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Department of the

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public
 ▶ Information about Form 990 and its instructions is at www IRS qov/form990

Open to Public

DLN: 93493312023386 OMB No 1545-0047

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1 Briefly describe the organization's mission or most significant activities Endowments and grants to Christian and other charitable orgs, DAFs and Charitable Trusts 2 Check this box ▶ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a)	18 18 18 18 18 18 18 18	the organization disconnections of the governing twoting members of the governing that the control of the contr	continued its operations or body (Part VI, line 1a)	nd Charitable		ts net as		
1 Briefly describe the organization's mission or most significant activities Endowments and grants to Christian and other charitable orgs, DAFs and Charitable Trusts 2 Check this box ▶ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a)	18 18 18 18 18 18 18 18	the organization disconnections of the governing twoting members of the governing that the control of the contr	continued its operations or body (Part VI, line 1a)	nd Charitable		ts net as		
2 Check this box	Section Page 20 Pag	the organization disc bers of the governing voting members of luals employed in ca	continued its operations or goody (Part VI, line 1a)	disposed of n		ts net as		
Total unrelated business revenue from Part VIII, column (C), line 12	Ta Total unrelated business revenue from Part VIII, column (C), line 12 7a 484,777	bers of the governing voting members of luals employed in ca	g body (Part VI, line 1a) .		nore than 25% of I	ts net as		
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B Net unrelated business taxable income from Form 990-T, line 34	B Net unrelated business taxable income from Form 990-T, line 34 7b 233,52	eers (estimate if nec	essary)			6	11	
Prior Year Current Year	Prior Year Current Year					7a	484,777	
## Contributions and grants (Part VIII, line 1h)	8 Contributions and grants (Part VIII, line 1h)	taxable income from	Form 990-T, line 34 .	<u></u>		7b	233,523	
9 Program service revenue (Part VIII, line 2g)	9 Program service revenue (Part VIII, line 2g)			_	Prior Year		Current Year	
Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	rants (Part VIII, line	1h)				8,474,712	
Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		= -	-			1,333,672	
Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)			-	3,862		598,928	
12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)			· · · · · · · · · · · · · · · · · · ·		227	0	
### 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	lines 8 through 11 (i	nust equal Part VIII, colur	nn (A), iine	14,000	,805	10,407,312	
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e)	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,026,910 1,065,285 1,065,285	ımounts paıd (Part I)	K, column (A), lines 1-3)		9,453	3,469	19,916,829	
5-10) 1,085,21 16a Professional fundraising fees (Part IX, column (A), line 11e)	16a Professional fundraising fees (Part IX, column (A), line 11e) 0	or members (Part IX	, column (A), line 4)	[0	0	
16a Professional fundraising fees (Part IX, column (A), line 11e)	16a Professional fundraising fees (Part IX, column (A), line 11e)	pensation, employee	benefits (Part IX, column ((A), lines	1 026	910	1 065 281	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,941,024 1,805,83 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 12,421,403 22,787,93 19 Revenue less expenses Subtract line 18 from line 12 1,579,402 -12,380,6	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,941,024 1,805,82 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 12,421,403 22,787,93 19 Revenue less expenses Subtract line 18 from line 12 1,579,402 -12,380,61 8 Beginning of Current Year End of Year 20 Total assets (Part X, line 16)				1,020	·		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,941,024 1,805,83 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 12,421,403 22,787,93 19 Revenue less expenses Subtract line 18 from line 12 1,579,402 -12,380,6	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,941,024 1,805,82 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 12,421,403 22,787,93 19 Revenue less expenses Subtract line 18 from line 12 1,579,402 -12,380,61 8 Beginning of Current Year End of Year 20 Total assets (Part X, line 16)	-	, ,,			0	0	
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19 Revenue less expenses Subtract line 18 from line 12	19 Revenue less expenses Subtract line 18 from line 12		·	_			1,805,821	
	Beginning of Current Year End of Year	•		·	· · · · · · · · · · · · · · · · · · ·		22,787,931	
Beginning of Current Year End of Year 20 Total assets (Part X, line 16)	Beginning of Current Year End of Year	ses Subtract line 18	3 from line 12		1,579	9,402	-12,380,619	
20 Total assets (Part X, line 16)	20 Total assets (Part X, line 16)			E	Beginning of Curren	t Year	End of Year	
30	21 Total liabilities (Part X, line 26)	(, line 16)			263,922	2,972	221,743,472	
21 Total liabilities (Part X, line 26)	25 22 Net assets or fund balances Subtract line 21 from line 20 94.919.785 79.053.16							
22 Net assets or fund balances Subtract line 21 from line 20 94,919,785 79,053,10					94,919	785	79,053,166	
Part II Signature Block	Part II Signature Block	k				•		
Part II Signature Bloc	Part II Signature Bloc	v t la foul a salon x r b	venue (Part VIII, line (Part VIII, column (A), line lines 8 through 11 (r amounts paid (Part IX) for members (Part IX) spensation, employee assing fees (Part IX, column (D), art IX, column (A), line lid lines 13–17 (must spensation (Part IX) ses Subtract line 18 X, line 16) balances Subtract line	venue (Part VIII, line 2g)	venue (Part VIII, line 2g)	venue (Part VIII, line 2g) 1,656 (Part VIII, column (A), lines 3, 4, and 7d) 3,862 t VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 14,000 lines 8 through 11 (must equal Part VIII, column (A), line 14,000 amounts paid (Part IX, column (A), lines 1-3) 9,453 for members (Part IX, column (A), line 4) appensation, employee benefits (Part IX, column (A), lines 1,026 aising fees (Part IX, column (A), line 11e) aises (Part IX, column (D), line 25) ►634,357 art IX, column (A), lines 11a-11d, 11f-24e) art IX, column (A), lines 12a-17 (must equal Part IX, column (A), line 25) 12,425 anses Subtract line 18 from line 12 X, line 16) 263,922 art X, line 26) 169,003 balances Subtract line 21 from line 20 94,919	venue (Part VIII, line 2g) 1,656,958 (Part VIII, column (A), lines 3, 4, and 7d) 3,862,016 t VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 227 lines 8 through 11 (must equal Part VIII, column (A), line 14,000,805 amounts paid (Part IX, column (A), lines 1-3) 9,453,469 for members (Part IX, column (A), line 4) 0 appensation, employee benefits (Part IX, column (A), lines 1,026,910 aising fees (Part IX, column (A), line 11e) 0 asses (Part IX, column (D), line 25) ►634,357 1,941,024 art IX, column (A), lines 11a-11d, 11f-24e) 1,941,024 Id lines 13-17 (must equal Part IX, column (A), line 25) 12,421,403 anses Subtract line 18 from line 12 1,579,402 Beginning of Current Year X, line 16) 263,922,972 rt X, line 26) 169,003,187 balances Subtract line 21 from line 20 94,919,785	

VIII, IX, or X as applicable

If "Yes," complete Schedule D, Part X 🛸

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Form 990 (2015)

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19

20a

20b

Yes

Yes

Yes

Yes

Yes

Yes

Yes

1 01111	1990 (2013)			Page 3
Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 💆	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 😕	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 💆	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt			No.

negotiation services? If "Yes," complete Schedule D, Part IV 🕲

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of

its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 💆

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets

f Did the organization's separate or consolidated financial statements for the tax year include a footnote that

b Was the organization included in consolidated, independent audited financial statements for the tax year?

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🥦

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If

addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 💆

assistance to or for foreign individuals? If "Yes," complete Schedule F, Paits III and IV 🔀

IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

14a Did the organization maintain an office, employees, or agents outside of the United States?

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

Nο

Nο

	checkist of Required Schedules (continued)		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's		Π

current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d

instructions for applicable filing thresholds, conditions, and exceptions)

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior

year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current

or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family

Was the organization a party to a business transaction with one of the following parties (see Schedule L. Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 🔧 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 💆 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Pait II, III, or IV,

b If Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🔧 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . 🛂 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

Yes

24a

24b

24c

24d

25a

25b

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28a

28b

28c

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Yes

Yes

Yes

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Yes

Form 990 (2015)

Yes

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orm	990 (2015)			Page !
Par				
	Check if Schedule O contains a response or note to any line in this Part V	• •		
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 21	$\overline{}$	Yes	No
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered			
b	by this return	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
	If "Yes," enter the name of the foreign country ▶			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	Yes	
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		No
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		No
9 a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter	9b		No
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities]		
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand	1 1		1

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*.

14a

14b

independent

year by the following The governing body? . .

Section C. Disclosure

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11a

12a

12h

12c

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15a

15b

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16b

Yes

Yes

Yes

Yes

Form 990 (2015)

Yes

Yes

Yes

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Νo

0 (2015)	
Governance Management and Disclosure	

1h

	describe the circumstances, processes, or changes in Schedule O.	,		, 10	D DCIO	, ,
	Check if Schedule O contains a response or note to any line in this Part VI		 			
Se	ction A. Governing Body and Management					
					Yes	N
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	8			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are					

Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any

Did the organization delegate control over management duties customarily performed by or under the direct

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or

Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders,

Did the organization contemporaneously document the meetings held or written actions undertaken during the

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters,

affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing

Were officers, directors, or trustees, and key employees required to disclose annually interests that could give

c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe

Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Did the organization become aware during the year of a significant diversion of the organization's assets?

Did the organization have members or stockholders?

