed income, if any, as of the end of 2015			.,	. ,.,
a Enter amount for 2014 only			62,888.	* * *
b Total for prior years:		200		1 3 1 1 1 1 1 1 1
2013,,	· · · · · · · · · · · · · · · · · · ·	926.		* * */>, * */>
3 Excess distributions carryover, if any, to 2015:			x 3 / 3 * 3 * 5 * 5 * 5	\$
a From 2010	,			1 C 7 L 2 3 Car
b From 2011		<u> </u>	, , ,	* 32
c From 2012			`	
d From 2013				۲
e From 2014				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from	·			
Part XII, line 4: \triangleright \$ 64,623.				
a Applied to 2014, but not more than line 2a	<u> </u>		62,888.	
b Applied to undistributed income of prior				ż
years (Election required - see instructions)		926.		<u> </u>
c Treated as distributions out of corpus				X 4
(Election required - see instructions)	0.	,	<u> </u>	
d Applied to 2015 distributable amount				809.
e Remaining amount distributed out of corpus	0.	*	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	î
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount	0.		* * * * * * * * * * * * * * * * * * * *	0.
must be shown in column (a)) 6 Enter the net total of each column as				
indicated below:	7 4V 5. V. A V			
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	# \$ 48 m	
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			218 TE 168 HS	\$ 4 '92 12 30 13 3 3 3 4
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line	(A) (A) (A)	. 43		
4a from line 2a. Taxable amount - see instr.	· ** ,		0.	
f Undistributed income for 2015. Subtract		,	* `	
lines 4d and 5 from line 1. This amount must		`	·	
be distributed in 2016			٠.	63,028.
7 Amounts treated as distributions out of		, ,	· * *	198 30 30 30 30 5 5 5 5 5 5 5 5 5 5 5 5 5 5
corpus to satisfy requirements imposed by		1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
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	0.		% },	\\
9 Excess distributions carryover to 2016.			*	
Subtract lines 7 and 8 from line 6a	0.	2.400000		` i
Analysis of line 9:	> \\ \ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\		,	
a Excess from 2011	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	\$.		
b Excess from 2012	·	*		
c Excess from 2013	` ,	* *		S.
d Excess from 2014	``\$\ \\;	(\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
e Excess from 2015	V 4 0	<u> </u>		
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	AMILY FOUND			38-36	18818 Page 10
Part XIV Private Operating F			-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating	ŀ		
foundation, and the ruling is effective fo	r 2015, enter the date of t	he ruling	▶		
b Check box to indicate whether the found		g foundation described i		4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the	_				
alternative test relied upon:					
a "Assets" alternative test - enter:(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public				1	
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from		-			
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Complet	te this part only i	f the foundation	had \$5.000 or mor	e in assets
at any time during t	•	•			
1 Information Regarding Foundatio			· · · -		
a List any managers of the foundation wh		than 2% of the total conti	ibutions received by the	foundation before the close	of any tay
year (but only if they have contributed n			ibutions received by the	Touridation before the close	on any tax
KEITH E. CRAIN	. , , ,	· // //			
b List any managers of the foundation wh	o own 10% or more of the	e ctock of a corporation (or an equally large ports	on of the ownerchin of a na	rtnerchin or
other entity) of which the foundation ha	s a 10% or greater interes	it.	or an equally large portic	on or the ownership of a pa	thicisinp or
NONE	-				
2 Information Regarding Contributi	on Grant Gift Loan	Scholarchia etc. Dr.	ograme:		
Check here ► X if the foundation of				not accept unsolicited requi	ete for funde. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	·	-			
a The hame, address, and telephone hum	DEL OF E-IIIAH AUUFESS OF H	ne person to whom appir	cations should be addres	556u.	
b The form in which applications should t	e submitted and informat	ion and materials they st	nould include:		
c Any submission deadlines:					
		dana abandu dan	loods of soil f		
d Any restrictions or limitations on award	s, such as by geographica	u areas, charitable fields,	KINGS OF INSTITUTIONS, OF	otner factors:	

