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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

Department of the Treasury Internal Revenue Service

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

TRAVERS PAMILY FOUNDATION **Remote the Processing of the Control of the Control and the Contr		FOL	caler	idar year 2016 or tax year deginning		, and ending		
Roombox B Telephone number 201		Nar	ne o	foundation			A Employer identification	number
Roombox B Telephone number 201		т	RA	VERS FAMILY FOUNDATION			68-6095780)
2099 MT. DIABLO BLVD Oby or lown, state or province, country, and 2P or foreign postal code WALNUT CREEK. CA 94596 G Check all that apply:					address)	Room/suite		
Cuty of bow, state or protonic, country, and 210 or foreign postal code WALNUT CREEK CA 94596 G Check all that apply:		2	n 9	9 MT. DIABLO BLVD		201	- T	16
WALNUT CREEK, CA 94596 6 Check all that apply: Initial return Initial return of a former public charity Prior term Initial return Annoted return Anno	•				nostal code			
Check all that apply:		-			rostal code		o il exemption application is p	ending, check hare
Final return Anneaded retu					Initial return of a fe	ormer nublic charity	D 1 Foreign organizations	check here
Address change	,	a c	IIICUR			office public charity	J. Foreign organizations	s, chock flore
Check type of organization: Section 501(c)(3) eveript private foundation Section 507(c)(1)(a), check here If private foundation If arm market value of all assets at end of year J Accounting method: XL Cash Accounting from Part IV, col (c), lene 16) Accounting method: XL Cash Accounting from Part IV, col (c), lene 16) Accounting method: XL Cash Accounting from Part IV, col (c), lene 16) Accounting method: XL Cash Accounting method: Accounting method: XL Cash Accounting method: Accounting					=		2. Foreign organizations me	seting the 85% test,
Section 4847[a]() nonexempt characteristic trust Other transfer value of all assets at end of year J Accounting method: (Com Part II), cold (Co.) line 16 Other (Speech)		<u>, , , , , , , , , , , , , , , , , , , </u>	hook				1	
Farr market value of all assets at end of year Accounting method:			_			ation		
Part Analysis of Revenue and Expenses Color Co		<u></u>					1	•
Part Analysis of Revenue and Expenses (a) Revenue and (b) Net investment (c) Adjusted net (d) Cathursenses (d) Revenue and (e) Revenue and				· —	-	Accidal	1	
Part				Part II, coi (c), line 16)	mer (specily)	hacie I	under section 507(b)(1)	o(b), check here
1 Contributions, gifts, grants, etc., received 2 cheek X it is the developed in a back Sch 8 3 start investments 4 Dividends and interest from securities 1314640 1314640 1314640 STATEMENT 2 5 Gross rents 1314640 1314640 1314640 STATEMENT 2 5 Gross rents 1833683 3 cheek securities 1833683	ſ				1			(d) p
Company	į	Pa	IT I	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books			for charitable purposes
Section Sect	_		1	Contributions, gifts, grants, etc., received				
A Dividends and interest from securities 1314640. 1314640. STATEMENT 2			2	-				
A Dividends and interest from securities 1314640. 1314640. STATEMENT 2			3	Interest on savings and temporary cash investments	915241.	915241.		
Day			4		1314640.	1314640.	1314640.	STATEMENT 2
Second part of closes) from sale of asserts not on line 10			5a	Gross rents				
103 and allowances	~		b	Net rental income or (loss)				
103 and allowances	5 201	•	6a	Net gain or (loss) from sale of assets not on line 10	230272.			
103 and allowances		ě	b	Gross sales price for all assets on line 6a 1833683.				
103 and allowances		e	7	Capital gain net income (from Part IV, line 2)		230272.		
103 and allowances	٠. نو	Œ	8	Net short-term capital gain			N/A	
103 and allowances	¥		9					
14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professionalfees 17 Interest MAY 1 9 2017 18 Taxes STMT 5 20012. 20012. 0. 0. 18 Taxes 19 Depreciation and depletion ODEN 15 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 25 Octobroom 26 Total expenses and disbursements 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 28 Total expenses and disbursements 516131.	_		10a	Gross sales less returns and allowances				
14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professionalfees 17 Interest MAY 1 9 2017 18 Taxes STMT 5 20012. 20012. 0. 0. 18 Taxes 19 Depreciation and depletion ODEN 15 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 25 Octobroom 26 Total expenses and disbursements 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 28 Total expenses and disbursements 516131.			b	Less Cost of goods sold				
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16a Legal fees								
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a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 2342384.	-		27		40/44/10	<u> </u>	•	<u> </u>
b Net investment income (if negative, enter -0-)					516131			
0260120					313131	2342384		
				Adjusted net income (if negative, enter -0-)			2360130.	<u> </u>

623501 11-23-18 LHA For Paperwork Reduction Act Notice, see instructions.

