

For calendar year 2016, or tax year beginning 01-01-2016, and ending 12-31-2016

Name of foundation RAINTREE FOUNDATION		A Employer identification number 77-0359291	
Number and street (or P O box number if mail is not delivered to street address) 1255 FRANKLIN RANCH ROAD		Room/suite	B Telephone number (see instructions) (805) 967-7964
City or town, state or province, country, and ZIP or foreign postal code GOLETA, CA 93117		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 13,286,844		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis )			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	123,240			
	2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	3 Interest on savings and temporary cash investments	1,121	1,121		
	4 Dividends and interest from securities . . .	207,151	207,151		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	1,198,227			
	b Gross sales price for all assets on line 6a _____ 1,307,307				
	7 Capital gain net income (from Part IV, line 2) . . .		1,198,227		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .	1,515	1,515		
	12 Total. Add lines 1 through 11 . . . . .	1,531,254	1,408,014		
	13 Compensation of officers, directors, trustees, etc	11,539	9,231		2,308
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .	1,051	0		1,051
	b Accounting fees (attach schedule) . . . . .	27,710	26,325		1,385
	c Other professional fees (attach schedule) . . . . .	57,466	57,466		0
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . .	21,514	1,626		236
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	71,324	71,117		207
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	190,604	165,765		5,187
	25 Contributions, gifts, grants paid . . . . .	1,705,407			1,705,407
	26 Total expenses and disbursements. Add lines 24 and 25	1,896,011	165,765		1,710,594
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-364,757			
	b Net investment income (if negative, enter -0-)		1,242,249		
c Adjusted net income(if negative, enter -0-) . . .					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing . . . . .			
	2	Savings and temporary cash investments . . . . .	645,957	126,743	126,743
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .	8,124,078	8,189,546	9,195,715
	c	Investments—corporate bonds (attach schedule) . . . . .	866,627	903,824	890,352
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .	2,811,564	2,743,427	3,074,034
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	12,448,226	11,963,540	13,286,844	
Liabilities	17	Accounts payable and accrued expenses . . . . .			
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ _____)	0	118	
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	118	
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>				
	27	Capital stock, trust principal, or current funds . . . . .	12,448,226	11,963,422	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
29	Retained earnings, accumulated income, endowment, or other funds	0	0		
30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	12,448,226	11,963,422		
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) .	12,448,226	11,963,540		

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	12,448,226
2	Enter amount from Part I, line 27a . . . . .	2	-364,757
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3 . . . . .	4	12,083,469
5	Decreases not included in line 2 (itemize) ▶ _____	5	120,047
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	11,963,422

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
<b>1a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (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	
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	2	1,198,227
<b>3</b> 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) (see instructions) If (loss), enter -0- in Part I, line 8	3	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

**1** Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	2,053,486	15,206,076	0 135044
2014	1,610,412	16,641,727	0 096770
2013	1,344,584	15,884,052	0 084650
2012	1,175,508	13,253,481	0 088694
2011	965,777	13,994,495	0 069011

<b>2</b> Total of line 1, column (d)	2	0 474169
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 094834
<b>4</b> Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	4	13,334,465
<b>5</b> Multiply line 4 by line 3	5	1,264,561
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	6	12,422
<b>7</b> Add lines 5 and 6	7	1,276,983
<b>8</b> Enter qualifying distributions from Part XII, line 4	8	1,710,594

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

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	12,422
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	12,422
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	12,422
<b>6</b>	Credits/Payments		
<b>a</b>	2016 estimated tax payments and 2015 overpayment credited to 2016	<b>6a</b>	7,430
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	5,000
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	12,430
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	<b>8</b>	62
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . <b>▶</b>	<b>9</b>	54
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . <b>▶</b>	<b>10</b>	
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2017 estimated tax</b> <b>▶</b> <b>Refunded</b> <b>▶</b>	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year <b>(1)</b> On the foundation <b>▶</b> \$ _____ <b>(2)</b> On foundation managers <b>▶</b> \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <b>▶</b> \$ _____		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	<b>2</b>	No
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	<b>5</b>	No
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	<b>6</b>	Yes
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <b>▶</b> CA _____		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	<b>8b</b>	Yes
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i> . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	<b>10</b>	No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	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).	<b>11</b>		<b>No</b>
<b>12</b>	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)	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>N/A</b>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <b>ELLCOTT MILLION</b> Telephone no <b>(805) 967-7964</b>			