Part XV Supplementary Information 3 Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	Amount
Paid during the year				
BEAUMONT	N/A	PC	UNRESTRICTED	
3711 W. THIRTEEN MILE ROAD	[]			
ROYAL OAK, MI 48073		<u> </u>		8,608
CHUKKERS FOR CHARITY	N/A	PC	UNRESTRICTED	
1549 OLD HILLSBORO ROAD FRANKLIN, TN 37069				8,000
				
KENSINGTON CHURCH	N/A	₽C	UNRESTRICTED	
1825 E. SQUARE LAKE RD.				
TROY, MI 48085				1,000
CORNERSTONE SCHOOLS	N/A	PC	UNRESTRICTED	
6861 E. NEVADA DETROIT, MI 48234				5 000
DEIROIT, MI 40234				5,000
THE GROSSE POINTE ACADEMY	N/A	₽C	UNRESTRICTED	
171 LAKE SHORE ROAD	N/A		DIRECTED	
GROSSE POINTE FARMS, MI 48236				500
	ONTINUATION SHEE	T(S)	▶ 3a	62,703
Approved for future payment		:		
NONE				
	-		 	
			 	· · · · · · · · · · · · · · · · · · ·
	L		<u> </u>	

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).
	N/A
	
500001 11 1	Form 990-PF (201

(a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perpury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is the correct, and complete Declaration of preparer (other than texpayer) is based on all information of which preparer has any knowledge. May the IRS discuss to return with the preparer shown below (see institution).			N FAMILY FOUNDAT			18818	Page 13
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? 1 Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other assets b Other transactions: (1) Sales of assets to an anoncharitable exempt organization (2) Purchases of assets to an anoncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rembursement arrangements (5) Loans or loan quarantees (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (7) The answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services greated less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (4) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Decouption of bandon's surrangement, show in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? 2 Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? 3 If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A (b) If yes of organization (c) Description of relationship (c) Description of relationship (d) Description of relationship	Part >			nd Transactions and	d Relationships With Nonch	aritable	
the Code (other than section 50 f(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of. (1) Cash Other transactions: (1) Sales of assets to an oncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guaranties (6) Performance of services or membership or fundrasing solicitations (7) International exemptions of the second services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) International exemptions of the second services or services repeatedly. Column (b) should always show the fair market value of the goods, other assets, or services received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (4) Lean no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and abung arrangement in the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization (d) Description of relationship. 10) In Yes, complete the following schedule. (4) In Yes, complete the following schedule. (4) Name of organization (e) Description of relationship. (5) Loans or load of the second of the	_			·-		T 10	N-
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In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of per pury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is the correct, and complete Declaration of preparer (other than texpayer) is based on all information of which preparer has any knowledge shown below (see instinction).			 				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of per pury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is the correct, and complete Declaration of preparer (other than texpayer) is based on all information of which preparer has any knowledge shown below (see instinction).			 	. .			
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of per pury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is the correct, and complete Declaration of preparer (other than texpayer) is based on all information of which preparer has any knowledge shown below (see instinction).		<u> </u>				·	
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of per pury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is the correct, and complete Declaration of preparer (other than texpayer) is based on all information of which preparer has any knowledge shown below (see instinction).					-		
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of per pury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is the correct, and complete Declaration of preparer (other than texpayer) is based on all information of which preparer has any knowledge shown below (see instinction).							
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of per pury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is the correct, and complete Declaration of preparer (other than texpayer) is based on all information of which preparer has any knowledge shown below (see instinction).							
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of per pury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is the correct, and complete Declaration of preparer (other than texpayer) is based on all information of which preparer has any knowledge shown below (see instinction).							
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of per pury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is the correct, and complete Declaration of preparer (other than texpayer) is based on all information of which preparer has any knowledge shown below (see instinction).							
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of per pury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is the correct, and complete Declaration of preparer (other than texpayer) is based on all information of which preparer has any knowledge shown below (see instinction).			<u> </u>		<u> </u>		
(a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perpury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is the correct, and complete Declaration of preparer (other than texpayer) is based on all information of which preparer has any knowledge. May the IRS discuss to return with the preparer shown below (see institution).		•	•		itions described	П,	₩.
(c) Description of relationship N/A Under penalties of per pury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is the correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge is the correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge is the correct.				ion 527?		Yes	X No
N/A Under penalties of per pury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is the correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge shown below (see inst	<u>b lf"</u>			(h) Tune of propuration	(a) Description of relat	onchin	
Under penalties of per pury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is the correct, and complete Beclaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge show so belief to the correct of the correct		``````	gamzation	(b) Type of organization	(c) Description of relati	OHSHIP	
Sign and belief it is the correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge return with the preparer shown below (see inst		N/A					
Sign and belief it is the correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge return with the preparer shown below (see inst		 					
Sign and belief it is the correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge return with the preparer shown below (see inst							
Sign and belief it is the correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge return with the preparer shown below (see inst							
Sign and belief it is the correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge return with the preparer shown below (see inst		Linder panelties of person I declare	that I have evamined this return including	accompanying schedules and state	ements, and to the best of my knowledge		
	Sign					return with the p	reparer
		I Nod	1 Co Co At	<u>_</u> ا	DDECTDENT		
Signature of officer of trustee Date Title	,	Signature of officer of truste	<u>,, </u>	Date		X Yes	U No
Despt/Comp property's pages			Drodororid or	ignoturo T		TIN	
reparer s signature reparer s signature reparer s signature self- employed		Trinit Type proparer 3 ft	1 Topalet 3 Si	. 10 70 1			
Paid DANIEL C. MAHER Preparer's signature Daniel Mah. 5/13/16 Proparer's signature Preparer's signature P	Paid	DANTET. C	MAHRR Van	el C. Make	2// 5 ///	001220	55
Preparer Firm's name ▶ DELOITTE TAX LLP Firm's EIN ▶ 86-1065772				ı			