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30				
	(must agree with end-of-year figure reported on prior year's return)		1	37843559) .
2	Enter amount from Part I, line 27a		2	516131	<u>.</u>
		STATEMENT 7	3	5310904	<u>i .</u>
	Add lines 1, 2, and 3		4	43670594	Ī.
•	Decreases not included in line 2 (itemize)		5	C	<u>.</u>
_	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30		6	43670594	Ī.
٧.	Total flot assets of fund buildings at one of your (mile 1 million mile 9)			222 55	

1826253.

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

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

	90-PF (2016) TRAVERS FAMILY FOUNDATION						<u>6095</u>			Page 4
Part					, or 4	948	- see ir	ıstrı	ictio	ns)
	empt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and e									
	ate of ruling or determination letter: (attach copy of letter if nec								004	. .
	omestic foundations that meet the section 4940(e) requirements in Part V, check here	► LX.	and enter	1%	P	1_			234	<u> </u>
	Part I, line 27b									
	other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%			col. (b).	,	_				^
	x under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Of	thers en	iter -0-)			2			224	0.
	id lines 1 and 2					3			<u>234</u>	<u> </u>
	ubtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. O	itners ei	nter -U-)			4			224	24
	x based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-					_ 5			234	<u> </u>
	edits/Payments:	١.,.	1	211	200.					
	116 estimated tax payments and 2015 overpayment credited to 2016	6a		214	<u> </u>					
	tempt foreign organizations - tax withheld at source	6b								
	x paid with application for extension of time to file (Form 8868)	6c 6d								
	ickup withholding erroneously withheld	00	1			7			212	٥٥
	otal credits and payments. Add lines 6a through 6d oter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	chod				8			<u> </u>	00.
	x due. If the total of lines 5 and 8 is more than line 7, enter amount owed	CHEU				9			22	24.
	rerpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					10			<u> </u>	<u> </u>
	ter the amount of line 10 to be: Credited to 2017 estimated tax			Refund	ad 🖢	11				
	VII-A Statements Regarding Activities			THOTAIL	ou p					
	iring the tax year, did the foundation attempt to influence any national, state, or local legis	lation o	r did it pari	ticipate or in	tervene	ın			Yes	No
	y political campaign?		dia it pari	noipato oi ii			ţ	1a	X	
	d it spend more than \$100 during the year (either directly or indirectly) for political purpos	ses (see	instructio	ns for the d	efinition	12	Ī	1b		X
	the answer is "Yes" to 1a or 1b, attach a detailed description of the activities a						Ī			 -
	stributed by the foundation in connection with the activities.	,,,,,,	,		,		[
	d the foundation file Form 1120-POL for this year?							1c		X
	ter the amount (if any) of tax on political expenditures (section 4955) imposed during the	vear:					ľ			
(1	On the foundation. > \$ (2) On foundation managers	. ▶ \$			0.					
e Er	ter the reimbursement (if any) paid by the foundation during the year for political expendi	iture tax	imposed o	on foundation						
	anagers. ▶ \$0.		•				1			
	is the foundation engaged in any activities that have not previously been reported to the IF	RS?					Į	2		X
If	"Yes," attach a detailed description of the activities.									
3 Ha	is the foundation made any changes, not previously reported to the IRS, in its governing i	nstrum	ent, articles	of incorpo	ration, o	r				
by	laws, or other similar instruments? If "Yes," attach a conformed copy of the change	es						3		<u>X</u>
4a Di	d the foundation have unrelated business gross income of \$1,000 or more during the yea	r?					L	4a		<u>X</u>
b If	Yes," has it filed a tax return on Form 990-T for this year?					N	/A	4b		
	as there a liquidation, termination, dissolution, or substantial contraction during the year?	•					ļ	5		<u>X</u>
lf	"Yes," attach the statement required by General Instruction T.									
6 Ar	e the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied ei	ther:]			
	By language in the governing instrument, or						1			
•	By state legislation that effectively amends the governing instrument so that no mandator	y dırectı	ons that co	onflict with 1	he state	law				
	main in the governing instrument?							6		<u>X</u>
7 Di	d the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," con</i>	nplete	Part II, co	l. (c), and l	Part XV		ŀ	7	X	
	ter the states to which the foundation reports or with which it is registered (see instructio	ns) 🟲			_					
	CA									
	the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttorney	General (o	r designate)				٥.	\	
	each state as required by General Instruction G? If "No," attach explanation		10(.)(0)	404043453	£ 1	- 4-	}	8b	X	
	the foundation claiming status as a private operating foundation within the meaning of se				tor cale	noar				v
	ar 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," c						}	9		$\frac{\mathbf{x}}{\mathbf{x}}$
10 Di	d any persons become substantial contributors during the tax year? if "Yes," attach a schedu	ile tisting	their names	and addresse	s		Far-	10 . QQ ()-PF	
							rorr	∵ ッツし	,-rr	(2010)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section \$12(h); 137 if 17% attach schedule (see instructions) 1 Did the foundation make a destination to a doner advised fund over which the foundation or a disqualified person had advisory privileges? 1 Tif 17% attach statement (see instructions) 13 Did the foundation comply with the public inspection requirements for its annual returns and examption application? 14 The books are in care of \$\bigs CHARLES\$ IN TRAVERS 15 Decide of \$\bigs 2,099 MT. DIABLO BLYD \$\bigs 201\$, WAINUT CREEK, CA ZIPH \$\bigs 4.59.50\$ 15 Section 4547(s)(1) nonexempt charabite frusts thing from 990-PF in lieu of Form 1941 - Check here and senter the amount of trave-emptile interests received or accord during the year. 16 At any time during caleflading year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other instinations for exceptions and filing requirements for PiniCRN Form 114. If Yes, enter the aams of the productions for exceptions and filing requirements for PiniCRN Form 114. If Yes, enter the aams of the production of the received from the foundation have an interest in or a signature or other authority over a bank, securities, or other instination and the foundation of the Piver Foundation (which is a foundation for exceptions and filing requirements for PiniCRN Form 114. If Yes, enter the aams of the production cellular and from the control of the Piver Foundation (which is a foundation for exceptions and filing requirements for PiniCRN Form 114. If Yes, enter the aams of the production of the foundation of the Piver Foundation (which is a signal filed person)? 15 Section 4720 If any Items is checked in the Yes' colution, unless an exception applies. 16 Form 4720 If any Items is checked in the Yes' colution, unless an exception applies. 17 Form 4720 If any Items is checked in the Yes' colution, unless an exception applies. 18 Form 4720 If any Ite	Pε	art VII-A Statements Regarding Activities (continued)			
section 512(b)(13)? If "Yes," attach schedule (see instructions) 10 dithe foundation make a distribution to a donce advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) 10 dithe foundation comply with the public inspection requirements for its annual returns and examption application? Whitestee address > \(\) \(\				Yes	No
12 Did the foundation make a distribution to a disoner advised fund over which the foundation or a disqualified person had advisory privileges? 13 Did the foundation cemby with the public inspection requirements for its annual returns and exemption application? Websets address ▶ N/A 13 The blooks are one or to ► CHARLES N TRAVERS Located at ▶ 20.99 MT. DTABLO BLVD ₱ 20.1, WALNUT CREEK, CA 21P4 ₱ 94596 Section 4947(1) fromesamp forthathel trusts filing from 994PF in less of form 1941-Check here and neitr the amount of tax-exempt interest received or accrued during the year 16. At any time during calendar year 2016, did not foundation have an interest in or a signature or other authority over a bank, securities, or other interiors for exceptions and filing requirements for FinCEN Form 114. If Yes, enter the name of the foreign country. See the instructions for exceptions and filing requirements for FinCEN Form 114. If Yes, enter the name of the foreign country. See the instructions for exceptions and filing requirements for FinCEN Form 114. If Yes, enter the name of the foreign country. See the instructions for exceptions and filing requirements for FinCEN Form 114. If Yes, enter the name of the foreign country. See the instructions for exceptions and filing requirements for FinCEN Form 114. If Yes, enter the name of the foreign country. Yes No 15 Is Tarisfar and the sake or exchange, or idealing the property with a disqualified person? 16 Jerus the sake or exchange, or idealing the foreign of the property to a disqualified person? 17 Jerus and the sake or exchange, or idealines to (or accept them from) a disqualified person? 18 Jerus the property to a powerment the expenses of, a disqualified person? 19 Jerus the property to a disqualified person? 19 Jerus the property to a goverment of the acception of the property to a goverment of the property to a government of the property to a power foreign pe	11		١		,,
