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## Form **990-PF**

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

OMB No. 1545-0052 2015

Department of the Treasury

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

Open to Public Inspection

	_				<del>, </del>			<del></del>	
		_	year 2015, or tax year beginning	ng J	ul 1 , 2015	, and ending Ju	n	30 , 2016	
Name of							A	Employer identification num	nber
			TON FAMILY FOUNDATION (or P O box number if mail is not delivered		ddress)	Room/suite	В	20-4962385 Telephone number (see instru	intions)
29 5	SAI	ATN	ANA DRIVE			Troom suite		(831) 422-579	
SAL]			or province, country, and ZIP or foreign pos	tai code	CA	93901	С	If exemption application is [	pending, check here . ►
			that apply Initial return		Initial return of a forme	•	١,	4 Foreign organizations char	ck bara 🕨 🗖
•			Final return		Amended return	,	D	1 Foreign organizations, che	ck neie
			Address chan	ge	Name change			2 Foreign organizations mee	ting the 85% test, check
H Ch	hec	k typ	e of organization X Sec	tion 501	(c)(3) exempt private for	ındatıon	1	here and attach computation	on
	Г		tion 4947(a)(1) nonexempt charit			rivate foundation	E	If private foundation status	
I Fa	ıır m	arket	value of all assets at end of year		ounting method X C	ash Accrual	1	under section 507(b)(1)(A),	, check here • []
•		Part II	, column (c), line 16)		Other (specify)		F	If the foundation is in a 60-	month termination
	•		254,640.	(Part I,	column (d) must be on c	ash basis )	<u> </u>	under section 507(b)(1)(B)	, check here L
Part	<u>: I</u>	JAr	alysis of Revenue and		(a) Revenue and	(b) Net investmen	ıt	(c) Adjusted net	(d) Disbursements
		COL	(penses (The total of amounts umns (b), (c), and (d) may not ne aly equal the amounts in column	ın ces-	expenses per books	ıncome		ıncome	for charitable purposes
		sar	rily equal the amounts in column	(a)					(cash basis only)
			e instructions) )		15 000				
			Contributions offis grants, etc. received (attach sch	edule)	15,000.	<del></del>			
		2	Ck > X if the both carrier is not required to a	ilacidizacid B	<b>1</b>			<del>                                     </del>	
		3	Interest on sayings and temporary cash investments	0		2,25	<u> 56</u> .	2,256.	
		4	Dividends and interest from securities 9 201	B 114					
	-	5 a	Gross rents ( ) L B G G G G G G G G G G G G G G G G G G	<u></u>					
			or (loss)						
R E		ъa b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all					-	
V		7	assets on line 6a · · · Capital gain net income (from Part IV, line in the capital gain net income (from Part IV, line in the capital gain net income (from Part IV, line in the capital gain net income (from Part IV, line in the capital gain net income (from Part IV, line in the capital gain net income (from Part IV, line in the capital gain net income (from Part IV, line in the capital gain net income (from Part IV, line in the capital gain net income (from Part IV, line in the capital gain net income (from Part IV, line in the capital gain net income (from Part IV, line in the capital gain net income (from Part IV, line in the capital gain net income (from Part IV, line in the capital gain net income (from Part IV, line in the capital gain net income (from Part IV, line in the capital gain gain gain gain gain gain gain gain					<del></del>	j 3.
Ē N		8	Net short-term capital gain					<del>                                     </del>	, , , , , , , , , , , , , , , , , , , ,
U		9	Income modifications					<del></del>	
E		10 a	Gross sales less returns and						
	ı	_	allowances Less Cost of						
	i	_	goods sold						
		_	Gross profit or (loss) (attach schedule)					<u> </u>	
	ŀ	11	Other income (attach schedule) - · · ·						
	İ	12	Total. Add lines 1 through 11		17,256.	2,25	56.	2,256.	
		13	Compensation of officers, directors, trustee	s, etc · ·					
		14	Other employee salaries and wages .						
		15	Pension plans, employee benefits			ļ		<u> </u>	
_	A		Legal fees (attach schedule)		350			-	
Ñ	M		Accounting fees (attach sch) Other prof fees (attach sch)		750.	<del> </del>		<del> </del>	
0 1	Ň	17	Interest			-		<del> </del>	<b></b>
PS	s	18	Taxes (attach schedule)(see instrs) EXCISE TAX		29.	<del>                                     </del>		<del>                                     </del>	
R	Ŕ	19	Depreciation (attach		23.	<del> </del>			
A A	7		schedule) and depletion						
N V	v I	20	Occupancy						
	- 1	21 22	Travel, conferences, and meetings		20.				
A E	<u> </u>	23	Other expenses (attach schedule)			<del> </del>			
Ē	E		See Line 23 Stmt		1,183.				
5	SES	24	Total operating and administrative						
5	s	0.5	expenses Add lines 13 through 23		1,982.	ļ		<u> </u>	10 405
		25	Contributions, gifts, grants paid		12,425.			<del> </del>	12,425.
		26	Total expenses and disbursements Add lines 24 and 25 · · · · · · · ·	. <b></b> .	14,407.				12,425.
	+	27	Subtract line 26 from line 12.		11,107.				
			Excess of revenue over expenses						
			and disbursements		2,0131		<u> </u>		ļ
	-		Net investment income (if negative, enter		<u> </u>	2,2	26	2 256	
	- 1	_	· Adulated not income (if constitute cotes (	. 1	i	1		, , , , , , , , , , , , , , , , , , , ,	

BAA For Paperwork Reduction Act Notice, see instructions.