Located at **1255 FRANKLIN RANCH ROAD GOLETA CA** ZIP+4 **93117**

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . <b>15</b>			
<b>16</b>	At 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? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country <b>▶</b>	<b>16</b>	<b>Yes</b>	<b>No</b>

**Part 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.**

<b>1a</b>	During the year did the foundation (either directly or indirectly)		<b>Yes</b>	<b>No</b>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	(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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> 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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	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)? <input type="checkbox"/> <b>1b</b>			<b>No</b>
<b>c</b>	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? <input type="checkbox"/> <b>1c</b>			<b>No</b>
<b>2</b>	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))			
<b>a</b>	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <b>▶ 20____, 20____, 20____, 20____</b>			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions). <input type="checkbox"/> <b>2b</b>			
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here <b>▶ 20____, 20____, 20____, 20____</b>			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If "Yes," did it have 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 gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>3b</b>			
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? <b>4a</b>			<b>No</b>
<b>b</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 2016? <b>4b</b>			<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (Continued)

<b>5a</b> During the year did the foundation pay or incur any amount to <b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>(2)</b> Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? . . . . . <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). . . . . <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . . <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>b</b> If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? . . . . . <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> Organizations relying on a current notice regarding disaster assistance check here. . . . . <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . . <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<b>5b</b>		
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . . <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . . <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> If "Yes" to 6b, file Form 8870	<b>6b</b>		<b>No</b>
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>b</b> If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . . <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>	<b>7b</b>		

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

<b>1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).</b>				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
JAMES A FRANK 1255 FRANKLIN RANCH ROAD GOLETA, CA 93117	PRESIDENT/CFO 5 00	0	0	0
JESSICA FRANK 1255 FRANKLIN RANCH ROAD GOLETA, CA 93117	VICE PRESIDENT 2 00	0	0	0
ELLICOTT MILLION 1255 FRANKLIN RANCH ROAD GOLETA, CA 93117	SECRETARY 10 00	11,539	0	0
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				
<b>Total number of other employees paid over \$50,000.</b> . . . . . <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>				<b>0</b>

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

<b>3</b> Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(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. . . . . ▶		0

<b>Part IX-A</b> Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

<b>Part IX-B</b> Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
Total. Add lines 1 through 3 . . . . . ▶	0

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	10,894,213
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	785,459
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	1,857,856
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	13,537,528
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	13,537,528
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	203,063
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	13,334,465
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	666,723

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	666,723
<b>2a</b>	Tax on investment income for 2016 from Part VI, line 5.	<b>2a</b>	12,422
<b>b</b>	Income tax for 2016 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	12,422
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	654,301
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	654,301
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	654,301

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	1,710,594
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	1,710,594
<b>5</b>	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).	<b>5</b>	12,422
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	1,698,172

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
<b>1</b> Distributable amount for 2016 from Part XI, line 7				654,301
<b>2</b> Undistributed income, if any, as of the end of 2016				
<b>a</b> Enter amount for 2015 only. . . . .			0	
<b>b</b> Total for prior years 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2016				
<b>a</b> From 2011. . . . .	281,095			
<b>b</b> From 2012. . . . .	531,808			
<b>c</b> From 2013. . . . .	576,317			
<b>d</b> From 2014. . . . .	818,840			
<b>e</b> From 2015. . . . .	1,324,430			
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	3,532,490			
<b>4</b> Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ <u>1,710,594</u>				
<b>a</b> Applied to 2015, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2016 distributable amount. . . . .				654,301
<b>e</b> Remaining amount distributed out of corpus	1,056,293			
<b>5</b> Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,588,783			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> 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		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 . . . . .				0
<b>7</b> 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			
<b>8</b> Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions). . . . .	281,095			
<b>9</b> <b>Excess distributions carryover to 2017.</b> Subtract lines 7 and 8 from line 6a . . . . .	4,307,688			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2012. . . . .	531,808			
<b>b</b> Excess from 2013. . . . .	576,317			
<b>c</b> Excess from 2014. . . . .	818,840			
<b>d</b> Excess from 2015. . . . .	1,324,430			
<b>e</b> Excess from 2016. . . . .	1,056,293			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. . . . . ▶