If Yes, attach statement (see instructions) 12			11	-	-X
13	12		40		v
Website address ► N/A 1 The books are in care of ► CHARLES N TRAVERS Telephone no. ► 415-250-9016 Located at ► 2099 MT. DIABLO BLVD #201, WALNUT CREEK, CA 278-4 ▶94596 15 Section 4947(a)(1) one-sempt chartable trusts filing Form 990-PF in less of Form 1041-Check here and enter the amount of tax-weigh untresst received or accrued during the year 16 Al any time during calendar year 2016, 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? Part VII-B Stationments 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. 10 During the year did the foundation (lettle directly or indirectly): (11) Engage in the sale or exchange, or leasing of property with a disqualited person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualited person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualited person? (4) Pay compensation to, or pay or reamburse the expenses of, a disqualited person? (5) Transfer any income or assets to a disqualited person (or make any of either available for the benefit or use of a disqualited person (or make any of either available for the benefit or use of a disqualited person (or make any of either available for the benefit or use of a disqualited person (or make any of either available for the benefit or use of a disqualited person (or make any of either available for the benefit or use of a disqualited person (or make any of either available for the benefit or use of a disqualited person (or make any of either available) (6) Agree to pay money or property to a government official? (Exception, Check No' if the foundation are apper in a provernment official? (Exception, Check No' if the foundation engage in a prov year in any of the acts fail to quality under the exceptions described in Regulations section 404(10) and a current	40			v	
14. The books are in caso of ▶ CHARLES N TRAVERS Located at № 20.99 MT. DIABLO BLUD #20.1 WALNUT CREEK, CA ZIP-4 ▶ 94.595 15. Section 947(a)(1) nonexempt chartable trusts liming Form 990-PF in flet of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year A tray time during cleandry are 210, 6, dithe foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and friting requirements for FinCEN Form 114. If "Yes," enter the name of the financial account in a foreign country? Pert 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. 1 a buring the year did the foundation (either directly or indirectly); (1) Engage in the sale or exchange, or lessing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) and sisqualified person? (3) Furnish podds, services, or facilities to (or accept them from) a disqualified person? (3) Furnish podds, services, or facilities to (or accept them from) a disqualified person? (3) Furnish podds, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation tio, or pay or remburse the expenses of, a disqualified person? (5) Transfer any income or assests to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? (6) Agree to bay money or property to a poverment official? (Exception, Check 'No' if the Coundation engage in a prior year in any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(0)-3 or in a current notice regarding disaster assistance (see instructions)? (7) Payer to any money or property on a pourement official person (remains any of the acts fail to qualify under the exceptions described in Reg	13		10	Α_	Ь
Located at № 20.99 MT. DIABLO BLVD #201, WALNUT CREEK, CA ZIP-4 ▶945.96 IS Section 4947(a)(1) nonexempt charatable trusts filing form 990-PF in Neu of Form 1041 - Check here and enter the amount of tax-exampt interest received or accrued during the year 16. All any time during calendary year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other himaneal sociount in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If Yes,* enter the name of the finesing occurity. ▶ Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any Item is checked in the "Yes" followin, unless an exception applies. 1 a During they year did the foundation (either directly or indirectly): (1) Engage in the sale or 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? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assests to a disqualified person (or make any of either available for the benefit or use of a desqualified person) (6) Agree to pay money or property to a government official? (Exception, Check No. of the foundation agree in a pure year of the acception and the foundation segment and prover year and yell of the acception of the provisions of section 4942(a)(a) or a current notice regarding disaster assistance (see instructions)? (7) Charles to pay money year property to a government official? (Exception, Check No. of the foundation agree in a princy with the disaster) assistance of the foundation was a private operating foundation segment and provision of section 4942(a)(a) or a current notice regarding disaster assistance (see instructions)? (2) Taxes on failure to distribute incomer (section 49	1.4		50-9	016	
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(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.) b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A Organizations relying on a current notice regarding disaster assistance check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016? 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)): a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? b Are there any years listed in 2a for which the foundation is not 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.) N/A 2b If 'Yes, 'did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? 1a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? 1b If 'Yes, 'did the foundation had excess business holdings in 2016 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 grift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Fo					
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statement - see instructions.) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. —	D				
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Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No	c				
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had not been removed from jeopardy before the first day of the tax year beginning in 2016?			4a		<u> </u>
	b				v
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Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be I	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Yo	es X No	1	
(2) Influence the outcome of any specific public election (see section 4955); of	r to carry on, directly or indir				
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section				
4945(d)(4)(A)? (see instructions)		Ye	es 🗓 No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t	for			
the prevention of cruelty to children or animals?		Ye	s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described	ın Regulations			1
section 53.4945 or in a current notice regarding disaster assistance (see instru		g	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	•		▶		+
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ined			
expenditure responsibility for the grant?		1/A 🖂 Y	es 🔲 No		
If "Yes," attach the statement required by Regulations section 53.494		·/ A !!	** NO		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to					
a personal benefit contract?	pay premiums on		es X No		
•	arcanal hanafit contract?	L 10		6b	X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			OD .	 ^
If "Yes" to 6b, file Form 8870.	holtor transportung		es X No		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		16		7b	+
<u>b If "Yes," did the foundation receive any proceeds or have any net income attribu</u> Part VIII Information About Officers, Directors, Trust		nagara Highl	, 1	/ 0	
Paid Employees, and Contractors	885, Foundation Ma	illayers, migrii	y		
List all officers, directors, trustees, foundation managers and their	compensation.				
List all officers, directors, a disters, foundation managers and their		(c) Compensation	(d) Contributions to employee benefit plans	(e) F	xpense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	and deferred	accou	nt, other
	to position	enter'-0-)	compensation	allov	vances
		1117			_
SEE STATEMENT 12		116500.	0.		<u> </u>
				ı	
Compensation of five highest-paid employees (other than those inc		enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) E	xpense nt, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	and deferred compensation	allov	vances
NONE					
				!	
Cotal number of other employees paid over \$50,000		J			0
otal number of other employees paid over \$50,000	· · · · · · · · · · · · · · · · · · ·		Eorm	990-P	F (2016)
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Form 990-PF (2016) TRAVERS FAMILY FOUNDATION	68-6095	5780 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	ion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter '		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	-	
Fotal number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	•	C
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic	al information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produ N/A	ced, etc.	
		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on line N/A	nes 1 and 2.	Amount
All other program-related investments. See instructions.		
Total, Add lines 1 through 3	-	0 . rm 990-PF (2016)
	Fo	rm 990-PF (201