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Dom	13	Attached schedules and amounts in the description	Beginning of year	End of	year
ran	<u> </u>	Balance Sheets column should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing	1,791.	4,640.	4,640.
	2	Savings and temporary cash investments	250,000.	250,000.	250,000.
	3	Accounts receivable	230,000.		
	•	Less: allowance for doubtful accounts			
	4	Pledges receivable			
	•	Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			.,,
	7	Other notes and loans receivable (attach sch)			
Α	•	Less allowance for doubtful accounts			
S	8	Inventories for sale or use			
A S E T	9	Prepaid expenses and deferred charges			
T S		Investments – U S and state government			
3	IVa	obligations (attach schedule)			
	b	Investments — corporate stock (attach schedule)			
	С	Investments — corporate bonds (attach schedule)			
	11	Investments — land, buildings, and equipment basis · · · · · · · · · · · · · ·			
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers — see the instructions Also, see page 1, item I).	251,791.	254,640.	254,640.
٠٦	17	Accounts payable and accrued expenses			
Ä	18	Grants payable			1
A B	19	Deferred revenue			
L	20	Loans from officers, directors, trustees, & other disqualified persons			
Ī	21	Mortgages and other notes payable (attach schedule)			
T I E	22	Other liabilities (describe			
s	23	Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
NF	24	Unrestricted	251,791.	254,640.	
Ë U T N	25	Temporanly restricted			
D	26	Permanently restricted			
A S B S A E L T A		Foundations that do not follow SFAS 117, check here hand complete lines 27 through 31.			
ĔĹ	27	Capital stock, trust principal, or current funds			
T A S N	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
С	29	Retained earnings, accumulated income, endowment, or other funds	<u> </u>		
O E R S	30	Total net assets or fund balances (see instructions)	251,791.	254,640.	
		Total liabilities and net assets/fund balances (see instructions)	251,791.	254,640.	
Par	t III	Analysis of Changes in Net Assets or Fund Balance			
1	Total	I net assets or fund balances at beginning of year — Part II, column (of year figure reported on prior year's return)	a), line 30 (must agree v	vith	251,791.
2		ar amount from Part I, line 27a			2,849.
3		rincreases not included in line 2 (itemize)			2,043.
4	Add	lines 1, 2, and 3 · · · · · · · · · · · · · · · · · ·	. <b></b>	4	254,640.
5		anner not included in line 2 (itemize)		5	20270101
6		I net assets or fund balances at end of year (line 4 minus line 5) — Po	art II, column (b), line 30	6	254,640.
				·	

Pa	(a) List and describe	Losses for Tax on Investmen the kind(s) of property sold (e.g., real e.g., or common stock, 200 shares MLC C	estate,	(b) How acquire P — Purchas D — Donatio	e (mo,day,yr)	(d) Date sold (mo , day, yr )
1 a	3		· · · <del></del>			
	<b>b</b>					
	<u> </u>					
-	<del></del>					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale		(h) Gain or (e) plus (f) m	
- 7	1		<del></del>			
t	•		<u> </u>			
	2					
(	3			$  \top$		<u></u>
•	3				·	
	Complete only for assets showing	ng gain in column (h) and owned by the	foundation on 12/31/69	T	(I) Gains (Co	I (h)
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		gain minus col (k), b than -0-) <b>or</b> Losses (fi	ut not less
	a					
t	•					
					<u> </u>	<del></del>
	1					
•	<u> </u>					
2	Capital gain net income or (net o	capital loss) If gain, also e	nter in Part I, line 7		2	
3	Net short-term capital gain or (Id	oss) as defined in sections 1222(5) and	(6)	<u> </u>		
	If gain, also enter in Part I, line 8	B, column (c) (see instructions). If (loss)	, enter -0-		3	
Pan	<del></del>	r Section 4940(e) for Reduced		ent Incor	ne	
Was	es,' the foundation does not qualif	s part blank. on 4942 tax on the distributable amour y under section 4940(e) Do not comple each column for each year, see the ins	ete this part		· · · · · · · · · Yes	X No
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	ets (	(d) Distribution Col (b) divided by c	
	2014	12,468.	24	9,087.		0.050055
	2013	12,471.	250	0,519.		0.049781
	2012	12,418.	25	0,871.	· <del></del>	0.049500
	2011	12,416.	25	0,333.		0.049598
	2010	13,013.	25:	3,441.		0.051345
2	Total of line 1, column (d)				2	0.250279
3	Average distribution ratio for the number of years the foundation	5-year base period — divide the total of has been in existence if less than 5 years.	on line 2 by 5, or by the ars		3	0.050056
4	Enter the net value of noncharita	able-use assets for 2015 from Part X, l	ne 5		4	248,655.
5	Multiply line 4 by line 3				5	12,447.
6	Enter 1% of net investment inco	me (1% of Part I, line 27b)			6	23.
7	Add lines 5 and 6				7	12,470.
8	Enter qualifying distributions fro	m Part XII, line 4			8	12,425.
	=	an line 7, check the box in Part VI, line				

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and addresses .