10a Did the organization have local chapters, branches, or affiliates?

b Describe in Schedule O the process, if any, used by the organization to review this Form 990 **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13

Did the organization have a written document retention and destruction policy?

a The organization's CEO, Executive Director, or top management official

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)

interest policy, and financial statements available to the public during the tax year

List the States with which a copy of this Form 990 is required to be filed▶

Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)

State the name, address, and telephone number of the person who possesses the organization's books and records ▶DANIEL L COOPER CFO 385 E COLORADO BLVD SUITE 250 PASADENA, CA 91101 (626) 792-3232

b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Upon request Other (explain in Schedule O)

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

supervision of officers, directors or trustees, or key employees to a management company or other person? .. Did the organization make any significant changes to its governing documents since the prior Form 990 was

VΙ	Governance, Management, and Disclosure
	For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below,
	describe the circumstances, processes, or changes in Schedule O. See instructions.
	Charles Cale data O and the control of the control of the control of the Cale data of the C

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0 - in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than son is	n one s bot rect	not bo: th ar or/tr	t check x, unle n office rustee	ess er e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) BILL W HOEHN III	0 40									
Director (Through 05/1/15)		×						0	0	C
(2) CLIFF PENNER Director	0 40	х						0	0	C
(3) Daniel Villanueva Director	0 40	×						0	0	C
(4) Dennis K Metzler Director (Through 10/1/15)	0 40	х						0	0	(
(5) Jim Hunt Director (Through 08/1/15)	0 40	×						0	0	(
(6) KATHERINE DRAKE	0 40	×						0	0	(
(7) MARK LABBERTON Director	0 40	x						0	0	(
(8) Robert J Ceremsak Director	0 40	×						0	0	ſ
(9) Roy L Rogers Director	0 40	×						0	0	ı
(10) SCOTT BEDFORD Director (Through 10/1/15)	0 40	х						0	0	ı
(11) THOMAS P HARBOLT Executive Director	20 00	х		х				371,355	371,355	72,32
(12) James Rea Director	0 40	х						0	0	I
(13) Martin Liu CFO & Treasurer (Through 12/31/15)	20 00			х				257,261	257,261	70,99
(14) Mark Wentzien	0 50			X				0	245,743	48,99
Secretary	39 50			``				-	2.0,7.	.=,==

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organization (W- 2/1099	on d ns	Estin amou oth compei from	nated int of ner nsation
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)		organi and re organiz	elated
(15) Daniel L Cooper	20 00			×				10,708	10,	708		
CFO (beginning 12/1/15) (16) Todd B Derrick	20 00											
Client Relations Mgr/Former Officer	40 00						×	C	162,	885		51,06
4h Cub Tabal				<u> </u> ▶								
1b Sub-Total	I, Section A .		•	•			6:	39,324	1,047,952			243,381
Total number of individuals (including but n \$100,000 of reportable compensation from	ot limited to tho		ed al		≘) w	ho red		<u> </u>	, ,			
											Yes	No

	on line 1a? If "Yes." complete Schedule J for such individual	l _	.,	
	on line 1d 17 yes, comprete senedates for such marriada.	3	Yes	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person			No
Se	ection B. Independent Contractors			

Complete this table for your five highest compensated independent cont compensation from the organization. Report compensation for the calend		
(A) Name and business address	(B) Description of services	(C) Compensation
I Like Giving DBA ILB	Consulting	137,500
5550 Tech Center Dr Ste 305 Colorado Spnngs, CO 80919		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization \blacktriangleright 1

Part V		Statement o			and the Doub VIII			Page
			ule O contains a respoi	ise or note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
st st	1a	Federated cam						
Grants Amounts	b	Membership du	es 1b					
s. G Am	С	_	ents 1 c					
Gift ilar	d	_	ations 1d					
ns, Sim	e	Government grants						
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above	8,474,712				
ti b	g	Noncash contribute	ons included in lines	2,461,130				
Con	h	Total. Add lines	s 1a-1f		8,474,712			
				Business Code				
Program Service Revenue	2a	Cost Recovery Ass	essment	525920	1,333,672	1,333,672		
á	Ь							
₩Ce	C							
<u>\$</u>	d e							
ıranı	f	All other progra	am service revenue					
₽oç	g	Total Add lines	s 2a-2f		1,333,672			
	3		ome (including dividen					
		and other simila	ar amounts)	▶ [439,973		484,777	-44,80
	4 5	Royalties						
		,	(ı) Real	(II) Personal				
	6a	Gross rents						
	ь	Less rental expenses						
	c	Rental income						
	d	or (loss) Net rental incoi	me or (loss)	•				
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	33,013,749					
	ь	Less cost or other basis and sales expenses	32,854,794					
	c	Gain or (loss)	158,955					
	d en		(S)	· · · · >	158,955			158,95
Other Revenue	8a	Gross income f events (not inc \$ of contributions						
Ř		See Part IV, lin	ne 18 a					
the	ь	Less direct ex						
ŏ	С	Net income or ((loss) from fundraising	events ▶				
	9a	Gross income f See Part IV, lin	rom gaming activities le 19					
	b c		penses b (loss) from gaming acti	vities				
	10a	Gross sales of returns and allo	owances .					
	ь	Less cost of a	a oods sold b					
	c		(loss) from sales of inv	entory ►				
		Miscellaneous	s Revenue	Business Code				
	11a							
	b							
	d	All other reven	ue					
	e	Total. Add lines		•				
	12	Total revenue.	See Instructions .	•	10,407,312	1,333,672	484,777	114,15

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Schedule O)

Cost Recovery Expenses

Unrelated Bus Inc Tax

Payroll Processing, Staf

Total functional expenses. Add lines 1 through 24e

Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ If following SOP 98-2 (ASC 958-720)

TAXES & LICENSES

All other expenses

Part IX **Statement of Functional Expenses**

Section	on $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns	All other organiz	ations must com	plete column (A)		
Check if Schedule O contains a response or note to any line in this Part IX						
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses	
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	13,216,829	13,216,829			
2	Grants and other assistance to domestic individuals See Part IV, line 22					
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	6,700,000	6,700,000			
4	Benefits paid to or for members					
5	Compensation of current officers, directors, trustees, and key employees	639,324		454,642	184,682	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$					
7	Other salaries and wages	226,115		160,797	65,318	
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	42,347		30,066	12,281	
9	Other employee benefits	114,329		81,174	33,155	
10	Payroll taxes					
		43,166		30,648	12,518	
11	Fees for services (non-employees)					
a	Management					
b	Legal	26,045		26,045		
С	Accounting	48,000		48,000		
d	Lobbying					
е	Professional fundraising services See Part IV, line 17					
f	Investment management fees	253,234		253,234		
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	190,639		40,639	150,000	
12	Advertising and promotion	52,219			52,219	
13	Office expenses	41,722		29,304	12,418	
14	Information technology	63,708		45,233	18,475	
15	Royalties					
16	Occupancy	153,732		109,150	44,582	
17	Travel	44,249		31,417	12,832	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials					
19	Conferences, conventions, and meetings	2,500		1,775	725	
20	Interest					
21	Payments to affiliates					
22	Depreciation, depletion, and amortization	28,004		19,883	8,121	
		1				

Other expenses Itemize expenses not covered above (List

miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on

808,560 20,725,389

4,314

808,560

75,400

8,348

3,782

1,365

22,787,931

969 1,428,185

3,063

56,219

5,927

1,251

19,181

2,421

3,782

634,357

Form 990 (2015)

171,530,772

142,334,534

142,690,306

17,712,169

44,537,826

16,803,171

79,053,166

221,743,473 Form 990 (2015)

212, 154, 194

168,238,623

169,003,187

18,827,138

57,017,500

19,075,147

94,919,785

263,922,972

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		Check if Schedule O contains a response or note to any \ensuremath{I}	ne in th	ıs Part X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			7,212,947	1	3,910,47
	2	Savings and temporary cash investments			5,276,915	2	9,101,624
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			612,012	4	144,926
	5	Loans and other receivables from current and former offitrustees, key employees, and highest compensated empII of Schedule L	loyees	Complete Part	0.050.000		
					2,350,000	5	2,350,000
Assets	6	Loans and other receivables from other disqualified pers section 4958(f)(1)), persons described in section 4958 contributing employers and sponsoring organizations of voluntary employees' beneficiary organizations (see ins Part II of Schedule L		6			
As	7	Notes and loans receivable, net		490,000	7	124,16	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			43,980	9	34,876
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	656,259			
	b	Less accumulated depreciation	10b	381,097	334,223	10c	275,16
	11	Investments—publicly traded securities			28,907,360	11	28,590,63

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Net Assets or Fund Balances

Liabilities	

	13	Investments—program-related See Part IV, line 11	3,407,000	13	3,647,000
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	3,134,341	15	2,033,834
	16	Total assets.Add lines 1 through 15 (must equal line 34)	263,922,972	16	221,743,472
	17	Accounts payable and accrued expenses	764,564	17	355,772
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Ξ		persons Complete Part II of Schedule L		22	
Lia	23	Secured mortgages and notes payable to unrelated third parties		23	
Ī	24	Unsecured notes and loans payable to unrelated third parties		24	

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ▶ 🙀 and complete

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Investments—other securities See Part IV, line 11 . . .

and other liabilities not included on lines 17-24)

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances

Total liabilities. Add lines 17 through 25 .

lines 27 through 29, and lines 33 and 34.

Complete Part X of Schedule D

Unrestricted net assets .

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

complete lines 30 through 34.

Page **12**

Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI

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10,407,312

Total revenue (must equal Part VIII, column (A), line 12)

Other changes in net assets or fund balances (explain in Schedule O) .