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a		1a	40000000.
b	Average of monthly cash balances	1b	
C		1c	10500000.
d		1d	50500000.
_	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	14280000.
3	Subtract line 2 from line 1d	3	36220000.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	543300.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	35676700.
6	Minimum investment return. Enter 5% of line 5	6	1783835.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here and do not complete this part.)	d certain	ı
1	Mınımum ınvestment return from Part X, line 6	1	1783835.
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	23424.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1760411.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1760411.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1760411.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1826253.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	ŀ	
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1826253.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	23424.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1802829.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years.	ualifies fo	or the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,				1760411
line 7				1760411.
2 Undistributed income, if any, as of the end of 2016			1010003	
a Enter amount for 2015 only			1818023.	
b Total for prior years:		^		
		0.	·	
3 Excess distributions carryover, if any, to 2016:				
a From 2011	;			
b From 2012				
c From 2013				
d From 2014 e From 2015				
·	0.			
f Total of lines 3a through e				
4 Qualifying distributions for 2016 from				
Part XII, line 4: ► \$ 1826253.			1818023.	
a Applied to 2015, but not more than line 2a			1010023.	
b Applied to undistributed income of prior		ο.		
years (Election required - see instructions)		U •		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	U•			8230.
d Applied to 2016 distributable amount	0.			0230.
e Remaining amount distributed out of corpus	0.			0.
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
e Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable			- · · · · · · · · · · · · · · · · · · ·	
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				1752181.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2012				
b Excess from 2013				
c Excess from 2014				
d Excess from 2015				
e Excess from 2016				