Form 990-PF (2015)

9

Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names

Form	1990-PF(2015) THE CLINTON FAMILY FOUNDATION 20-496238	<u>5</u>	<u> </u>	age 5
Par	t VII-A Statements Regarding Activities (continued)			,
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address			<del>.</del> – -
14	The books are in care of GLORIA CLINTON 1elephone no. (831)	_422	_5/9	. <del>4</del>
	Located at 29 SANTA ANA DR., SALINAS, CA ZIP+4 93901		<b>_</b> -	- —
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here		. •	
	and enter the amount of tax-exempt interest received or accrued during the year			
	<del></del>		Yes	No
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 :	During the year did the foundation (either directly or indirectly)		<b> </b>	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(i) Engage in the sale of exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?		]	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	1		ŀ
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No		Ì	
		1		1
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the			
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)		·	
t	If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b		
	Organizations relying on a current notice regarding disaster assistance check here		}	
•	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?	1 c		
			<u> </u>	<del>                                     </del>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?			
	If 'Yes,' list the years ► 20 , 20 , 20 , 20			
		1		
1	b Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)  (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to  all years listed, answer 'No' and attach statement — see instructions)	. 2b		-
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		1	<del>                                     </del>
•	to the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.  > 20 , 20 , 20 , 20			
3 :	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
ı	b If 'Yes,' did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or			_
	determine if the foundation had excess business holdings in 2015)	3 b	<u>' </u>	┼
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	. 4 a		х
		1	1	1
l	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	. 46		X

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, Form <b>990-PF'(2015)</b> THE CLINTON FAMILY	FOUNDATION		20-496	2385 Page <b>6</b>
Part VII-B   Statements Regarding Activiti		4720 May Be Reg		<u></u>
5 a During the year did the foundation pay or incur a		Trace may be reed	and (borrania bay	
(1) Carry on propaganda, or otherwise attempt to	-	ction 4945(e))?	Yes X	No
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registration	n drive?			
(3) Provide a grant to an individual for travel, stu			Yes X	No
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions)			Yes X	No
(5) Provide for any purpose other than religious, educational purposes, or for the prevention of	of cruelty to children or ar	ıımals?	Yes X	No
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in a (see instructions)?	current notice regarding	disaster assistance · · · · · · · · · · · · · ·		5 b
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	foundation claim exempt	on from the		No
If 'Yes,' attach the statement required by Regular				
6 a Did the foundation, during the year, receive any on a personal benefit contract?	funds, directly or indirectly	y, to pay premiums	Yes X	No
<b>b</b> Did the foundation, during the year, pay premium If 'Yes' to 6b, file Form 8870	ns, directly or indirectly, o	n a personal benefit conf	tract?	6b X
7 a At any time during the tax year, was the foundati				
b If 'Yes,' did the foundation receive any proceeds				
Part VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	mpioyees,
1 List all officers, directors, trustees, foundation	n managers and their c	ompensation (see insti	ructions).	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c)Compensation (If not paid, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
OLODEN OF THESE			i	
GLORIA CLINTON			ii	
29 SANTA ANA	CEO/MGR		_	
29 SANTA ANA DR., SALINAS, CA 93901	CEO/MGR 2.00	0.	0.	0.
29 SANTA ANA	1 '	0.	0.	0.
29 SANTA ANA DR., SALINAS, CA 93901 ERLINDA VALDEZ	1 '	0.	0.	0.
29 SANTA ANA DR., SALINAS, CA 93901	2.00	0.	0.	0.
29 SANTA ANA DR., SALINAS, CA 93901 ERLINDA VALDEZ 1524, 9TH	2.00 SECTY			
29 SANTA ANA DR., SALINAS, CA 93901 ERLINDA VALDEZ 1524, 9TH ST., SANGER CA 93657	2.00 SECTY			
29 SANTA ANA DR., SALINAS, CA 93901 ERLINDA VALDEZ 1524, 9TH ST., SANGER CA 93657 CATHERINE HILLMAN	2.00 SECTY 0.50			
29 SANTA ANA DR., SALINAS, CA 93901 ERLINDA VALDEZ 1524, 9TH ST., SANGER CA 93657 CATHERINE HILLMAN 9517 NE HAZEL DELL #97	2.00 SECTY 0.50 TREAS 0.50	0.	0.	0.
29 SANTA ANA  DR., SALINAS, CA 93901  ERLINDA VALDEZ  1524, 9TH  ST., SANGER CA 93657  CATHERINE HILLMAN  9517 NE HAZEL DELL #97  VANCOUVER WA 98665	2.00 SECTY 0.50 TREAS 0.50	0.	0.	0.
29 SANTA ANA  DR., SALINAS, CA 93901  ERLINDA VALDEZ  1524, 9TH  ST., SANGER CA 93657  CATHERINE HILLMAN  9517 NE HAZEL DELL #97  VANCOUVER WA 98665	2.00 SECTY 0.50 TREAS 0.50	0. 0.	0. 0.	0.
29 SANTA ANA  DR., SALINAS,  ERLINDA VALDEZ  1524, 9TH  ST., SANGER  CA 93657  CATHERINE HILLMAN  9517 NE HAZEL DELL #97  VANCOUVER  WA 98665  See Information about Officers, Directors, Trustees, Etc.	2.00 SECTY 0.50 TREAS 0.50	0. 0.	0.  0.  nstructions). If none, er  (d)Contributions to employee benefit plans and deferred	0.
29 SANTA ANA  DR., SALINAS, CA 93901  ERLINDA VALDEZ  1524, 9TH  ST., SANGER CA 93657  CATHERINE HILLMAN  9517 NE HAZEL DELL #97  VANCOUVER WA 98665  See Information about Officers, Directors, Trustees, Etc.  2 Compensation of five highest-paid employee  (a) Name and address of each employee	2.00 SECTY 0.50 TREAS 0.50  s (other than those inc hours per week	0 . 0 . 0 . luded on line 1 – see i	0.  0.  nstructions). If none, er  (d)Contributions to employee benefit	0.  0.  ter 'NONE.'  (e) Expense account,
29 SANTA ANA DR., SALINAS, CA 93901 ERLINDA VALDEZ 1524, 9TH ST., SANGER CA 93657 CATHERINE HILLMAN 9517 NE HAZEL DELL #97 VANCOUVER WA 98665 See Information about Officers, Directors, Trustees, Etc  2 Compensation of five highest-paid employee paid more than \$50,000	2.00 SECTY 0.50 TREAS 0.50  s (other than those inc hours per week	0 . 0 . 0 . luded on line 1 – see i	0.  0.  nstructions). If none, er  (d)Contributions to employee benefit plans and deferred	0.  0.  ter 'NONE.'  (e) Expense account,
29 SANTA ANA DR., SALINAS, CA 93901 ERLINDA VALDEZ 1524, 9TH ST., SANGER CA 93657 CATHERINE HILLMAN 9517 NE HAZEL DELL #97 VANCOUVER WA 98665 See Information about Officers, Directors, Trustees, Etc  2 Compensation of five highest-paid employee paid more than \$50,000	2.00 SECTY 0.50 TREAS 0.50  s (other than those inc hours per week	0 . 0 . 0 . luded on line 1 – see i	0.  0.  nstructions). If none, er  (d)Contributions to employee benefit plans and deferred	0.  0.  ter 'NONE.'  (e) Expense account,
29 SANTA ANA DR., SALINAS, CA 93901 ERLINDA VALDEZ 1524, 9TH ST., SANGER CA 93657 CATHERINE HILLMAN 9517 NE HAZEL DELL #97 VANCOUVER WA 98665 See Information about Officers, Directors, Trustees, Etc  2 Compensation of five highest-paid employee paid more than \$50,000	2.00 SECTY 0.50 TREAS 0.50  s (other than those inc hours per week	0 . 0 . 0 . luded on line 1 – see i	0.  0.  nstructions). If none, er  (d)Contributions to employee benefit plans and deferred	0.  0.  ter 'NONE.'  (e) Expense account,
29 SANTA ANA DR., SALINAS, CA 93901 ERLINDA VALDEZ 1524, 9TH ST., SANGER CA 93657 CATHERINE HILLMAN 9517 NE HAZEL DELL #97 VANCOUVER WA 98665 See Information about Officers, Directors, Trustees, Etc  2 Compensation of five highest-paid employee paid more than \$50,000	2.00 SECTY 0.50 TREAS 0.50  s (other than those inc hours per week	0 . 0 . 0 . luded on line 1 – see i	0.  0.  nstructions). If none, er  (d)Contributions to employee benefit plans and deferred	0.  0.  ter 'NONE.'  (e) Expense account,
29 SANTA ANA DR., SALINAS, CA 93901 ERLINDA VALDEZ 1524, 9TH ST., SANGER CA 93657 CATHERINE HILLMAN 9517 NE HAZEL DELL #97 VANCOUVER WA 98665 See Information about Officers, Directors, Trustees, Etc  2 Compensation of five highest-paid employee paid more than \$50,000	2.00 SECTY 0.50 TREAS 0.50  s (other than those inc hours per week	0 . 0 . 0 . luded on line 1 – see i	0.  0.  nstructions). If none, er  (d)Contributions to employee benefit plans and deferred	0.  0.  ter 'NONE.'  (e) Expense account,
29 SANTA ANA  DR., SALINAS, CA 93901  ERLINDA VALDEZ  1524, 9TH  ST., SANGER CA 93657  CATHERINE HILLMAN  9517 NE HAZEL DELL #97  VANCOUVER WA 98665  See Information about Officers, Directors, Trustees, Etc.  2 Compensation of five highest-paid employee paid more than \$50,000	2.00 SECTY 0.50 TREAS 0.50  s (other than those inc hours per week	0 . 0 . 0 . luded on line 1 – see i	0.  0.  nstructions). If none, er  (d)Contributions to employee benefit plans and deferred	0.  0.  ter 'NONE.'  (e) Expense account,
29 SANTA ANA  DR., SALINAS, CA 93901  ERLINDA VALDEZ  1524, 9TH  ST., SANGER CA 93657  CATHERINE HILLMAN  9517 NE HAZEL DELL #97  VANCOUVER WA 98665  See Information about Officers, Directors, Trustees, Etc.  2 Compensation of five highest-paid employee paid more than \$50,000	2.00 SECTY 0.50 TREAS 0.50  s (other than those inc hours per week	0 . 0 . 0 . luded on line 1 – see i	0.  0.  nstructions). If none, er  (d)Contributions to employee benefit plans and deferred	0.  0.  ter 'NONE.'  (e) Expense account,
29 SANTA ANA DR., SALINAS, CA 93901 ERLINDA VALDEZ 1524, 9TH ST., SANGER CA 93657 CATHERINE HILLMAN 9517 NE HAZEL DELL #97 VANCOUVER WA 98665 See Information about Officers, Directors, Trustees, Etc  2 Compensation of five highest-paid employee paid more than \$50,000	2.00 SECTY 0.50 TREAS 0.50  s (other than those inc hours per week	0 . 0 . 0 . luded on line 1 – see i	0.  0.  nstructions). If none, er  (d)Contributions to employee benefit plans and deferred	0.  0.  ter 'NONE.'  (e) Expense account,