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,

1 Accounting method used to prepare the Form 990 ☐ Cash ☐ Accrual ☐ Other

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

✓ Consolidated basis

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

If the organization changed its method of accounting from a prior year or checked "Other," explain in

Check if Schedule O contains a response or note to any line in this Part XII

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If the organization changed either its oversight process or selection process during the tax year, explain in

Both consolidated and separate basis

Both consolidated and separate basis

22,787,931 -12,380,619 94,919,785

-4,713,256

1,227,256 79,053,166

Yes

Yes

Yes

2a

2b

2c

3a

3b

No

Νo

Νo

Form 990 (2015)

- Total expenses (must equal Part IX, column (A), line 25)
- Revenue less expenses Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . .
- Net unrealized gains (losses) on investments .
- Donated services and use of facilities .
- Investment expenses
- Prior period adjustments .

Part XII Financial Statements and Reporting

a separate basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

column (B))

Schedule O

Schedule O

Separate basis

Separate basis

basis, consolidated basis, or both

efil	le GF	RAPHIC pr	int - DO I	NOT PROCES	S As Filed Da	ta -		DLN: 9:	3493312023386	
990EZ)			Complete if the	Public Charity Status and Public Support omplete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. on formation about Schedule A (Form 990 or 990-EZ) and its instructions is at			Ort r a section	2015 Open to Public		
Depar Treasi	tment (ury	of the		vw.irs.gov/fo	•				Inspection	
Intern	al Reve	enue Service								
		he organizat oundation	ion					Employer identific	ation number	
THE I	uner ro	Junuation						95-4124436		
Pa	rt I	Reason	for Publi	c Charity S	tatus (All organiza	ations must c	omplete this	part.) See instructi	ons.	
The	organı	zation is not	a private fo	oundation beca	use it is (For lines 1	through 11, c	heck only one b	ox)		
1		A church,	convention	of churches, o	r association of churc	hes described	ın section 170(b)(1)(A)(i).		
2	Ė	A school d	escribed in	section 170(b)(1)(A)(ii).(Attach S	chedule E (For	m 990 or 990-l	EZ))		
3	Ė	A hospital	or a cooper	atıve hospital	service organization	described in se	ection 170(b)(1)(A)(iii).		
4	Ė	A medical	research or	ganızatıon ope	rated in conjunction i	with a hospital	described in se	ction 170(b)(1)(A)(ii	i). Enter the	
_	_		name, city,		andit of a nallogo ar un		l av apavatad bu	a governmental unit	dooonbod in seetien	
5	l			omplete Part I		iiveisity owner	i or operated by	a governmentar unit	described in Section	
6				•	or governmental unit	t described in s	section 170(b)(1)(A)(v).		
7	Ī						from a governm	ental unit or from the	general public	
	_				i). (Complete Part II		\r+ TT \			
8 9	<u> </u>		•		ion 170(b)(1)(A)(vi)		•	ributions, membership	fees and gross	
10	 -	receipts fr from gross organizati	om activition investmer on after Jun	es related to it it income and i ie 30, 1975 S	s exempt functions—s	subject to cert xable income ((Complete Pai	ain exceptions, (less section 51 t III)	and (2) no more than 1 tax) from business	331/3% of its support	
11	<u> </u>		_	•	•		•	ictions of, or to carry o	out the purposes of	
	ı	one or mor	e publicly s	upported orga	nızatıons described ır	section 509(a)(1) or section	509(a)(2) See section	on 509(a)(3). Check	
_	_							l complete lines 11e, organization(s), typica		
а	ı			- :	· · ·		• •	tors or trustees of the		
		organizatio	n You mus	t complete Pa	rt IV, Sections A and	В.	•		-	
b								orted organization(s),		
		_		V, Sections A		same persons	that Control of	manage the supported	a organization(s) fou	
c	Г					on operated in	connection with	, and functionally inte	grated with, its	
	·				uctions) You must co					
d								with its supported org rement and an attentiv		
				_	te Part IV, Sections A			emene and an accent	veness requirement	
е		Check this	box if the o	organization re	ceived a written detei	rmination from	the IRS that it	ıs a ⊤ype I, ⊤ype II, ⊺	Type III functionally	
£	F-4-				ally integrated suppoi		ion			
f	Ente			•	ns			· · · · · · · · —		
g		1 TOVIGE CIT	z ionowing i	mormation abo	out the supported orgi	amzacion(3)				
		(i)		(ii)EIN	(iii)	(iv	')	(v)	(vi)	
Name of supported orga		ganızatıon	, ,	Type of organization (described on lines 1 - 9 above (see instructions))	Is the organisted in you docum	anızatıon r governıng	A mount of monetary support (see instructions)	Amount of other support (see instructions)		
						Yes	No	<u> </u>		
Tota	<u> </u>			<u> </u>		<u> </u>	1			
For F	aperv	work Reducti	on Act Not	ice, see the In	structions for Form 9	90 or 990EZ.	Cat No 112		n 990 or 990-EZ) 2015	

Schedule A (Form 990 or 990-EZ) 2015 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar vear (a)2011 **(b)**2012 (d)2014 (e)2015 (f)Total (c)2013(or fiscal year beginning in) ▶ 1 Gifts, grants, contributions, and 8,474,712 30,108,205

	membership fees received (Do not include any unusual grants)	4,787,524	2,878,970	5,485,395	8,481,604	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	_				
3	The value of services or facilities furnished by a governmental unit to the organization without charge					
4	Total. Add lines 1 through 3	4,787,524	2,878,970	5,485,395	8,481,604	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included					

amount shown on line 11, column Public support. Subtract line 5 from line 4 Section B. Total Support

Calendar year

on line 1 that exceeds 2% of the

and income from similar sources Net income from unrelated business activities, whether or

not the business is regularly

capital assets (Explain in Part

10 Other income Do not include gain or loss from the sale of

11 Total support. Add lines 7

carried on

through 10

VI)

12

14

(or fiscal year beginning in) ▶

7 Amounts from line 4

- Gross income from interest,
- dividends, payments received on
- securities loans, rents, royalties

Gross receipts from related activities, etc. (see instructions)

(a)2011

- 4,787,524 161,596
 - - 233,654

2,878,970

30,724

(b)2012

(c)2013

337,690

40,063

17,995

5,485,395

631,356

(d)2014

8,481,604

- 227
 - 233,523

(e)2015

8,474,712

0

8,474,712

30,108,205

14,737,132

15,371,073

30,108,205

1,364,296

304,310

18,222

48 340 %

(f)Total

- 31,795,033 11,452,974
- First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, Section C. Computation of Public Support Percentage Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))

 - Public support percentage for 2014 Schedule A, Part II, line 14

- 14 15
- 52 510 %
- 16a 33 1/3% support test-2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
 - b 33 1/3% support test 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

Schedule A (Form 990 or 990-EZ) 2015

- ▶ 🗸

- ▶┌
- box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14
 - is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
 - b 10%-facts-and-circumstances test 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line

 - 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.
 - Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
 - Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	II. If the organization fails to qualify under the tests listed below, please complete Part II.)							
Se	Section A. Public Support							
	Calendar year	(a)2011	(b) 2012	(c)2013	(d) 2014	(e) 2015	(f) ⊤otal	
(or t	iscal year beginning in) > Gifts, grants, contributions, and	. ,	. ,	. ,	. ,	. ,		
-	membership fees received (Do							
	not include any "unusual grants ")							
2	Gross receipts from admissions,							
	merchandise sold or services performed, or facilities furnished							
	in any activity that is related to							
	the organization's tax-exempt							
	purpose							
3	Gross receipts from activities							
	that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the							
	organization's benefit and either							
	paid to or expended on its behalf							
5	The value of services or facilities							
	furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5							
	Amounts included on lines 1, 2,							
	and 3 received from disqualified							
_	persons							
b	Amounts included on lines 2 and 3 received from other than							
	disqualified persons that exceed							
	the greater of \$5,000 or 1% of							
	the amount on line 13 for the year							
	Add lines 7a and 7b							
8	Public support. (Subtract line 7c from line 6)							
Se	ction B. Total Support			l				
	Calendar year	4.32.44	412242	4.3004.0	4 D204 4	4 22045	(5) =	
(or f	iscal year beginning in) ▶	(a)2011	(b) 2012	(c)2013	(d)2014	(e) 2015	(f) Total	
9	A mounts from line 6							
10a	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties and income from similar sources							
b	Unrelated business taxable							
	income (less section 511 taxes)							
	from businesses acquired after							
_	June 30, 1975 Add lines 10a and 10b							
с 11	Net income from unrelated							
	business activities not included							
	in line 10b, whether or not the							
	business is regularly carried on							
12	business is regularly carried on Other income Do not include							
12	business is regularly carried on Other income Do not include gain or loss from the sale of							
12	business is regularly carried on Other income Do not include							
12	business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c,							
13	business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12)	For the organization	an's first second	third fourth or	ifth tay year ac	section 501/cV	2) organization	
	business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is the same of the same o	or the organization	on's first, second	, third, fourth, or f	ifth tax year as a	section 501(c)(3	3) organization,	
13 14	business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is the check this box and stop here			, third, fourth, or 1	ifth tax year as a	section 501(c)(3) organization, ▶	
13 14	business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is to check this box and stop here Ction C. Computation of Pub	lic Support P	ercentage		ifth tax year as a		B) organization, ▶ □	
13 14 Se 15	business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is facheck this box and stop here ction C. Computation of Pub Public support percentage for 2015	lic Support Position (line 8, column	ercentage (f) divided by line		ifth tax year as a	15	3) organization, ▶ □	
13 14 Se 15 16	business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is the check this box and stop here ction C. Computation of Pub Public support percentage for 2015	lic Support Po (line 8, column of 14 Schedule A, P	ercentage (f) divided by line art III, line 15	13, column (f))	ifth tax year as a		3) organization, ▶ T	
13 14 Se 15 16	business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is to check this box and stop here ction C. Computation of Pub Public support percentage from 2015 Ction D. Computation of Inv	lic Support Post (line 8, column of 14 Schedule A, Postment Inco	ercentage (f) divided by line art III, line 15 me Percenta	13, column (f))	· · · · · · · · · · · · · · · · · · ·	15	3) organization, ▶ □	
13 14 Se 15 16	business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is to check this box and stop here Ction C. Computation of Pub Public support percentage for 2015 Public support percentage from 20; ction D. Computation of Inv Investment income percentage for	lic Support Position 8, column of 14 Schedule A, Postment Inco	ercentage (f) divided by line art III, line 15 me Percenta olumn (f) divided	13, column (f)) ge by line 13, colum	· · · · · · · · · · · · · · · · · · ·	15	3) organization, ▶ □	
13 14 Se 15 16	business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is to check this box and stop here ction C. Computation of Pub Public support percentage from 2015 Ction D. Computation of Inv	lic Support Position 8, column of 14 Schedule A, Postment Inco	ercentage (f) divided by line art III, line 15 me Percenta olumn (f) divided	13, column (f)) ge by line 13, colum	· · · · · · · · · · · · · · · · · · ·	15 16	3) organization, ▶ □	

more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2015

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section	2		
3а	509(a)(1) or (2) Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?	3 c		
4a	If "Yes," explain in Part VI what controls the organization put in place to ensure such use Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9с		
	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	10b		
.1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	· ·			