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Part XIV Private Operating F	 '		I-A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo			▶ └		
b Check box to indicate whether the found		ting foundation described		4942(j)(3) or49	342(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	1 22.22	
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for	i				
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					!
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Compl	ete this part only	if the foundation	n had \$5,000 or mo	ore in assets
at any time during t					
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation who			ributions received by the	e foundation before the clos	se of any tax
year (but only if they have contributed m	iore than \$5,000). (See	section 507(d)(2).)			
NONE			- 		
b List any managers of the foundation who			(or an equally large port	ion of the ownership of a pa	artnership or
other entity) of which the foundation has	a 10% or greater intere	est.			
NONE					
2 Information Regarding Contributi				net cesset upoplicated resu	anta for funda. If
Check here if the foundation o the foundation makes gifts, grants, etc. (
a The name, address, and telephone numl	·				
CHARLES N TRAVERS, 4			cations should be addre		
2099 MT. DIABLO BLVD			A 94596		
b The form in which applications should b					
WRITTEN FORM PURPOSE				TZATTON	
c Any submission deadlines:					
NONE					
d Any restrictions or limitations on awards	, such as by geographic	cal areas, charitable fields,	kınds of institutions, or	other factors:	
NO					
		· • • • • • • • • • • • • • • • • • • •	<u> </u>		Form 990-PF (2016)