3 Five highest-paid independent contractors for professional services (see		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	_	
	-	
	-	
	-	
	_	
	_	
	-	
	-	
	-	
Total number of others receiving over \$50,000 for professional services		None
Oct IVA Summary of Direct Charitable Activities		
Part X-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic organizations and other beneficiaries served, conferences convened, research papers produced, etc.	cal information such as the number of	Expenses
1	<b></b>	
2		
3		
	<del>-</del> -	
4		
	<del></del>	
IDECIMADE Comment of Brown Polated Investments (con inst	ructions)	
PanelX:By Summary of Program-Related Investments (see inst		
Describe the two largest program-related investments made by the foundation during	ng the tax year on lines 1 and 2.	Amount
1	<b></b>	
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		Form <b>990-PF</b> (2015)

BAA

Page 8

	see instructions.)		
•	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes Adverage monthly fair market value of securities		
(	Average of monthly cash balances	1 b	252,442.
	Fair market value of all other assets (see instructions)		
(	i Total (add lines 1a, b, and c)	1 d	252,442.
(	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	252,442.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	3,787.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	248,655.
6	Minimum investment return. Enter 5% of line 5	6	12,433.
'Ra'	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here  and do not complete this part.)	founda	tions
1	Minimum investment return from Part X, line 6	. 1	12,433.
2 :	Tax on investment income for 2015 from Part VI, line 5 2a 45.	<b>333</b>	
į	Income tax for 2015. (This does not include the tax from Part VI ) 2 b		
•	Add lines 2a and 2b	2 c	45.
3	Distributable amount before adjustments Subtract line 2c from line 1		12,388.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4		12,388.
6	Deduction from distributable amount (see instructions)		
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	. 7	12,388.
Pa	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes  Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	12 425
	Program-related investments – total from Part IX-B		12,425.
	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes		
	Amounts set aside for specific charitable projects that satisfy the  Suitability test (prior IRS approval required)	. 3 a	
	Cash distribution test (attach the required schedule)		
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	12,425.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	. 5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	. 6	12,425.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the fundamental qualifies for the section 4940(e) reduction of tax in those years.	oundation	

## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	<b>(c)</b> 2014	<b>(d)</b> 2015
1 Distributable amount for 2015 from Part XI,				12,388.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
<b>b</b> Total for prior years 20 , 20 , 20				
3 Excess distributions carryover, if any, to 2015				
a From 2010 0 .				
<b>b</b> From 2011 0 .				
<b>c</b> From 2012 0 .				
<b>d</b> From 2013 0 .				· ·
e From 2014 0 .				
f Total of lines 3a through e	0.		·	ĺ
4 Qualifying distributions for 2015 from Part				
XII, line 4 \\$ 12,425.				l i
a Applied to 2014, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years				
(Election required – see instructions)				
c Treated as distributions out of corpus (Election required — see instructions)				
<b>d</b> Applied to 2015 distributable amount				
e Remaining amount distributed out of corpus	12,425.			
5 Excess distributions carryover applied to 2015	0.			0.
(If an amount appears in column (d), the				
same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:	, ,			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	12,425.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed				
income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions		<del> </del>		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount — see instructions			0.	
	-			
f Undistributed income for 2015 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016	-			12,388.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required — see instructions)	12,425.			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9	<u> </u>		-	<del></del>
a Excess from 2011 0.				1
<b>b</b> Excess from 2012 0.	1			1
c Excess from 2013 0.	1	•		
d Excess from 2014 0 .	1			
	1			
e Excess from 2015 0 .	<u> </u>	<u> </u>	<u> </u>	<u> </u>

Form 990-PF'(2015) THE CLINTON FAMI	LY FOUNDATIO	N		20-4962385	Page <b>10</b>
Part XIV   Private Operating Founda				<del></del>	N/A
1 a If the foundation has received a ruling or del is effective for 2015, enter the date of the ru	termination letter that	it it is a private opera	ating foundation, and	the ruling	
<b>b</b> Check box to indicate whether the foundation		ing foundation descr		4942(J)(3) or	4942(J)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for each year listed	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
<b>b</b> 85% of line 2a					
C Qualifying distributions from Part XII, line 4 for each year listed					·
d Amounts included in line 2c not used directly for active conduct of exempt activities					·
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information assets at any time during the	i (Complete this he year — see i	s part only if the nstructions.)	e foundation ha	d \$5,000 or more	in
Information Regarding Foundation Mana     a List any managers of the foundation who had close of any tax year (but only if they have of GLORIA CLINTON	ive contributed more	than 2% of the total in \$5,000). (See sect	contributions received to the state of the s	ed by the foundation b	efore the
b List any managers of the foundation who over a partnership or other entity) of which the formal NONE	vn 10% or more of the undation has a 10%	ne stock of a corpora or greater interest	ition (or an equally la	arge portion of the own	ership of
2 Information Regarding Contribution, Gra Check here ☐ if the foundation only m requests for funds. If the foundation makes complete items 2a, b, c, and d.	akes contributions t gifts, grants, etc (se	o preselected charita e instructions) to indi	able organizations ar ividuals or organizati	ons under other condit	
a The name, address, and telephone number	or e-mail address o	f the person to whon	n applications should	d be addressed.	
GLORIA CLINTON,					
29 SANTA ANA DRIVE	020	.1 .0	21) 400 5704		
SALINAS  b The form in which applications should be su	CA 9390		31) 422-5794		
BY LETTER DESCRIBING SCHOOL					
c Any submission deadlines: NONE					
d Any restrictions or limitations on awards, su STUDENT MUST PURSUE AN EDUCATION 1					LINAS, CA AREA
5.055					