(313)396-3000 Form **990-PF** (2015)

Use Only

Firm's address ► 200 RENAISSANCE CENTER, SUITE 3900

DETROIT, MI 48243-1300

Phone no.

	ear (Continuation)	 - ·		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (nome of business)	or substantial contributor	recipient		
INSWORTH SCHOOL	N/A	₽C	UNRESTRICTED	
211 ENSWORTH AVENUE		[
NASHVILLE, TN 37205				2,50
				<u> </u>
GREENWICH INTERNATIONAL FILM FESTIVAL	N/A	₽C	UNRESTRICTED	
55 OLD FIELD POINT ROAD				
GREENWICH, CT 06836				20,00
DARTMOUTH COLLEGE	N/A	PC	UNRESTRICTED	
5066 DEVELOPMENT OFFICE				
HANOVER, NE 03755				2,500
TRANSPOOK COMON	7/2	00		
CRANBROOK SCHOOL 520 LONE PINE ROAD	N/A	₽C	UNRESTRICTED	
BLOOMFIELD HILLS, MI 48303				10,000
,	"		<u> </u>	
THE CHARLOTTE AND GWENYTH GRAY	N/A	₽C	UNRESTRICTED	
FOUNDATION TO CURE BATTEN DISEASE				
6033 WEST CENTURY BLVD SUITE 350 LOS ANGELES, CA 90045				1 27
ANGELIES, CA 30043				1,275
THE NEXT DOOR	N/A	PC	UNRESTRICTED	
P.O. BOX 23336	[",			
NASHVILLE, TN 37202				2,500
ST. GEORGE'S KINDERGARTEN AND	N/A	₽C	UNRESTRICTED	
MOTHER'S DAY OUT				
1715 HARDING ROAD				
NASHVILLE, TN 37205			····	570
NIVERSITY LIGGETT SCHOOL	N/A	PC	UNRESTRICTED	
GROSSE POINTE WOODS, MI 48236				. 250
				