Enter gross amounts unless otherwise indicated.	Unrelated I	ousiness income		by section 512, 513, or 514	(e)
, vicinity of the same of the	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a	_			<u></u>	
b					
c	_				
d	_				
e	_				
f	_				
g Fees and contracts from government agencies					·
2 Membership dues and assessments			- 		
3 Interest on savings and temporary cash					01 5 2 4 1
Investments A Dyudeede and interest from cocurties					915241 1314640
4 Dividends and interest from securities					1314040
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property	 				
6 Net rental income or (loss) from personal					
property					120240
7 Other investment income			 - -		130249
8 Gain or (loss) from sales of assets other					230272
than inventory Net income or (loss) from special events					430414
O Gross profit or (loss) from sales of inventory	· 				
1 Other revenue:					
	1 1				
c					
d	I I				
e					
2 Subtotal. Add columns (b), (d), and (e)		0).	0.	2590402
3 Total. Add line 12, columns (b), (d), and (e)				13	2590402
See worksheet in line 13 instructions to verify calculations.)	1				
		uliahunant of l	Evamet D		
Part XVI-B Relationship of Activities	to the Accom	ipiisnment of i	Exempt P	urposes	
Line No. Explain below how each activity for which in	come is reported in c	olumn (e) of Part XVI	I-A contributed	importantly to the accomp	olishment of
the foundation's exempt purposes (other that					
			<u>.</u>	<u></u>	· · · · · · · · · · · · · · · · · · ·
				<u> </u>	
				. -	
					
				· · · · · · · · · · · · · · · · · · ·	
				·	
					· — — — — — — — — — — — — — — — — — — —

Part XVII	Information P	ngording Tran	efere To	and Transactions	and Palation			raye 13
rait XVII	Exempt Organ		51615 10 6	and manisactions	and helation		ilai itabie	
1 Did the or			of the following	ng with any other organizat	tion described in se	ction 501(c) of	Ye	s No
				27, relating to political orga		011011 00 1(0) 01		1
	from the reporting found				arried to the			
(1) Cash				9			18(1)	X
(2) Other	assets						1a(2)	X
b Other tran							13(3)	T
	of assets to a noncharital	hle exempt organiza	tion				16(1)	<u> </u>
	nases of assets from a no						1b(2)	X
` '	al of facilities, equipment,	•	n garnzation				1b(3)	X
` '	bursement arrangements						1b(4)	X
` '	s or loan guarantees						1b(5)	X
	rmance of services or me	mhership or fundrai	sına solıcıtatıd	ons			1b(6)	X
	f facilities, equipment, ma	-	_				1c	X
•		• ,		dule. Column (b) should a	lways show the fail	r market value of the goo	ds, other assets,	
	•			ed less than fair market va				
) the value of the goods,				-			
	(b) Amount involved			e exempt organization	(d) Descripti	ion of transfers, transactions,	and sharing arranger	nents
			N/A					
				-	-			
1 - 11								
				······································			_	
	· · ·							
2a Is the four	dation directly or indirect	tly affiliated with, or i	elated to, one	or more tax-exempt organ	nizations described			
in section	501(c) of the Code (other	than section 501(c)	(3)) or in sect	ion 527?			Yes 🖸	X No
	omplete the following sche		,					
	(a) Name of org			(b) Type of organization		(c) Description of relati	onship	
	N/A							
				-				
Under	penalties of perjury, I declare	that I have examined thi	s return, includin	g accompanying schedules an n taxpayer) is based on all infor	d statements, and to the	ne best of my knowledge	May the IRS discus	
Sign	siler, it is true, correct, and con	npiete Declaration of pr	враня (опнектна	I taxpayer) is based on all lillor	Mador of which propa	or has any knowloago	return with the prep shown below (see in	arer nstr)?
Here	Charle	Win	uces	5-11-17		STEE	X Yes	No
Šign	ature of officer or trustee			Date	Title			
	Print/Type preparer's na	ıme	Preparer's s	gnature	Date	Check X If PT	IN	
			00	H	5/9/17	self- employed		_
Paid	JOHN HARPE		1	- Mage	1/1/1/		0064154	3
Preparer	Firm's name ► JOH	N HARPER,	/ CPA	v -		Firm's EIN ► 68-	0339663	
Use Only								
	Fırm's address ▶ 20				201			_
	WA_	LNUT CREE	K, CA	94596		Phone no. 925-	<u> 295-302</u>	
							Form 990-Pi	(2016)