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI

11c

Page 5

No

Part IV Supporting Organizations (continued) Section B. Type I Supporting Organizations

Section b. Type I Supporting Organizations					
			Yes		
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1			
2	2 Did the organization operate for the benefit of any supported organization other than the supported organization(s)				

that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization

Section C. Type II Supporting Organizations Yes No

Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in **Part VI** how contiol or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s) 1 Section D. All Type III Supporting Organizations Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior

tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the 2 supported organization(s) 3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? 3

If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard Section E. Type III Functionally-Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions) The organization satisfied the Activities Test Complete line 2 below а

The organization is the parent of each of its supported organizations. Complete line 3 below b

c

The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instructions)

2 Activities Test_Answer (a) and (b) below.

a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the

supported organization(s) to which the organization was responsive?

If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the

organization determined that these activities constituted substantially all of its activities

b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of

the organization's supported organization(s) would have been engaged in? If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have

engaged in these activities but for the organization's involvement

3 Parent of Supported Organizations Answer (a) and (b) below.

each of the supported organizations? Provide details in Part VI

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of

b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

Schedule A (Form 990 or 990-EZ) 2015

Yes

2a

2b

3a

3b

No

(B) Current Year (optional)

Page **6**

1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on	Nov 20, 1970 See inst	ructions. All other
	Type III non-functionally integrated supporting organizations must complete Sections	s A through E	
	Section A - Adjusted Net Income	(A) Prior Year	(B) Current Ye

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	•		•	

6	gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	A ggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		(opnonia)
_	, , , ,	-		
а	Average monthly value of securities	1a		
b	A verage monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1 c		
d	Total (add lines 1a, 1b, and 1c)	1d		

	Section B - Minimum Asset Amount	(A) Prior Year	(B) Current Year (optional)	
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1 a		
b	Average monthly cash balances	1 b		
c	Fair market value of other non-exempt-use assets	1 c		
d	Total (add lines 1a, 1b, and 1c)	1 d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
1				

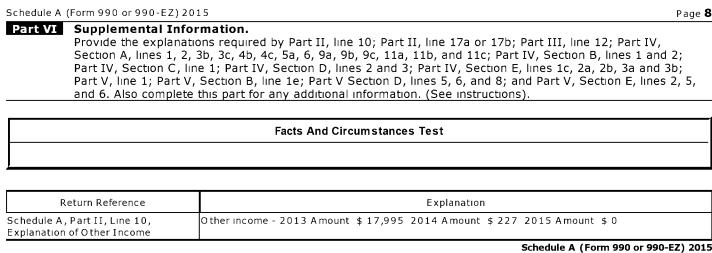
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
	Section C - Distributable Amount		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	

-	racept, me s s, sss	_	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
	Section C - Distributable Amount		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	

4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable A mount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrat	ed Type III supporting o	rganization (see

Section D - Distributions			Current Year
A mounts paid to supported organizations to accom	plish exempt purposes		
2 Amounts paid to perform activity that directly furthe excess of income from activity			
3 Administrative expenses paid to accomplish exemp	ot purposes of supported orga	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	uured)		
6 Other distributions (describe in Part VI) See instru	ictions		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is re	esponsive (provide	
9 Distributable amount for 2015 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
f 1 Distributable amount for 2015 from Section C, line $f 6$			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
_ с			
d From 2013			
e From 2014			
f Total of lines 3a through e			
 g Applied to underdistributions of prior years h Applied to 2015 distributable amount 			
i Carryover from 2010 not applied (see			
instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7			
\$ <u></u>			
A pplied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 31 and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013			
d From 2014			
e From 2015			
		Schedule A	(Form 990 or 990-EZ) (2015

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)



efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**SCHEDULE D**

(Form 990)

DLN: 93493312023386 OMB No 1545-0047

2015

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

reas	irtment of the sury nal Revenue Service	Information about Schedule D	► Attach to Form 990. (Form 990) and its instructions is at <u>www.ii</u>	s.gov/f	orm990.	Open to Pub Inspection	
Na	me of the organi	zation		Empl	oyer identif	fication number	
The	e Fuller Foundation			95-4	124436		
Pa			Advised Funds or Other Similar Fed "Yes" on Form 990, Part IV, line 6.	unds	r Accour	nts.	
			(a) Donor advised funds	(b)	Funds and o	other accounts	
1	Total numbe	r at end of year	56				
2	Aggregate va year)	alue of contributions to (during	8,331,955				
3	Aggregate va	alue of grants from (during year)	17,622,019				
4	Aggregate va	alue at end of year	14,988,151				
5	•		dvisors in writing that the assets held in do the organization's exclusive legal control?	nor advis	ed	√ Yes	- No
6	used only for ch		and donor advisors in writing that grant funds benefit of the donor or donor advisor, or for a		· purpose	√ Yes	_ No
Pa	rt III Consei	rvation Easements. Comple	te if the organization answered "Yes"	on Forn	າ 990, Par	t IV, line 7.	
1		•	e organization (check all that apply)				
	Preservation education)	on of land for public use (e g , recr	eation or Preservation of a	n histor	ıcally impoi	rtant land area	
		of natural habitat	Preservation of a				
	Preservation	on of open space	·				
2	•	2a through 2d if the organization l ne last day of the tax year	held a qualified conservation contribution in	the form	of a conse	rvation	
					Held at	the End of the Ye	ar
а		f conservation easements		2a			
b	•	restricted by conservation easeme		2b			
c d		servation easements on a certified servation easements included in (c	anistoric structure included in (a) and any in the instruction in the	2c			
u		ire listed in the National Register	,, acquired after 5, 17, 65, and not on a	2d	<u> </u>		
3	Number of cons	servation easements modified, trai	nsferred, released, extinguished, or terminat	ed by the	e organızatı	on during the	
	tax year ▶						
4	Number of state	es where property subject to cons	ervation easement is located >				
5		uzation have a written policy regar enforcement of the conservation e	ding the periodic monitoring, inspection, har asements it holds?	dling of	Γ	Yes No	
6	Staff and volunt	teer hours devoted to monitoring,	inspecting, handling of violations, and enforc	ing cons	ervation ea	asements during t	he
	A mount of eyns	ences inclirred in monitoring inche	ecting, handling of violations, and enforcing o	oncerva	tion eacem	ents during the v	ear
7	▶ \$	enses meanea in momeoring, inspe	cerning, manufaction of the controllering to	.01136144	tion cuscin	ients during the y	Jui
8	Does each con	servation easement reported on lir on 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requirements of se	ction 17		_ Yes	
9	balance sheet,	-	ts conservation easements in its revenue ar of the footnote to the organization's financia			•	
Pai	rt IIII Organi	izations Maintaining Collec	tions of Art, Historical Treasures, ed "Yes" on Form 990, Part IV, line 8.	or Oth	er Simila	ar Assets.	
1 a	If the organizat works of art, his	ion elected, as permitted under SF storical treasures, or other similar	FAS 116 (ASC 958), not to report in its reverses the for public exhibition, education, note to its financial statements that describe	or resea	arch in furth		
b	works of art, his	· · · · · · · · · · · · · · · · · · ·	AS 116 (ASC 958), to report in its revenue assets held for public exhibition, education, these items				
((i) _{Revenue inclu}	ided on Form 990, Part VIII, line 1	L	> \$			
(ii) Assets include	ed in Form 990, Part X					
2	If the organizat	ion received or held works of art, h	nistorical treasures, or other similar assets (SFAS 116 (ASC 958) relating to these items	or financ			