			<u> </u>	<u> </u>

FORM 990-PF DIVID	ENDS	AND INTER	EST	FROM SECUR	ITIES S'	PATEMENT 1
GROS AMOU		CAPITAL GAINS DIVIDENDS	S	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
CHARLES SCHWAB #XX-XXXX-6304 44,	848.	18,33	0.	26,518.	26,518.	
TO PART I, LINE 4 44,	848.	18,33	0.	26,518.	26,518.	
						/
FORM 990-PF		ACCOUNTI	NG 1	FEES	S	ratement 2
DESCRIPTION		(A) XPENSES ER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAX PREPARATION FEES		3,800.		1,900.		1,900.
TO FORM 990-PF, PG 1, LN 1	6B	3,800.		1,900.		1,900.
FORM 990-PF	ОТН	ER PROFES:	SIO	NAL FEES	S	PATEMENT 3
DESCRIPTION		(A) XPENSES ER BOOKS		(B) T INVEST- T INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
CONSULTING & ADVISORY FEES		9,130.		9,130.		0.
TO FORM 990-PF, PG 1, LN 1	6C	9,130.		9,130.		0.
FORM 990-PF		TAX	ES		S	FATEMENT 4
DESCRIPTION		(A) XPENSES ER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES PAID EXCISE TAX		410. 6,444.		410.		0.
TO FORM 990-PF, PG 1, LN 1	.8	6,854.		410.		0.

FORM 990-PF	OTHER E	XPENSES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
STATE OF MICHIGAN REGISTRATION	20.		0.	20
TO FORM 990-PF, PG 1, LN 23	20.		0.	20
FORM 990-PF OTHER DECREASE	ES IN NET AS	SETS OR FUI	ND BALANCES	STATEMENT 6
DESCRIPTION				AMOUNT
CHANGE IN UNREALIZED GAIN ON	INVESTMENTS			36,896
TOTAL TO FORM 990-PF, PART I	II, LINE 5			36,896
FORM 990-PF	CORPORATI	E STOCK		STATEMENT 7
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK (SEE ATTACHE	D)		812,899.	812,899
TOTAL TO FORM 990-PF, PART I	I, LINE 10B	_	812,899.	812,899
FORM 990-PF	CORPORATI	E BONDS		STATEMENT 8
				FAIR MARKET

BOOK VALUE

348,427.

348,427.

VALUE

348,427.

348,427.

CORPORATE BONDS (SEE ATTACHED)

TOTAL TO FORM 990-PF, PART II, LINE 10C

DESCRIPTION



Account Number 9855-6304

Report Period January 1 - December 31, 2015

2015 Year-End Schwab Gain/Loss Report

Realized Gain or (Loss)			A second design		Accounting Meth	Accounting Method [.] Tax Lot Optimizer TM
Short-Term	Quantity/Par	Acquired/ Opened	Sold/ Closed	Total Proceeds	Cost Basis	Realized Gain or (Loss)
PRINCIPAL DIVERSIFIED REAL ASSET INST: PDRDX	7,274 5710	multiple	04/24/15	\$89,903 70	\$94,220 00	(\$4,316.30)
Security Subtotal				\$89,903.70	\$94,220.00	(\$4,316.30)
Total Short-Term				\$89,903.70	\$94,220.00	(\$4,316.30)
Long-Term	Quantity/Par	Acquired/ Opened	Sold/ Closed	Total Proceeds	Cost Basis	Realized Gain or (Loss)
GOLDMAN SACHS STRATEGIC INCM FD INST: GSZIX	3,557 6350	01/28/14 03/11/15	03/11/15	\$36,100.00	\$37,746.51	(\$1,646.51)
GOLDMAN SACHS STRATEGIC INCM FD INST GSZIX	3,721.7420	multiple	12/02/15	\$36,835 25	\$39,448 58	(\$2,613.33)
Security Subtotal				\$72,935.25	\$77,195.09	(\$4,259.84)
JPMORGAN STRATEGIC INCM OPPTY SLCT SHR JSOSX	3,268 9360	multiple	03/11/15	\$38,400 00	\$38,973 89	(\$573 89)
JPMORGAN STRATEGIC INCM OPPTY SLCT SHR· JSOSX	3,191.4860	01/08/14	12/02/15	\$35,989.96	\$38,010.60	(\$2,020.64)
Security Subtotal				\$74,389.96	\$76,984.49	(\$2,594.53)