Form 990-PF (2015) THE CLINTON FAMILY FOUNDATION

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the	Year or Approved for Fut		t	
Recipient	If recipient is an individual, show any relationship to any foundation manager or	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	Todipion	· · · · · · · · · · · · · · · · · · ·	
a Paid during the year		501		
SPRECKELS EL SCHOOL DIST PO BOX 7362		C3		
SPRECKELS CA 939	62	ORG	P E SUPPLIES	1,500.
SALINAS CITY EL SCH DIST	02	501	L BOTTBIES	1,500.
840 S MAIN STREET		C3		
SALINAS CA 939	01	ORG	P E SUPPLIES	3,500.
SALINAS UN HIGH SCH DIST		501		·
431 ALISAL STREET		С3		
SALINAS CA 939	01	ORG	P E SUPPLIES	1,000.
SANGER UNIFIED SCH DIST		501		
JEFFERSON ELEM SCH 4TH GR		C3		
SANGER CA 936	57	ORG	GARDEN PROJECT	1,000.
VISALIA ED FUND		501		
GOSHEN SCHOOL		C3		
GOSHEN CA 932	27	ORG	ACTIVE PLAY FUND	1,000.
DAILEY ELEM SCHOOL		501		
3135 N HARRISON AVE		C3		<b>500</b>
FRESNO CA 937	04	ORG	RECESS/ PE EQUIP	500.
JOHN C FREMONT SCHOOL		501 C3		
1900 BELL CORCORAN CA 932	1 2	ORG	RECESS EQUIP	500.
RANCHO CIELO SCHOOL	12	501	RECESS EQUIF	500.
P O BOX 6948		C3		
SALINAS CA 939	12	ORG	CONSTR. COMPRESSOR	3,425.
Total		<u> </u>	3a	12,425.
<b>b</b> Approved for future payment				,
NONE				
Total			3b	0.