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

ar	t III Organizations Maintaining (continued)	Collections of A	Art, Histo	rica	Treasures,	or Ot	her Similar A	sse	ts
3	Using the organization's acquisition, accollection items (check all that apply)	ession, and other red	cords, che	kany	of the following t	hat ar	e a significant us	e of ı	ts
а	Public exhibition		d	Г L	oan or exchange	progr	ams		
b	Scholarly research		e	Г о	ther				
c	Preservation for future generations								
4	Provide a description of the organization	's collections and ex	plaın how t	hey fu	rther the organiza	ation's	s exempt purpose	e in	
5	During the year, did the organization sol assets to be sold to raise funds rather th							s	∏ No
Par	rt IV Escrow and Custodial Arra Complete if the organization Part X, line 21.		n Form 99	0, Pa	rt IV, line 9, oi	repo	orted an amou	nt on	Form 990,
1 a	Is the organization an agent, trustee, cu included on Form 990, Part X?	stodian or other inter	rmediary fo	rcont	ributions or othe	rasse	ts not Ye	s	∏ No
b	If "Yes," explain the arrangement in F	art XIII and complet	te the follo	wing ta	ible .		An	ount	
c	Beginning balance					1 c			
d	Additions during the year					1d			
e	Distributions during the year					1e			
f	Ending balance					1 f			
2a b	Did the organization include an amount of the street of th						•		□ No
Pa	rt V Endowment Funds. Comple								
	·	(a)Current year	(b)Pnor y	ear	b (c)Two years be	ack (d) Three years back	(e)F	our years back
1 a	Beginning of year balance	37,547,836	38,	323,046	36,160,	305	35,585,587		36,877,94
b	Contributions	0		1,669	275,	000	525,510		1,297,710
c	Net investment earnings, gains, and losses	-1,176,205		952,883	4,461,	995	1,721,868		-591,560
d	Grants or scholarships	2,146,025	2,	229,762	2,074,	754	1,672,159		1,998,507
e	Other expenditures for facilities and programs								
f	Administrative expenses								
g	End of year balance	34,225,606	37,	547,836	38,823,	046	36,160,806		35,585,587
2	Provide the estimated percentage of the	current year end bal	ance (line	1g, co	lumn (a)) held as				
а	Board designated or quasi-endowment	0 %							
b	Permanent endowment ► 46 000 %								
c	Temporarily restricted endowment ► The percentages on lines 2a, 2b, and 2c	54 000 % should equal 100%							

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

(ii) related organizations .

If "Yes" on 3a(II), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds

Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a.See Form 990, Part X, line 10.

(a) (b) other basis Description of property

					Cost or other (investmen

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

	(ınvestment)	(other)	, , ,	
1a Land				
b Buildings				
c Leasehold improvements		146,587	49,803	96,784
d Equipment		509,672	331,294	178,378
• Other				

Yes

3a(i)

3a(ii)

3b

Accumulated

No

Νo

Νo

(d)Book value

275,162

Part VII Investments—Other Securities. Co See Form 990, Part X, line 12.	omplete if the orga	anization answered 'Ye	es on Form 990, Part IV, line 11b
(a) Description of security or category (including name of security)	/	(b)Book value	(c)Method of valuation Cost or end-of-year market value
(1)Financial derivatives			,
(2)Closely-held equity interests (3)O ther		246 200	_
(A) Fuller Private Equity Fund, LP		316,398	F
(B) Other Securities		788,023	F
(C) FULLER MULTI-STRATEGY FUND, LP		55,851,543	F
(D) MISSION CORE FUND I		111,683,275	F
(E) Fuller Credit Fund, LP		2,738,500	F
(F) RVP Opportunities Fund II, LP		153,033	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related.	•	171,530,772	
Complete if the organization answere (a) Description of investment	d 'Yes' on Form 9'	90, Part IV, line 11c. _{S.} (b) Book value	ee Form 990, Part X, line 13.
(a) Description of investment		(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organizati	•	- Farma OOO Bart IV Ivaa	11 d Coo Forms 000 Port V line 15
Part IX Other Assets. Complete if the organization (a) Description		n Form 990, Part IV, line	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the org		ed 'Yes' on Form 990.	▶ Part IV. line 11e or 11f.
See Form 990, Part X, line 25.	(b) Book val		
1. (a) Description of Hability	(B) Book van		
Federal income taxes			
INVESTED FUNDS HELD FOR OTHERS	2,67	6,142	
INVESTED FUNDS HELD FOR SEMINARY	20,06	9,296	
IRREVOC TRUSTS HELD FOR OTHERS	37,33	4,139	
IRREVOC TRUSTS HELD FOR SEMINARY	30	5,895	
LIFE INCOME OBLIGATIONS	39,25	8,145	
Inv Held for REVOCABLE TRUSTS		7,062	
UNRESTRICTED FUND FOR SEMINARY	31,86	3,855	

1 2

b

c

d

3

b

c

Part V. Line 4

2e

3

3

4c

Schedule D (Form 990) 2015

Page 4

Investment expenses not included on Form 990, Part VIII, line 7b . b 4c 5 Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line 12) Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Part XII Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 1 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 2a b 2b 2c d 2e

Explanation

Endowment funds are principally general endowment, chairs, and scholarship funds. Also support other Christian organizations with general endowment support, scholarships, chairs, institutes and other designated or restricted purposes. The foundation also has some endowment funds to support

2a

2b

2c

2d

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

the mission of other charitable organizations

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments

Amounts included on Form 990, Part VIII, line 12, but not on line 1

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . .

Part XIII

Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Return Reference



efile GRAPHIC print - DO	NOT PROCESS	As Filed Da	ta -	DLN:	93493312023386
SCHEDULE F (Form 990)	Statement of A	Activities (Outside the Unit	ed States	OMB No 1545-0047
(FOIII 990)	► Complete i	Part IV, line	n answered "Yes" to Form 14b, 15, or 16.	990,	2015
Department of the Treasury Internal Revenue Service ► Info	ormation about Schedu		o Form 990. and its instructions is at w	ww.irs.gov/form990.	Open to Public Inspection
Name of the organization The Fuller Foundation				Employer ider 95-4124436	ntification number
			he United States. orm 990, Part IV, line	14b.	
1 For grantmakers. Does and other assistance, th used to award the grant:	e grantees' eligibil			-	√ Yes No
2 For grantmakers. Descr assistance outside the U		ganızatıon's p	rocedures for monitori	ng the use of its gra	, , , , , , , , , , , , , , , , , , , ,
3 Activites per Region (The	following Part I, line 3	3 table can be d	uplicated if additional sp	ace is needed)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is program service, describe specific type of service(s) in region	a (f) Total expenditures for and investments in region
(1) East Asia and the Pacific	0	0	Grants are made to qualifying charities	Grant Making	6,700,000
(2) Central America and the Caribbean	0	0	Investments		30,606,548
(3)					
(4)					
(5)					
3a Sub-total	0	0			37,306,548
b Total from continuation she to Part I		0			C
c Totals (add lines 3a and 3b				 No 50082W Sche	37,306,548 dule F (Form 990) 2015

Complete		zation answered "Ye	nizations or Entitions or Entitions or Entitions			eived more than \$5,	.000. Part II can be	duplicated if
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		East Asia and the Pacific - Australia, Brunei, Burma, Cambodia,	General Support	1,950,000	bank Wire			
(2)		East Asia and the Pacific - Australia, Brunei, Burma, Cambodia,	General Support	4,750,000	Bank Wire			
(3)								
(4)								

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶

Schedule F (Form 990) 2015

(2) (3) (4) (5) (6) (7) (8) (9) (10)

(11) (12) (13) (14) (15) (16) (17) (18)

Schedule F (Form 990) 2015

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	
(1)							

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
							appraisar, other)

Did the organization have any operations in or related to any boycotting countries during the tax year? If

5713, do not file with Form 990)

"Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form

Schedule F (Form 990) 2015

Yes

Νo

Page 5

Schedule F (Form 990) 2015

Return Reference	Explanation
Part I, Line 2	For foreign grants, the Foundation conducts a detailed charitable equivalency review and f ollows up to ensure receipt by the charity. All grants distributed were unconditional with
	no required monitoring

efile GRAPHIC print - DO NOT PROCESS As Filed Data DLN: 93493312023386 OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) 2015 Governments and Individuals in the United States Complete if the organization answered "Yes." on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization Employer identification number The Fuller Foundation 95-4124436 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and √ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (c) IRC section (a) Name and address of (b) EIN (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance or government assistance (book, FMV, appraisal, other) See Additional Data Table Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 94 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2015

Part I, Line 2 For expenditure responsibility grants, the Foundation follows the procedure specified by the IRS for pre-grant inquiry, award documentation, monitoring and reporting annually. For grants other than expenditure responsibility, such grants are unconditional gifts to gualified 501(c)(3) public charities. The

Additional Data

(a) Name and address of

1836 Bay Rd Suite B
East Palo Alto, CA 94303
Achungo Community Center

1106 Sussex Square Mountain View, CA 94040 (b) EIN

61-1598457

Software ID: Software Version:

(c) IRC section

EIN: 95-4124436

Name: The Fuller Foundation

501 (c)(3)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

organization or government	(2) = 3.5	ıf applıcable	grant	cash assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance
A Kernel of Wheat Christian Ministries 1423 Maple St South Pasadena,CA 91030	95-4836207	501 (c)(3)	12,000				General Support
Able Works	20-2175098	501 (c) (3)	10 000				General Support

10,000

(d) Amount of cash (e) Amount of non- (f) Method of valuation

(a) Description of

(h) Purpose of grant

General Support

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Alpha HCA 13-3962840 501 (0) (3) 11 500 General Support

2275 Half Day Road Suite 185 Bannockburn,IL 60015	13 3302040	301 (0) (3)	11,300		оснегат Зарроте
Back To God Ministries	36-2284261	501 (c) (3)	20,000		General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1275 Peachtree Street NE Atlanta, GA 30309

Back To God Ministries 6555 West College Drive Palos Heights, IL 60463	36-2284261	501 (c) (3)	20,000		General Support
Boys and Girls Club of America	13-5562976	501 (c) (3)	10,000		General Support

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable cash (book, FMV, appraisal, non-cash assistance or assistance arant or government assistance other) 16-6037117 501 (c) (3) 50.000 General Support Buffalo State College

Foundation 1300 Elmwood Ave Buffalo,NY 142221095			, ,		
Called for His Purpose PO Box 141044	46-2091260	501 (c)(3)	32,000		General Support