Account Number 9855-6304

January 1 - December 31, Report Period 2015

2015 Year-End Schwab Gain/Loss Report

Realized Gain or (Loss) (continued)					Accounting Metho	Accounting Method: Tax Lot Optimizer TM
Long-Term (continued)	Quantity/Par	Acquired/ Opened	Sold/ Closed	Total Proceeds	Cost Basis	Realized Gain or (Loss)
PIMCO INCM INST CL. PIMIX	1,110 1210	01/08/14 03/11/15	03/11/15	\$13,700 00	\$13,621.18	\$78 82
Security Subtotal	**************************************			\$13,700.00	\$13,621.18	\$78.82
WASATCH LONG SHORT FD INST: WILSX	2,756.7540	01/08/14 08/17/15	08/17/15	\$37,206.18	\$44,521 57	(\$7,315.39)
Security Subtotal				\$37,206.18	\$44,521.57	(\$7,315.39)
Total Long-Term	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			\$198,231.39	\$212,322.33	(\$14,090.94)

Schwab has provided realized gain/loss information wherever possible for most investments. Cost basis data may be incomplete or unavailable for some of your holdings. See Terms and Conditions.
Option Customers: Realized gain/loss of underlying securities is adjusted to reflect the premiums of assigned or exercised options

(\$18,407.24)

\$306,542.33

\$288,135.09

Total Realized Gain or (Loss)

Page 4 of 5

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rle WA	
<i>ћа</i> СН	
SC	

Account Number 9855-6304

Statement Period December 1-31, 2015

Year to Date

Federally Taxable 18,330 25 This Period 0.00 Federally Tax-Exempt

Income Summary

Total Capital Gains

गुंहद्द्यी।फ्रिस्ट्रांग

Cash Dividends

0.00

Federally Taxable

(10) (15) (10)

000

81/2010 (B)

000

18,330 25 26,11284

0.00 Federally Tax-Exempt

Investment Detail - Cash and Money Market Funds [Sweep]

		. 18
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		· A
ket Value	923 30	(1848)=3.0
Mar		2 <u>\$</u>
		*
		1.00
Cash	Cash	17678

Money Market Funds [Sweep]	Quantity	Market Price	Market Value	Current Yield
SCHWAB GOVT MONEY FUND: SWGXX	74,201.9300	1.0000	74,201 93	%00.0
goal Nainey Warker Fund Space i			90010030 <u>1</u>	

THOM GEORGE LY LONGY LYBERTER (STREET)

Investment Detail - Mutual Funds

		Market	Market	Average		Unrealized
Bond Funds	Quantity	Price	Value	Cost Basis	Cost Basis	Gain or (Loss)
FEDERATED TOTAL RETURN	14,599 0650	10 6500	155,480 04	11 06	161,440 00	(5,959 96)
BOND FD INST CL						



Account Number 9855-6304

Statement Period December 1-31, 2015

Investment Detail - Mutual Funds (continued)