Part XVI-A	<b>Analysis of Income-Producing</b>	<b>Activities</b>

	amounts unless otherwise indicated	Unrelate	d business income	Exclude	d by section 512, 513, or 514	(e)
4 Danse		(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	<b>(d)</b> Amount	Related or exempt function income (See instructions.)
_	am service revenue		181	code	-	
a b				+	-	
	·					
ď				+		-
e						
f				1		
g Fees	and contracts from government agencies					
-	bership dues and assessments			1	-	,
3 Interes	it on savings and temporary cash investments					2,256
4 Divide	ends and interest from securities					
5 Net re	ental income or (loss) from real estate					
a Debt-	financed property					
<b>b</b> Not d	ebt-financed property					
6 Net rea	ntal income or (loss) from personal property					
	investment income					
	r (loss) from sales of assets other than inventory			<u> </u>		
	ncome or (loss) from special events					
	s profit or (loss) from sales of inventory					
	revenue					
a						
b	<del>_</del>					
		<u> </u>		<u> </u>		
¢		l .				
d				<b> </b>		
d	otal Add salumas (b) (d) and (a)					2.256
d	otal Add columns (b), (d), and (e)				13	2,256
d e 12 Subto	otal Add columns (b), (d), and (e)				13	2,256 2,256
d e 12 Subto 13 Total See works	heet in line 13 instructions to verify calculations	)				
d e 12 Subto 13 Total See works Part XVI	heet in line 13 instructions to verify calculations -B Relationship of Activities to the	Accomp	lishment of Exem	pt Pur	ooses	2,256
de 12 Subto 13 Total See works Part XVI	-B Relationship of Activities to the  Explain below how each activity for which incompositionship of the foundation's exempt positions.	e Accomp	lishment of Exem ed in column (e) of Part er than by providing fun	pt Purp t XVI-A co	ontributed importantly to ch purposes) (See instru	2,256
de 12 Subto 13 Total See works Part XVI	Relationship of Activities to the Explain below how each activity for which incomplishment of the foundation's exempt put THE FOUNDATION'S GOAL IS TO	e Accompone is report urposes (other USE ONL	lishment of Exemed in column (e) of Parter than by providing fun	IPT Purp t XVI-A co ads for sur	poses  ontributed importantly to ch purposes) (See instru	2,256
d	-B Relationship of Activities to the Explain below how each activity for which inconcern accomplishment of the foundation's exempt put THE FOUNDATION'S GOAL IS TO CORPUS TO MAKE SCHOLARSHIPS	e Accompone is report urposes (other USE ONL	lishment of Exem ed in column (e) of Pare er than by providing fun Y THE INTEREST L SALINAS AREA	t XVI-A conds for sure EARN	contributed importantly to ch purposes) (See instru	2,256
de 12 Subto 13 Total See works Part XVI	-B Relationship of Activities to the  Explain below how each activity for which incomplishment of the foundation's exempt put  THE FOUNDATION'S GOAL IS TO CORPUS TO MAKE SCHOLARSHIPS  STUDENTS. DISTRIBUTIONS ARE	e Accompone is report urposes (other USE ONL	lishment of Exem ed in column (e) of Pare er than by providing fun Y THE INTEREST L SALINAS AREA	t XVI-A conds for sure EARN	contributed importantly to ch purposes) (See instru	2,256
d	-B Relationship of Activities to the Explain below how each activity for which inconcern accomplishment of the foundation's exempt put THE FOUNDATION'S GOAL IS TO CORPUS TO MAKE SCHOLARSHIPS	e Accompone is report urposes (other USE ONL	lishment of Exem ed in column (e) of Pare er than by providing fun Y THE INTEREST L SALINAS AREA	t XVI-A conds for sure EARN	contributed importantly to ch purposes) (See instru	2,256
d	-B Relationship of Activities to the  Explain below how each activity for which incomplishment of the foundation's exempt put  THE FOUNDATION'S GOAL IS TO CORPUS TO MAKE SCHOLARSHIPS  STUDENTS. DISTRIBUTIONS ARE	e Accompone is report urposes (other USE ONL	lishment of Exem ed in column (e) of Pare er than by providing fun Y THE INTEREST L SALINAS AREA	t XVI-A conds for sure EARN	contributed importantly to ch purposes) (See instru	2,256
d	-B Relationship of Activities to the  Explain below how each activity for which incomplishment of the foundation's exempt put  THE FOUNDATION'S GOAL IS TO CORPUS TO MAKE SCHOLARSHIPS  STUDENTS. DISTRIBUTIONS ARE	e Accompone is report urposes (other USE ONL	lishment of Exem ed in column (e) of Pare er than by providing fun Y THE INTEREST L SALINAS AREA	t XVI-A conds for sure EARN	contributed importantly to ch purposes) (See instru	2,256
d	-B Relationship of Activities to the  Explain below how each activity for which incomplishment of the foundation's exempt put  THE FOUNDATION'S GOAL IS TO CORPUS TO MAKE SCHOLARSHIPS  STUDENTS. DISTRIBUTIONS ARE	e Accompone is report urposes (other USE ONL	lishment of Exem ed in column (e) of Pare er than by providing fun Y THE INTEREST L SALINAS AREA	t XVI-A conds for sure EARN	contributed importantly to ch purposes) (See instru	2,256
d	-B Relationship of Activities to the  Explain below how each activity for which incomplishment of the foundation's exempt put  THE FOUNDATION'S GOAL IS TO CORPUS TO MAKE SCHOLARSHIPS  STUDENTS. DISTRIBUTIONS ARE	e Accompone is report urposes (other USE ONL	lishment of Exem ed in column (e) of Pare er than by providing fun Y THE INTEREST L SALINAS AREA	t XVI-A conds for sure EARN	contributed importantly to ch purposes) (See instru	2,256