20,000

General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (c) (3)

Dallas,TX 75214
Calvin College

3201 Burton Street SE Grand Rapids, MI 495464301 38-3071514

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Child Evangelism Fellowship 501 (c) (3) 20,000 General Support 95-1985466 of Pasadena

1114 East Mountain Street Pasadena,CA 91104					
China Connection 458 S Pasadena Ave Pasadena, CA 91105	95-4265397	501 (c) (3)	10,000		General Support

Christ for the City 47-0789700 501 (c) (3) 92,500 General Support

International Inc PO Box 390395

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Omaha, NE 68139

(a) Name and address of **(b)** EIN (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section organization ıf applicable cash (book, FMV, appraisal, non-cash assistance or assistance arant or government assistance other) 95-6006474 501 (c) (3) 7.500 General Support Christ the Shepherd Lutheran |

185 W Altadena Dr Altadena,CA 91001		,,,,,	,		
Christian Veterinary Mission	91-6012289	501 (c) (3)	7,000		General Support

General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (c) (3)

Seattle, WA 981330166
Christian Witness Theological

1975 Concourse Drive San Jose, CA 95131

Seminary

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other)

General Support

Church of the Epiphany 13515 Dulles Technology	54-1397724	501 (c) (3)	20,000		General Support
Drive Suite					
Herndon, VA 201713413					
CityTeam Ministries	94-1501265	501 (c) (3)	10,000		General Support

40,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (c) (3)

1613 S Main St Suite 105 Milpitas, CA 95035

2304 Zanker Road San Jose, CA 95131

Creation TV

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) General Support C ----05 (00(17) E 0 1 (a) (3) 12 200

PO Box 628222 Orlando, FL 328628222	95-6006173	501 (6)(3)	12,200		General Support
CuriO dyssey	94-1262434	501 (c) (3)	10,000		General Support

General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (c) (3)

1651 Covote Point Drive

95-4044568

San Mateo, CA 94401

Door of Hope

PO Box 90455 Pasadena, CA 91109

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance arant or government assistance other) Eastern Michigan University 38-2953297 501 (c) (3) 3,272,000 General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (c) (3)

Palo Alto, CA 94306

Communication Center 9386 Telstar Avenue El Monte, CA 91731

Evangelical Formosan Church

23-7086097

Foundation 1349 S Huron St Ypsilante,MI 48197					
Escalade Recovery Foundation 544 Thain Way	20-0055293	501 (c)(3)	15,000		General Support

6,000

General Support

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Focus on the Family 05-3199150 501 (6) (3) 13 000 Coneral Support

General Support

8605 Explorer Drive Colorado Springs, CO 809201051	93-3100130	301 (C) (3)	13,000		денега зиррогс
Forum of Christian Leaders	46-4112405	501 (c) (3)	25.000		General Support

2,906,618

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (c) (3)

PO Box 1442

Wheaton, IL 601870145
Fuller Theological Seminary

135 N Oakland Ave Pasadena, CA 91182

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (c) (3)

501 (c) (3)

43-1096193

77-0330145

Hand of Help Society of our

P O Box 1406 Robstown,TX 78380

Help One Child 858 University Ave Los Altos, CA 94024

Lady of the Most Holy Trinity

					1	
Global Scholars PO Box 12147	56-1627401	501 (c)(3)	25,000			General Support
Overland Park, KS						
662822147						

General Support

General Support

25,000

10,000

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Hope Unlimited for Children 33-0480141 501 (c) (3) 15,000 General Support

PO Box 100 _ Jefferson City,TN 37760					
Institute of Church Renewal Inc	58-0966937	501 (c) (3)	197,000		General Support

General Support

PO Box 98213 Atlanta, GA 30359

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (c)(3)

Insulin for Life USA Inc.

5745 SW 75th Street 116 Gainesville, FL 32608

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (c) (3)

3535 E Red Bridge Road Kansas City, MO 64137 International Justice Mission

Washington, DC 200906961

PO Box 96961

54-1722887

International Foundation PO Box 23813 Washington, DC 200263813	53-0204604	501 (c) (3)	15,000		General Support
International House of Prayer Forerunner Christian Fellowship	45-2262183	501 (c) (3)	450,000		General Support

6,000

General Support

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) International Leadership 21-1902122 501 (c) (3) 20.000 Coneral Support

Institute PO Box 1005 Carrollton, GA 30112	31-1003122	301 (c) (3)	20,000		General Support
Jumpstart 65 Battery Street 2nd Floor	04-3262046	501 (c) (3)	10,000		General Support

General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (c) (3)

San Francisco, CA 94111

A Philharmonic Association

151 S Grand Avenue Los Angeles, CA 90012

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) La Salla High School 05 4490070 501 (c) (2) 7 500 General Support

La Salle High School	93-4480979	301 (0) (3)	7,300		General Support
3880 East Sierra Madre Blvd					
Pasadena,CA 91107					
Langham Partnership	23-7417198	501 (c) (3)	25,000		General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (c) (3)

Leadership Foundations

902 Market Street Tacoma, WA 98402 25-1741353

Langham Partnership	23-7417198	501 (c) (3)	25,000		General Sup
580A Valley Way					
Milpitas, CA 95035					

15,000

General Support

Tasadena, CA JIIO7					1
Langham Partnership 580A Valley Way	23-7417198	501 (c)(3)	25,000		General Su

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 45-2301493 501 (c)(3) 34,000 General Support Live in Peace Inc

East Palo Alto, CA 94303					
Logos Evangelical Seminary 9358 Telstar Avenue El Monte, CA 91731	95-4457666	501 (c)(3)	20,000		General Support

General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (c)(3)

LymeLight Foundation

Burlingame, CA 94010

205

1229 Burlingame Ave Suite

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) FO4 (-) (2) 40000

950 Santa Cruz Avenue Menlo Park, CA 94025	94-116/435	501 (c) (3)	10,000		General Support
Menlo Park Presbyterian	45-3539663	501 (c)(3)	150,000		General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Church 1451 Grant Road Mountain View, CA 94040					
Mission America Coalition	23-7317473	501 (c) (3)	10.000		General Support

Mountain View, CA 94040					
Mission America Coalition	23-7317473	501 (c) (3)			Gene

Mission America Coalition	23-7317473	501 (c) (3)	10,000		General Support
PO Box 13930					
Palm Desert, CA 92255					

(a) Name and address of **(b)** EIN (c) IRC section (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (d) A mount of cash organization ıf applicable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other)

Mission India PO Box 141312 Grand Rapids, MI 49514	38-2944724	501 (c)(3)	30,000		General Support
Mount Hermon	94-6000955	501 (c) (3)	100,000		General Support

General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (c) (3)

PO Box 413

Mount Hermon, CA 95041

Multiplication Network

22515 Torrence Avenue Sauk Village, IL 60411

(a) Name and address of **(b)** EIN (c) IRC section (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant (d) A mount of cash organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) E0 2270460 E 0 4 () (2) 4 - 000 pport

Neighborhood Ministries	86-0809052	501 (c) (3)	50,000		General Support
Cassleberry, FL 327075362					
286 Wilshire Blvd					
Music Mission Kiev Inc	59-32/8168	501 (c) (3)	15,000		General Support

General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (c) (3)

PO Box 6057

Phoenix, AZ 850056057

Neighbors Empowering Youth

2662 N Fair Oaks Ave Altadena, CA 91001

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable cash (book, FMV, appraisal, non-cash assistance or assistance arant or government assistance other) ort

New Door Ventures 3221 20th St	94-2780274	501 (c) (3)	25,000		General Support
San Francisco, CA 94110					
New Song Community Church	33-0510458	501 (c) (3)	7,500		General Support

General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (c) (3)

3985 Mission Avenue
Oceanside, CA 92058
Opportunity International

550 W Van Buren Ste 200 Chicago, IL 60607

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Oregon State University 93-6022772 501 (c) (3) 100.000 General Support

Foundation 850 SW 35th Street Corvallis, OR 97333	22 222.72		200,000		
Our Daily Bread Ministries	38-1613981	501 (c) (3)	6,000		General Support

General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (c) (3)

Providence Christian School

2142 E Yosemite Avenue Merced, CA 95340

45-5138127

495010266

PO Box 2222	Corvallis,OR 97333					
Orania Rapidos, Pri	,	38-1613981	501 (c)(3)	6,000		General Suppor

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 64-0885750 501 (c) (3) 10,000 General Support REAL Christian Foundation

PO Box 180059 _ Richland,MS 39218					
Reconciliation Ministries PO Box 238 Medina, WA 980390238	91-1960797	501 (c)(3)	15,000		General Support
Regents of the University of	38-6006309	501 (c)(3)	1,401,000		General Support

Michigan 3003 South State St Suite 9000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Ann Arbor, MI 481091288

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other)

Right to Play 49 W 27th Street Suite 930 New York, NY 10001	13-4045245	501 (c) (3)	9,600		General Support
Rudolf Steiner School of Ann Arbor	38-2242069	501 (c) (3)	7,117		General Support

General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (c) (3)

2775 Newport Road
Ann Arbor, MI 48103
Scholar Leaders International

101

27850 Irma Lee Circle Suite

Lake Forest, IL 60045

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other)

School of Urban Missions 735 105th Avenue Oakland, CA 94603	72-1226741	501 (c)(3)	10,000		General Support
SEAL-Naval Special Warfare Family Foundation	27-1963880	501 (c)(3)	10,000		General Support

General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (c)(3)

300 Carlsbad Village Dr Ste

91-2077919

Carlsbad, CA 92008 Shepherd's Door

108A-361

PO Box 40441 Pasadena, CA 91114

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other)