Bond Funds (continued)	Quantity	Market Price	Market Value	Average Cost Basis	Cost Basis	Unrealized Gain or (Loss)
METROPOLITAN WEST TOTAL RETURN BOND I SYMBOL: MWTIX	14,750.0070	10.6200	156,645.07	10 87	160,340.00	(3,694.93)
PIMCO INCM INST CL SYMBOL, PIMIX	3,094.7570	11.7300	36,301 50	12 27	37,865.07	(1,563.57)
Forth Board Austin	324/13(0FE)0			Late Late	900859008	(63)/24(6343)
Equity Funds	Quantity	Market Price	Market Value	Average Cost Basis	Cost Basis	Unrealized Gain or (Loss)
BOSTON PARTNERS LONG SHORT RESEARCH INST SYMBOL· BPIRX	5,391 5040	14.9100	80,387.32	14.91	80,389.47	(2 15)
HARBOR INTERNATIONAL FUND INST CL SYMBOL. HAINX	1,185 9600	59.4300	70,481.60	70.00	83,020.00	(12,538.40)
HARDING LOEVNER INST EMRG MKTS CL I SYMBOL: HLMEX	2,945.9880	14.9600	44,071.98	17.59	51,810.00	(7,738 02)
MFS INTL VALUE CL I SYMBOL. MINIX	2,230 0510	35.7200	79,657.42	35.43	79,010.00	647 42
STERLING CAPITAL STRATTON SM CAP VALUE I SYMBOL: STSCX	267 5980	0068 69	18,702 42	73 66	19,710 00	(1,007 58)



Account Number 9855-6304

Statement Perlod December 1-31, 2015

Investment Detail - Mutual Funds (continued)

Equity Funds (continued)	Quantity	Market Price	Market Value	Average Cost Basis	Cost Basis	Unrealized Gain or (Loss)
STERLING CAPITAL EQUITY INCM INST SYMBOL BEGIX	5,157.3200	16 6200	85,714 66	18 89	97,410 00	(11,695 34)
T ROWE PRICE MID CAP GWTH FD SYMBOL: RPMGX	564.6730	73.3200	41,401.82	7973	45,020 00	(3,618.18)
TOUCHSTONE SANDS CAPITAL INSTL GROWTH FD SYMBOL CISGX	1,775 9360	21.1800	37,614 32	22 37	39,723.58	(2,109.26)
VANGUARD DEVELOPED MKTS INDEX ADM SYMBOL: VTMGX	6,303.6740	11 8200	74,509 43	13 47	84,930.00	(10,420 57)
VANGUARD EXTENDED MARKET INDEX FD ADM SHRS SYMBOL: VEXAX	910 7800	63.5800	57,907.39	65 68	59,820.00	(1,912.61)
VANGUARD 500 INDEX FD ADMIRAL SHRS SYMBOL VFIAX	1,180.2370	188 4800	222,451.07	169 47	200,010.00	22,441.07
जुंट्स्मी(≡् ष्णीक्ष्र/निधन्तीः	97/9/187/2/10		ું ભાગુદામાં કુ		(A)(18)((A)	(40) (40)
ग्रेंट्रिम् विष्याचा निष्ताचित्र	(50,357,5500)	*	4,031,320.02)		algood course	(66),673,(69)



Account Number 9855-6304

Statement Period December 1-31, 2015

Investment Detail - Total

Marie Carles Carlo	Light of the transfer of the same of the s
	SPACE CONTROL TO THE STATE OF T

Realized Gain or (Loss)

		Acquired/	Sold/			Realized
Long Term	Quantity/Par	Opened	Opened Closed	Total Proceeds	Cost Basis	Gain or (Loss)
GOLDMAN SACHS STRATEGIC INCM FD INST. GSZIX	3,721 7420	multiple	multiple 12/02/15	36,835 25	39,448 58	(2,613 33)
JPMORGAN STRATEGIC INCM OPPTY SLCT SHR: JSOSX	3,191 4860	01/08/14 12/02/15	12/02/15	35,989.96	38,010 60	(2,020 64)
	And the second s		The state of the s	i kalendari	00.000/24/	(ABBBBB)

Schwab has provided accurate realized gain and loss information wherever possible for most investments. Cost basis data may be incomplete or unavailable for some of your holdings. If all data for a given (PACKED OFF) investment is not available, the investment will not be listed here Tiotal Resilized Gettn or (15038)