d	-B Relationship of Activities to the  Explain below how each activity for which incomplishment of the foundation's exempt put  THE FOUNDATION'S GOAL IS TO CORPUS TO MAKE SCHOLARSHIPS  STUDENTS. DISTRIBUTIONS ARE	e Accompone is report urposes (other USE ONL	lishment of Exem ed in column (e) of Pare er than by providing fun Y THE INTEREST L SALINAS AREA	t XVI-A conds for sure EARN	contributed importantly to ch purposes) (See instru	2,256
d	-B Relationship of Activities to the  Explain below how each activity for which incomplishment of the foundation's exempt put  THE FOUNDATION'S GOAL IS TO CORPUS TO MAKE SCHOLARSHIPS  STUDENTS. DISTRIBUTIONS ARE	e Accompone is report urposes (other USE ONL	lishment of Exem ed in column (e) of Pare er than by providing fun Y THE INTEREST L SALINAS AREA	t XVI-A conds for sure EARN	contributed importantly to ch purposes) (See instru	2,256
d	-B Relationship of Activities to the  Explain below how each activity for which incomplishment of the foundation's exempt put  THE FOUNDATION'S GOAL IS TO CORPUS TO MAKE SCHOLARSHIPS  STUDENTS. DISTRIBUTIONS ARE	e Accompone is report urposes (other USE ONL	lishment of Exem ed in column (e) of Pare er than by providing fun Y THE INTEREST L SALINAS AREA	t XVI-A conds for sure EARN	contributed importantly to ch purposes) (See instru	2,256
d	-B Relationship of Activities to the  Explain below how each activity for which incomplishment of the foundation's exempt put  THE FOUNDATION'S GOAL IS TO CORPUS TO MAKE SCHOLARSHIPS  STUDENTS. DISTRIBUTIONS ARE	e Accompone is report urposes (other USE ONL	lishment of Exem ed in column (e) of Pare er than by providing fun Y THE INTEREST L SALINAS AREA	t XVI-A conds for sure EARN	contributed importantly to ch purposes) (See instru	2,256
d	-B Relationship of Activities to the  Explain below how each activity for which incomplishment of the foundation's exempt put  THE FOUNDATION'S GOAL IS TO CORPUS TO MAKE SCHOLARSHIPS  STUDENTS. DISTRIBUTIONS ARE	e Accompone is report urposes (other USE ONL	lishment of Exem ed in column (e) of Pare er than by providing fun Y THE INTEREST L SALINAS AREA	t XVI-A conds for sure EARN	contributed importantly to ch purposes) (See instru	2,256
d Subto 13 Total See works Part XVI	-B Relationship of Activities to the  Explain below how each activity for which incomplishment of the foundation's exempt put  THE FOUNDATION'S GOAL IS TO CORPUS TO MAKE SCHOLARSHIPS  STUDENTS. DISTRIBUTIONS ARE	e Accompone is report urposes (other USE ONL	lishment of Exem ed in column (e) of Pare er than by providing fun Y THE INTEREST L SALINAS AREA	t XVI-A conds for sure EARN	contributed importantly to ch purposes) (See instru	2,256
d Subto 13 Total See works Part XVI	-B Relationship of Activities to the  Explain below how each activity for which incomplishment of the foundation's exempt put  THE FOUNDATION'S GOAL IS TO CORPUS TO MAKE SCHOLARSHIPS  STUDENTS. DISTRIBUTIONS ARE	e Accompone is report urposes (other USE ONL	lishment of Exem ed in column (e) of Pare er than by providing fun Y THE INTEREST L SALINAS AREA	t XVI-A conds for sure EARN	contributed importantly to ch purposes) (See instru	2,256
d	-B Relationship of Activities to the  Explain below how each activity for which incomplishment of the foundation's exempt put  THE FOUNDATION'S GOAL IS TO CORPUS TO MAKE SCHOLARSHIPS  STUDENTS. DISTRIBUTIONS ARE	e Accompone is report urposes (other USE ONL	lishment of Exem ed in column (e) of Pare er than by providing fun Y THE INTEREST L SALINAS AREA	t XVI-A conds for sure EARN	contributed importantly to ch purposes) (See instru	2,256
d	-B Relationship of Activities to the  Explain below how each activity for which incomplishment of the foundation's exempt put  THE FOUNDATION'S GOAL IS TO CORPUS TO MAKE SCHOLARSHIPS  STUDENTS. DISTRIBUTIONS ARE	e Accompone is report urposes (other USE ONL	lishment of Exem ed in column (e) of Pare er than by providing fun Y THE INTEREST L SALINAS AREA	t XVI-A conds for sure EARN	contributed importantly to ch purposes) (See instru	2,256
d	-B Relationship of Activities to the  Explain below how each activity for which incomplishment of the foundation's exempt put  THE FOUNDATION'S GOAL IS TO CORPUS TO MAKE SCHOLARSHIPS  STUDENTS. DISTRIBUTIONS ARE	e Accompone is report urposes (other USE ONL	lishment of Exem ed in column (e) of Pare er than by providing fun Y THE INTEREST L SALINAS AREA	t XVI-A conds for sure EARN	contributed importantly to ch purposes) (See instru	2,256
d	-B Relationship of Activities to the  Explain below how each activity for which incomplishment of the foundation's exempt put  THE FOUNDATION'S GOAL IS TO CORPUS TO MAKE SCHOLARSHIPS  STUDENTS. DISTRIBUTIONS ARE	e Accompone is report urposes (other USE ONL	lishment of Exem ed in column (e) of Pare er than by providing fun Y THE INTEREST L SALINAS AREA	t XVI-A conds for sure EARN	contributed importantly to ch purposes) (See instru	2,256
d E Subto 13 Total See works Part XVI	-B Relationship of Activities to the  Explain below how each activity for which incomplishment of the foundation's exempt put  THE FOUNDATION'S GOAL IS TO CORPUS TO MAKE SCHOLARSHIPS  STUDENTS. DISTRIBUTIONS ARE	e Accompone is report urposes (other USE ONL	lishment of Exem ed in column (e) of Pare er than by providing fun Y THE INTEREST L SALINAS AREA	t XVI-A conds for sure EARN	contributed importantly to ch purposes) (See instru	2,256