PO Box 7900 Charlotte,NC 28241	22-1936391	501 (c) (3)	10,000		General Support
St Andrews Presbyterian	95-1969024	501 (c) (3)	20,000		General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Ch Formaria Hamb Cabaal	05 1760050	504 () (2)	10000		
Newport Beach, CA 92663					
600 St Andrews Road					
Church					
31 Allulews Flesbytellall	33-1303024] 301 (6) (3)	20,000		Deneral Support

Church				
600 St Andrews Road				
Newport Beach, CA 92663				

Newport Beach, CA 92663					
St Francis High School	95-1768858	501 (c) (3)	10,000		General Support

200 Foothill Blvd La Canada, CA 91011

(a) Name and address of **(b)** EIN (d) A mount of cash (e) A mount of non- (f) Method of valuation (h) Purpose of grant (c) IRC section (g) Description of organization ıf applicable cash (book, FMV, appraisal, non-cash assistance or assistance arant or government assistance other) St John the Baptist Orthodox 501 (c) (3) 7,500 General Support 11-6007930

Church 4718 E Horsehaven Ave Post Falls,ID 83854					
Stanford University PO Box 20466	94-1156365	501 (c) (3)	10,500		General Support

General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (c) (3)

Stanford, CA 943090466
Stoneridge Christian High

500 Buena Vista Dr Merced, CA 95348

School

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Studio Art Quilt Association 77-0271652 501 (c) (3) 8,000 General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (c) (3)

Asheville, NC 28801

101 E Foothill Blvd Monrovia, CA 91016

Monrovia

The First Presbyterian Church

23-6393377

(SAQA) PO Box 572 Storrs,CT 062680572			·		
The Alliance for American Quilts 67 Broadway St Suite 200	61-1271800	501 (c) (3)	10,000		General Support

108,142

General Support

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) The Fund for American 13-6223604 501 (c) (3) 54,000 General Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (c) (3)

4101 Nebraska Ave NW Washington, DC 20016 The Valley Vineyard Christian

Fellowship 6642 Reseda Blvd Reseda, CA 91335 95-3419526

Studies 1706 New Hampshire Avenue NW Washington, DC 20009					
The National Presbyterian Church	53-0196611	501 (c) (3)	22,000		General Support

31,700

General Support

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) The Volgenau Foundation 54-1738281 501 (c) (3) 250,000 General Support

8300 Greensboro Drive Suite 1025 McLean,VA 22102					
Tipping Point Community 220 Montgomery St 850	20-2121739	501 (c) (3)	10,000		General Support

San Francisco, CA 94104

Today's Youth Matter 94-3176545 501 (c) (3) 15,000 General Support

469 Valley Way Milpitas, CA 95035

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) University of Michigan 38-3072509 501 (c) (3) 2,400,000 General Support

500 S State Street Ann Arbor, MI 48109					
Valley Presbyterian Church 6947 E McDonald Drive Paradise Valley, AZ 85253	86-0173410	501 (c)(3)	80,000		General Support

Valley United Presbyterian 94-2378204 501 (c) (3) 7,500 General Support Foundation

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

6947 F McDonald Drive Paradise Valley, AZ 85253

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other)

General Support

General Support

Walnut Hill Community Church	06-1072208	501 (c) (3)	10,000		General Support
156 Walnut Hill Road Bethel, CT 06801					

37,500

20,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 (c) (3)

501 (c) (3)

95-1922279

95-4322095

World Vision

PO Box 9716 Federal Way, WA 980639716

WOW International PO Box 6308 Altadena, CA 91003

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Young Life - San Francisco 84-0385934 501 (c) (3) 21,000 General Support

PO Box 15863 San Francisco, CA 941150863					
Young Life Foundation PO Box 520	84-6041371	501 (c) (3)	13,000		General Support

General Support

Colorado Springs, CO 809010520 Youth for Christ Central 77-0160288 501 (c) (3) 15,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Valley 918 Sierra Dr Modesto, CA 95351

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization organization or government

(b) EIN

(c) IRC section if applicable grant

(d) A mount of cash grant

(a) A mount of non-cash assistance

(b) Method of valuation (book, FMV, appraisal, other)

(d) A mount of non-cash assistance

(b) EIN

(c) IRC section if applicable grant

(d) A mount of cash assistance

(e) A mount of non-cash assistance

(b) Method of valuation (book, FMV, appraisal, other)

or government				assistance	other)	
Youth With A Mission	33-0604992	501 (c) (3)	6,000			General Support

PO Box 5417

Chula Vista, CA 91912

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493312023386 Compensation Information OMB No 1545-0047 Schedule J (Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 2015 ► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990. Open to Public Department of the ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Treasury Inspection **Employer identification number** Name of the organization The Fuller Foundation 95-4124436 Questions Regarding Compensation Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ✓ Compensation committee ✓ Written employment contract ✓ Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? Νo 4a Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Yes Νo Participate in, or receive payment from, an equity-based compensation arrangement? 40 If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? 5a Yes Any related organization? 5b Νo If "Yes," on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Any related organization? 6b Νo If "Yes," on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Yes Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Νo If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)? Schedule J (Form 990) 2015 Cat No 50053T For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Page 2

(A) Name and Title		(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		Base (1) compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990
1 THOMAS P HARBOLT Executive Director	(i)	183,706	183,000	4,649	20,331	15,830	407,516	0
	(ii)	183,706	183,000	4,649	20,331	15,830	407,516	0
2 Martin Liu CFO & Treasurer (Through	(i)	191,015	38,000	28,246	18,560	16,936	292,757	0
12/31/15)	(ii)	191,015	38,000	28,246	18,560	16,936	292,757	0
3 Mark WentzienSecretary	(i)	0	0	0	0	0	0	0
	(ii)	241,666	1,000	3,077	19,792	29,207	294,742	0
4 Todd B Derrick Client Relations Mgr/Former	(i)	0	0	0	0	0	0	0
Officer	(ii)	160,475	1,000	1,410	19,834	31,234	213,953	0
							Schedu	le J (Form 990) 2015

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

Page 3

Schedule J (Form 990) 2015

Foundation Amounts credited to each participant's account under these programs is included in column (c) of Schedule J. Part II A negative amount in

column (c) of Schedule J. Part II is possible if investment return allocation is negative and/or if there are any forfeited amounts under the terms of the retention program. During the tax year ended 12/31/2015, there were no contributions to or distributions from the plan.

The Executive Director received bonus compensation which was based upon a set of performance criteria, including organization revenue growth

Part I, Line 5

Part I, Line 7 See description for line 5 efile GRAPHIC print - DO NOT PROCESS | As Filed Data -Schedule L

(Form 990 or 990-EZ)

Department of the

Treasury

DLN: 93493312023386 OMB No 1545-0047

> 2015 Open to Public

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ▶ Attach to Form 990 or Form 990-EZ.

▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

Name of the or	Iame of the organization the Fuller Foundation									Employer identification number							
								-4124									
	ess Benefit T plete if the organ										10h						
	ne of disqualified					ified person and			cription		(d) Cori	rected					
-	·		` '	•	organızatıon	•	`	•	action		Yes	No					
2 Enterthe	amount of tax inc	curred by organ	nization ma	nagers or c	disqualified per	sons during the	veari	ınder s	section								
4958 .		· · · ·							▶ \$.								
3 Enter the	amount of tax, If	any, on line 2,	above, reii	mbursed by	the organization	on			> \$								
D		F T t		D													
	oans to and/omplete if the org					. line 38a. or Foi	rm 991	0. Par	t IV. lın	e 26. o	rıfthe						
	ganization report					,		-,	,	, -							
	T	1			1						1						
(a) Name of interested	(b) Relationship with	of (c) Purpose of Ioan	(d) Loan or from t		(e)Original principal	(f)Balance due	(g) defa) In oult?	A ppro		(i)Wr						
person	organization	0.104.1	organizati		amount		deldale		by board or		149.00.						
				T_	_				commi	1	<u> </u>	1					
/1) T DEDDICK		D1 F-+-+-	То	From	350,000	350,000	Yes	No	Yes	No	Yes	No					
(I) I DERRICK	Former Officer	Real Estate Co-tenancy		X	330,000	330,000		No	Yes		Yes						
		agreement ´															
(2)T Harbolt	Executive	Real Estate		X	2, 525, 000	2,000,000		No	Yes		Yes						
	Director	Co-tenancy agreement															
		3															
									1			_					
									-			-					
				+								-					
Total		▶ \$				2,350,000											
	ants or Assis		fitina In	terested	Persons.	2,330,000											
	mplete if the o					irt IV, line 27.											
	interested (b) Relationship	between					stance	(e)	Purpos	e of ass	ıstanc					
(a) Name of interested person interested person and the organization (c) A mount of assistance																	

Total		▶ \$			2,350,000								
		stance Bene organization a				rt IV, line 27.							
(a) Name of interested person interested person organization				(c) A mount	of assistance	e (d) Type o	fassis	stance	(e)	Purpose	ofassi	stance	
For Paperwork Re	duction Act Noti	ce, see the Instru	ictions for l	Form 990 or 9	90-EZ.	Cat No 50056A		Sched	ule L (Fo	rm 990	or 990-E	Z) 2015	

Explanation

Schedule L (Form 990 or 990-EZ) 2015

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493312023386 **SCHEDULE M** OMB No 1545-0047 **Noncash Contributions** (Form 990) ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990. ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990 Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization Employer identification number

	ne of the organization Fuller Foundation				Employer identification number
1110	Tallet Foundation				95-4124436
Pä	art I Types of Property			<u>'</u>	
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art—Works of art				
2	Art—Historical treasures .				
3	Art—Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities—Publicly traded .	Х	13	2,461,130	Market Value
10	Securities—Closely held stock .				
11	Securities—Partnership, LLC, or trust interests				
12	Securities—Miscellaneous				
13	Qualified conservation contribution—Historic structures				
14	Qualified conservation contribution—Other				
15	Real estate—Residential .				
16	Real estate—Commercial				
17	Real estate—Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies .				