Option Customers Realized gain/loss of underlying securities is adjusted to reflect the premiums of assigned or exercised options. Please consult IRS publication 550, Investment Income and Expenses, for additional information on Options

Transaction Detail - Purchases & Sales

Bond Funds Activity

Settle Date	Trade Date	Settle Date Trade Date Transaction	Description	Quantity	Unit Price	Total Amount
12/03/15	12/02/15	Bought	FEDERATED TOTAL RETURN	927.6440	10.7800	(10,010 00)
			BOND FD INST CL: FTRBX			



Account Number 9855-6304

Statement Period December 1-31, 2015

Transaction Detail - Purchases & Sales (continued)

Bond Func	ds Activity	Bond Funds Activity (continued)				
Settle Date	Trade Date	Settle Date Trade Date Transaction	Description	Quantity	Unit Price	Total Amount
12/03/15 12/02/15 Sold	12/02/15	Sold	GOLDMAN SACHS STRATEGIC INCM FD INST: GSZIX	(3,721.7420)	0006 6	36,835.25
12/03/15	12/02/15	Sold	JPMORGAN STRATEGIC INCM OPPTY SLCT SHR: JSOSX	(3,191 4860)	11 2800	35,989.96
12/03/15	12/02/15	Bought	METROPOLITAN WEST TOTAL RETURN BOND I: MWTIX	925.0690	10.8100	(10,010.00)
12/03/15	12/02/15 Bought	Bought	PIMCO INCM INST CL: PIMIX	1,069.0790	12.1600	(13,010.00)
्राविद्यास्त्र	oeneod Ponde Advi	edivity		· · · · · · · · · · · · · · · · · · ·		经的格别

Transaction Detail - Deposits & Withdrawals

Tickett Fundament & States

39,49538

THE CHARLES SEE LEGISLE OF

Transaction	ransaction Process			
Date	Date	Activity	Description	Credit/(Debit)
12/01/15	12/01/15	12/01/15 Funds Paid	SCHWAB ONE CHECK 000144	(1,275.00)
12/29/15	12/29/15	12/29/15 Funds Paid	SCHWAB ONE CHECK 000146	(2,000.00)
12/15/15	12/15/15	12/15/15 Funds Paid	SCHWAB ONE CHECK 000147	(10,000 00)
12/10/15	12/10/15	12/10/15 Funds Paid	SCHWAB ONE CHECK 000148	(250.00)
12/10/15	12/10/15	Funds Paid	SCHWAB ONE CHECK 000149	(1,500.00)
12/16/15	12/16/15	12/16/15 Funds Paid	SCHWAB ONE CHECK 000150	(210.00)
Trotallou	જ્યોર હૈ.જી	મહીંતાપ્રાહે 🚆 🤏 🚏	一种,我们就是一个一种,我们就是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个	(0.0388.00)

The total deposits activity for the statement period was \$0.00 The total withdrawals activity for the statement period was \$18,595 00

Election to Treat Qualifying Distribution as Coming From Corpus Pursuant to Code Sec. 4942(h)(2) and Reg. §53.4942(a)-3(d)(2)

Crain Family Foundation 1155 Gratiot Avenue Detroit, MI 48207-2931

Identification Number: 38-3618818

Tax Year End: 12/31/2015

Pursuant to Code Sec. 4942(h)(2) and Reg. §53.4942(a)-3(d)(2), Crain Family Foundation elects the qualifying distribution of \$64,623 AMOUNT DISTRIBUTED IN CURRENT YEAR in 2015 is treated as made: (i) \$926 out of the undistributed income for 2013 under subparagraph (1)(i) of this paragraph; (ii) \$62,888 AMOUNT OF UNDISTRIBUTED FROM 2014 out of the undistributed income for 2014 under subparagraph (1)(ii) of this paragraph.

Authorized Signer, Title