623622 11-23-16

TRAVERS FAMILY F	OUNDATION		609578		AGE 1	OF 1
	sses for Tax on Investment Income			h) How one word	1	
	describe the kind(s) of property so ick warehouse; or common stock, 2			P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a TD AMERITRADE				D		
	#784919805			D		
	#Z48-703430			P		
d NATL FINL SVC :				D D		
	#Z48-703430			D	-	
9						
<u>h</u>						
		·				
<u> </u>						
1						
m						
n						
0	(D) D	110-1			1	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) (e) p	Gain or (loss) lus (f) minus (g)	
119849.		55087	7.			64762.
368321.		346707	7.			21614.
89886.		158282				-68396.
116797. 899507.	<u> </u>	112949 675386			<u></u>	3848. 224121.
f 239323.		255000			·	-15677.
9					 	230774
n						
<u> </u>			-			
n				·		
1						
Complete eath for contact about		the foundation on 10/01/00	 			<u>.</u>
Complete only for assets snowing	g gain in column (h) and owned by (j) Adjusted basis	(k) Excess of col. (i)		(I) Loss Gains (excess o	ses (from col. (h)) of col. (h) gain over	col. (k),
(i) F.M.V. as of 12/31/69	as of 12/31/69	over col. (j), if any		but no	ot less than "-0-")	, ,,
			**			64762.
)						21614.
<u> </u>			**			-68396. 3848.
<u> </u>			- 			224121.
·	······································					-15677.
]						
1			_			
<u> </u>			-			
ζ				<u></u>		
n						
<u> </u>	<u> </u>					<u>_</u>
<u> </u>	<u>.</u>	<u> </u>	 			
Capital gain net income or (net cap	ortal loss) { If gain, also enter "-C	r in Part I, line 7)-" in Part I, line 7	2			230272.

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8

11480509 758100 2131H

-363**4**.

130249.

FORM 990-PF INTERE	ST ON SAVING	S AND	TEMPOR	ARY	CASH	INVE	STMENTS	STATEME	ent 1	
SOURCE			(A) REVENUE PER BOOKS		(B) NET INVESTMENT INCOME		STMENT	(C) ADJUSTED NET INCOME		
ALERA MANAGEMENT GROUP LLC BLACKSTONE GROUP NATURAL RESOURCE			914611. 81. 546.		914611. 81. 546.		81. 546.	914611. 81. 546.		
PACIFIC WEST TD AMERITRADE				2.		2.		2.		
TOTAL TO PART I, LINE 3			915241.			915241.		915241.		
			·							
FORM 990-PF	DIVIDENDS	AND IN	INTEREST FROM SECURITIES		ES 	STATEMENT 2				
SOURCE	GROSS AMOUNT			(A) VENUE BOOK			(C) - ADJUSTED E NET INCOME			
BLACKSTON GROUP NATL FINL SERVICES TD AMERITRADE WELLS FARGO	18. 377166. 935156. 2300.	0. 0. 0.			37716 93515	18. 18 77166. 377166 35156. 935156 2300. 2306		935156.		
TO PART I, LINE 4	1314640.	0.		1	1314640. 131464		1314640	13	314640.	
FORM 990-PF		ОТНЕ	ER INCO	ME				STATEME	INT 3	
DESCRIPTION			(A) REVENUE PER BOOKS		(B) NET INVEST- MENT INCOME			C) ISTED INCOME		
LCGI MORTGAGE FUND, NET ALERA INCOME FUND, NET PACIFIC WEST LLC, NET ALEXANDER FUND VI, NET ALEXANDER FUND IX, NET CAPITAL HILL, NET NATURAL RESOURCES LP, NET ALEXANDER FUND XI, NET ALEXANDER FUND XIII, NET				-10043. 180781. 10816. 3528. -60892. -1529. 2709. 257. -498.		180781. 10816. 3528. -60892. -1529. 2709. 257. -498.		. 1		
AF HOWARD, NET BLACKSTONE GROUP, N	AT				4889. 231.		4889. 231.		4889. 231.	

130249. 130249.