11	Securities—Partnership, LLC, or trust interests			
12	Securities—Miscellaneous			
13	Qualified conservation contribution—Historic structures			
14	Qualified conservation contribution—Other			
15	Real estate—Residential .			
16	Real estate—Commercial			
17	Real estate—Other			
18	Collectibles			
19	Food inventory			
20	Drugs and medical supplies .			
21	Taxıdermy			
22	Historical artifacts			
23	Scientific specimens			
24	Archeological artifacts			
25	O ther ▶ ()			
	O ther ▶ ()			
27	O ther ▶ ()			
	O ther ▶ ()			
		 	_	

Number of Forms 8283 received by the organization during the tax year for contributions

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

for which the organization completed Form 8283, Part IV, Donee Acknowledgement

for exempt purposes for the entire holding period? .

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

b If "Yes," describe the arrangement in Part II

contributions? . . .

b If "Yes," describe in Part II

Yes

Yes

30a

31

32a

Schedule M (Form 990) (2015)

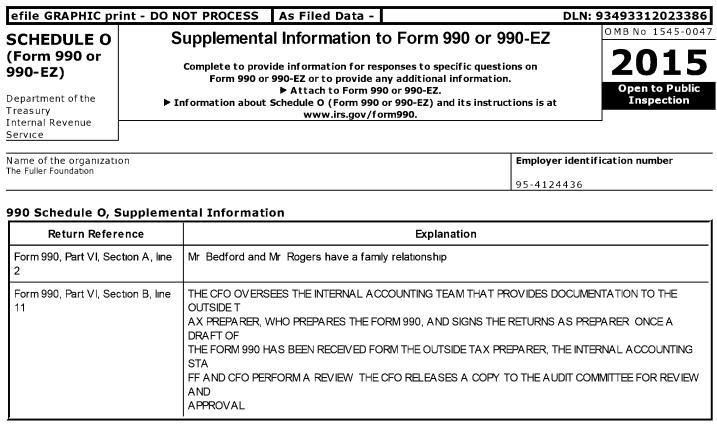
No

Νo

Νo

29

Cat No 51227J



Return Explanation Reference Form 990. In determining the compensation of the Organization's Executive Director, the process includes a detailed review and approval

990 Schedule O. Supplemental Information

Part VI.

Section C. line

19

Section B, line	determination of the compensation. Adjustments to compensation are reviewed periodically by the independent Board
15	committee The Executive Director was not present when his compensation was decided. The last detailed comparability study
	was undertaken in 2011, and the last adjustment to pay was done for the 2015 calendar year. In determining the compensation
	of the Organization's other officers or key employees, the process includes a detailed review and approval by an independent
	Board committee using recommendations by Executive Management. Recommendations are made based on such items as the
	employee's performance cost of living changes and comparisons to similar organizations. Review and adjustments to pay are

by an independent Board committee. When it is determined to be needed, detailed comparability data is sought in the

employee's performance, cost of living changes, and comparisons to similar organizations. Review and adjustments to pay are done annually, with the last adjustment to pay done for the 2015 calendar year Form 990. The Fuller Foundation makes its governing documents, policies and financial statements available upon request Part VI.

990 Schedule O, Supplemental Information

Change in Value Split Interest 1,227,256

Return Reference Explanation

Form 990. Part XI. line 9

efile GRAPHIC print - DO NOT PROCESS As Filed Data DLN: 93493312023386 OMB No 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships** (Form 990) 2015 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Attach to Form 990. Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** The Fuller Foundation 95-4124436 Part I Identification of Disregarded Entities Complete of the organization answered "Yes" on Form 990, Part IV, line 33. (c) (f) (e) Direct controlling Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets or foreign country) entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one Part II or more related tax-exempt organizations during the tax year. (a) (c) (d) (e) (f) (g) Direct controlling Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50135Y Schedule R (Form 990) 2015

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predominant income(related, unrelated, excluded from tax under sections 512-514)	Share of total income		ortionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana parti	ral or aging	(k) Percentage ownership
				314)		Yes	No		Yes	No	
See Additional Data Table											
											1

34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of	(b) Primary activity	(c) Legal	(d) Direct controlling	(e) Type of entity	(f) Share of total	(g) Share of end-of-	(h) Percentage	(ı Sectioi)
related organization	Filliary activity	domicile (state or foreign country)			income	year assets	ownership	(b)(contro enti	13) olled ty?
								Yes	No
Fuller Investment (1)Management Company	Investment Advisor	DE	The FUller Foundation	С	2,955,241	3,164,950	100 000 %	Yes	
385 E Colorado Blvd Suite 250 pasadena, CA 91101 46-1707929									
(2) Fuller Multi-Strategy Fund CI Ltd	Passive Investment Fund	CJ	N/A	С			27 000 %		No
190 Elgin Avenue Georgetown Grand Cayman KY1-9005 CJ									
(3) Chantable Remainder Trusts (8)	Split Interest Charitable Trust	CA	N/A	Т					No

Schedule R (Form 990) 2015					Pag	ge 3
Part V Transactions With Related Organizations Complete if the organization ans	wered "Yes" on Form	990, Part IV, line	34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more	related organizations li	sted in Parts II-IV?				
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		No
b Gift, grant, or capital contribution to related organization(s)				1 b	Yes	
${f c}$ Gıft, grant, or capital contribution from related organization(s)				1 c		No
d Loans or loan guarantees to or for related organization(s)				1d		No
e Loans or loan guarantees by related organization(s)				1e		No
f Dividends from related organization(s)				1f		No
g Sale of assets to related organization(s)				1 g		No
h Purchase of assets from related organization(s)				1h		No
i Exchange of assets with related organization(s)				1i		No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				1j		No
k Lease of facilities, equipment, or other assets from related organization(s)				1k		No
I Performance of services or membership or fundraising solicitations for related organization(s)				11		No
m Performance of services or membership or fundraising solicitations by related organization(s) .				1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes	
o Sharing of paid employees with related organization(s)				\vdash	Yes	—
o sharing or para emproyees menterated organization(s), i.e., i.e.						
p Reimbursement paid to related organization(s) for expenses				1р		No
q Reimbursement paid by related organization(s) for expenses				1q	Yes	
r Other transfer of cash or property to related organization(s)				1r	Yes	
f s Other transfer of cash or property from related organization(s)				1 s	Yes	
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete	ete this line, including co	overed relationships	and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	unt in	volved	
See Additional Data Table						

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

revenue) that was not a related organization. See instructions r			ertain invest	ment	partnerships		1						
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	org	(e) all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations ⁷	ı	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
											_		
											lula D /Fai	لِـــا	



Software ID: Software Version:

EIN: 95-4124436

Name: The Fuller Foundation

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership												
(a) Name, address, and EIN of related organization	(b)	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total Income		allocations?		(i) Code V-UBI amount In Box 20 of Schedule K-1 (Form 1065)	Managing Partner?		(k) Percentage ownership
Mission Core Fund I LP	INVestments	CJ	Fuller	related	1,415,345	30,606,548	Yes	No No	 	165	No No	27 400 %
190 Elgin Avenue Georgetown, Grand Cayman KY1-9005 CJ 98-0694642			Investment Management Company									
FULLER EVENT DRIVEN FUND LP	Investments	DE	N/A									
385 E COLORADO BLVD SUITE 250 PASAdena, CA 91101 90-0917317												
FULLER LONGSHORT EQUITY FUND LP	Investments	DE	N/A									
385 E COLORADO BLVD SUITE 250 PASAdena, CA 91101 90-0916935												
EVANSTON DEVELOPMENT LLC	Investments	CA	N/A									
608 N FAIR OAKS AVE UNIT 129 PASADENA, CA 91103 90-0655742												
FULLER PRIVATE EQUITY FUND LP	Investments		Fuller Investment Management	related	4,710	316,399		No			No	0 260 %
385 E COLORADO BLVD SUITE 250 PASAdena, CA 91101 46-1467181		l l	Company									
FULLER GLOBAL MACRO FUND LP	investments	DE	N/A									
385 E COLORADO BLVD SUITE 250 PASadena, CA 91101 46-1265883												
FULLER CREDIT FUND LP	Investments	l l	Fuller Investment	related	-3,656	1,963,893		No	105		No	3 240 %
385 E COLORADO BLVD SUITE 250 PASAdena, CA 91101 46-1057477			Management Company									
FULLER MULTI- STRATEGY FUND LP	Investments		FULLER INVESTMENT	related	498,576	44,788,372		No	498,576		No	82 180 %
385 E COLORADO BLVD SUITE 250 Pasadena, CA 91101 26-4393493		l l	MANAGEMENT COMPANY									

(a) (b) (c) (d) Name of related organization A mount Involved Transaction Method of determining amount type(a-s) involved FULLER INVESTMENT MANAGEMENT COMPANY 240,960 book (1) (1) FULLER INVESTMENT MANAGEMENT COMPANY 241,475 Book (2) FULLER INVESTMENT MANAGEMENT COMPANY 659,272 Book (3) FULLER MULTI-STRATEGY FUND LP 3,314,102 Book (4) MISSION CORE FUND I LP 11,065,455 Book (5) Fuller Private Equity Fund LP 272,900 Book Book (6) Fuller Credit Fund LP 2,000,000

Form 990, Schedule R, Part V - Transactions With Related Organizations