Form <b>990-P</b> l			LY FOUNDATION			20-4962385		ge 13
Part XVII	Information Reg Exempt Organiz	arding Trai	nsfers To and Tra	nsaction	s and Relationships V	Vith Noncharitable	<del></del>	
1 Did the	e organization directly of	r indirectly enga	age in any of the follow	ng with any	other organization	-	Yes	No
descri	bed in section 501(c) of g to political organization	the Code (othe	r than section 501(c)(3	) organizatí	ons) or in section 527,		5	
	fers from the reporting for		•	-		<del></del>	_	
٠,							_	X
						<u>1 a (2</u>	9	Х
	transactions	<del>-</del>				4 15 //		
			•			<u>`</u>	<del>`                                    </del>	X
			. •			<del></del>	<del>`</del>	X
• •	• • •	•						X
٠,	•					<u></u>	-	X
	=							X
٠,,		•	•				<del>"</del> —	X
- Onami	ig or radinace, equipmen	ic, maining note,	onio, accord, or para or					1
the go	ods, other assets, or se-	rvices aiven by	the reporting foundation	<ul> <li>n. If the fou</li> </ul>	imn (b) should always show t ndation received less than fai ods, other assets, or services	ır market value ın		
(a) Line no	(b) Amount involved	(c) Name o	of noncharitable exempt orga	inization	(d) Description of transfers,	transactions, and sharing an	angemen	ts
					<u> </u>			
					***			
			-					
								_
_				<u>-</u>				
		<u> </u>		1				
descri	foundation directly or in- bed in section 501(c) of s.' complete the following	the Code (other	d with, or related to, one er than section 501(c)(3	e or more ta )) or in sect	ex-exempt organizations ion 527?		es X	No
	(a) Name of organizatio	<u> </u>	(b) Type of org	anization	/c) Doc	scription of relationship		
	(a) Name of Organizatio		(b) Type of org	-	(C) Des	somption of relationship		
				•				
						<del></del>		
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					<u> </u>			

Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Sign Here May the IRS discuss this return with the preparer shown below (see instructions)?

	Signature of officer or trustee				Date			В			<u> X</u>	Yes	- 1	N							
		Print/Type prepare	er's n	ame			Preparer's	sıgnatu	re			Date			Check	X ıf	PTIN				
Paid		ALVIN W.	P	AYNE			ALVIN	W.	PAYNE			08/16	/16		self-employ	red	P00	434	<u> 186</u>	4	
Prepar	er	Firm's name	-	Alvın	W	Payne	CPA							Fırm'	's EIN 🟲	20-0 <u>6</u>	6666	06			
Use O		Firm's address	•	33315	E	Carme	l Vall	ey F	₹d.												
	•			Carmel	\ \tag{1}	/allev				CA	939	24939	в І	Phor	ne no	(831	6	59-	511	73	

BAA

Form 990-PF, Page 1, Part I, Line 23 Line 23 Stmt

Other expenses	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb		
OFF/DIR. LIAB INS.	1,173.					
CAL #199 FILING FEE	10.					

Total

1,183.

Form 990-PF, Page 6, Part VIII, Line 1 Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person. X Business				
331 CENTRAL	DIRECTOR		_	_
AVE., SALINAS CA 93901	0.50	0.	0.	0.
Person X Business . DENNIS CLINTON				
101 ENOS DR.	DIRECTOR			
SALINAS CA 93908	0.50	0.	0.	0.
Person X Business				
378 SANDY COVE DR.	DIRECTOR			
CHICO CA 95973	0.50	0.	0.	0.
Person . X Business JOANN WESTERLING				
1050 BRONCHO, PEBBLE	DIRECTOR	·		
BEACH CA 93953	0.50	0.	0.	0.
Person X Business CATHERINE MASSEY				
6483 N.AUGUSTA	DIRECTOR			
FRESNO CA 93710	0.50	0.	0.	0.
Person X Business . NINA CLANCY				
2839 BORDERLINKS	DIRECTOR			
RD, VISALIA CA 93921	0.50	0.	0.	0.

Total

0.	0.	0.