TOTAL TO FORM 990-PF, PART I, LINE 11

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 4			
DESCRIPTION	(A) EXPENSES PER BOOKS		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
PROFESSIONAL FEES	7500.	7500.	0.	0.		
TO FORM 990-PF, PG 1, LN 16B	7500.	7500.	0.	0.		
FORM 990-PF	TAXES		S	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES		
FRANCHISE TAX BOARD INTERNAL REVENUE SERVICE CA ATTY GENERAL	10. 19852. 150.	10. 19852. 150.	0. 0. 0.	0.		
TO FORM 990-PF, PG 1, LN 18 =	20012.	20012.	0.	0.		
FORM 990-PF	OTHER E	XPENSES	S	FATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	ADJUSTED	(D) CHARITABLE PURPOSES		
PROOF OF PUBLICATION TRAVEL	46. 505.	46. 505.	0.	0.		
TO FORM 990-PF, PG 1, LN 23	551.	551.	0.	0.		
FORM 990-PF OTHER INCREASES	IN NET ASS	ETS OR FUND BA	ALANCES ST	FATEMENT 7		
DESCRIPTION				AMOUNT		
UNREALIZED INCREASE IN MARKETABLE SECURITIES				5310904.		
TOTAL TO FORM 990-PF, PART II	I, LINE 3			5310904.		

FORM 990-PF	CORPO	RATE STOCK		STATEMENT
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
			BOOK VALUE	VALUE
MARKETABLE SECURITIES			46077528.	46077528
TOTAL TO FORM 990-PF, PART 1	[I, LINE 1	0B	46077528.	46077528
FORM 990-PF	MORT	GAGE LOANS		STATEMENT
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
ALERA MGMT LOAN		•	11516438.	11516438
TOTAL TO FORM 990-PF, PART I	II, LINE 1	2	11516438.	11516438
FORM 990-PF	OTHER	INVESTMENTS		STATEMENT 1
DESCRIPTION		VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
LCGI MORTGAGE LLC		COST	194039.	194039
ALERA INCOME FUND LLC PACIFIC WEST LLC		COST COST	763890. 494106.	763890 494106
NATURAL RESOURCE LP		COST	58069.	58069
CAPITOL HILL LP		COST	98692.	98692
ALEXANDER FUND VI		COST	49057.	49057
ALEXANDER FUND IX		COST	548089.	548089
ALEXANDER FUND XI		COST	100257. 248434.	100257 248434
		~~~~m		
ALEXANDER FUND XIII		COST		
ALEXANDER FUND XIII AF HOWARD LP BLACKSTONE GROUP LP		COST COST COST	254889. 5366.	254889 5366

FORM 990-PF	OTHER LIABILITIES		STAT	EMENT 1		
DESCRIPTION		BOY AMOUNT		EOY AMOUNT		
NATL FINL SERVICES MARGIN LOAN TOTAL TO FORM 990-PF, PART II, LINE 22		117519	24.			
		117519	24.			
	- LIST OF OFFICERS, I ES AND FOUNDATION MANA		STAT	EMENT 1		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK			EXPENSE		
CHARLES N TRAVERS 296 VIA LA PAZ GREENBRAE, CA 94904	DIRECTOR 40.00	0.	0.	0		
ELIZABETH TRAVERS 296 VIA LA PAZ GREENBRAE, CA 94904	DIRECTOR 10.00	0.	0.	0		
TODD TRAVERS 296 VIA LA PAZ GREENBRAE, CA 94904	DIRECTOR 10.00	17000.	0.	0		
GAYLE TRAVERS 296 VIA LA PAZ GREENBRAE, CA 94904	DIRECTOR 10.00	17000.	0.	0		
NANCY LUCAS 296 VIA LA PAZ GREENBRAE, CA 94904	DIRECTOR 10.00	0.	0.	0		
LARRY LUCAS 296 VIA LA PAZ GREENBRAE, CA 94904	DIRECTOR 10.00	0.	0.	0		
TARN SUBLETT 11026 SE 31ST STREET BELLEVUE, WA 98004	DIRECTOR 40.00	75000.	0.	0		
CHELSEA BROWNE 296 VIA LA PAZ	DIRECTOR 10.00	2500.	0.	0		

GREENBRAE, CA 94940

TRAVERS FAMILY FOUNDATION		68-6	095780
JUSTINE TRAVERS  296 VIA LA PAZ  GREENBRAE, CA 94904  DIRECTOR  10.00		0.	0.
TRACE TRAVERS  296 VIA LA PAZ  GREENBRAE, CA 94904  DIRECTOR  10.00	<del>-</del>	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VI	116500.	0.	0.