**b** Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

JAMES A FRANK

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

**a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

JAMES A FRANK PRESIDENTCFO  
1255 FRANK RANCH ROAD  
GOLETA, CA 93117  
(805) 967-7964

**b** The form in which applications should be submitted and information and materials they should include

LETTER FORM, INCLUDING EXEMPT STATUS AND SOCIAL VALUE OF PROGRAM FOR WHICH THE GRANT IS BEING REQUESTED

**c** Any submission deadlines

NONE

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

PREFER TO GRANT PROPOSALS WITHIN SANTA BARBARA COUNTY, FOR PROGRAMS RELATED TO EDUCATION, HEALTH CARE AND YOUTH ACTIVITIES OTHER PROPOSALS ARE CONSIDERED ON MERIT

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			<b>3a</b>	1,705,407
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			<b>3b</b>	0

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b>	Program service revenue					
<b>a</b>	_____					
<b>b</b>	_____					
<b>c</b>	_____					
<b>d</b>	_____					
<b>e</b>	_____					
<b>f</b>	_____					
<b>g</b>	Fees and contracts from government agencies					
<b>2</b>	Membership dues and assessments. . . .					
<b>3</b>	Interest on savings and temporary cash investments . . . . .			14	1,121	
<b>4</b>	Dividends and interest from securities. . . .			14	207,151	
<b>5</b>	Net rental income or (loss) from real estate					
<b>a</b>	Debt-financed property. . . . .					
<b>b</b>	Not debt-financed property. . . . .					
<b>6</b>	Net rental income or (loss) from personal property					
<b>7</b>	Other investment income. . . . .			14	1,515	
<b>8</b>	Gain or (loss) from sales of assets other than inventory . . . . .			18	1,198,227	
<b>9</b>	Net income or (loss) from special events					
<b>10</b>	Gross profit or (loss) from sales of inventory					
<b>11</b>	Other revenue <b>a</b> _____					
<b>b</b>	_____					
<b>c</b>	_____					
<b>d</b>	_____					
<b>e</b>	_____					
<b>12</b>	Subtotal Add columns (b), (d), and (e). .		0		1,408,014	0
<b>13</b>	<b>Total.</b> Add line 12, columns (b), (d), and (e). . . . .			<b>13</b>		1,408,014

(See worksheet in line 13 instructions to verify calculations )

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

**Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

- |  |              |            |           |
|--|--------------|------------|-----------|
| <b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?   |              | <b>Yes</b> | <b>No</b> |
| <b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of   |              |            |           |
| <b>(1)</b> Cash. . . . .   | <b>1a(1)</b> |            | <b>No</b> |
| <b>(2)</b> Other assets. . . . .   | <b>1a(2)</b> |            | <b>No</b> |
| <b>b</b> Other transactions  |              |            |           |
| <b>(1)</b> Sales of assets to a noncharitable exempt organization. . . . .   | <b>1b(1)</b> |            | <b>No</b> |
| <b>(2)</b> Purchases of assets from a noncharitable exempt organization. . . . .   | <b>1b(2)</b> |            | <b>No</b> |
| <b>(3)</b> Rental of facilities, equipment, or other assets. . . . .   | <b>1b(3)</b> |            | <b>No</b> |
| <b>(4)</b> Reimbursement arrangements. . . . .   | <b>1b(4)</b> |            | <b>No</b> |
| <b>(5)</b> Loans or loan guarantees. . . . .   | <b>1b(5)</b> |            | <b>No</b> |
| <b>(6)</b> Performance of services or membership or fundraising solicitations. . . . .   | <b>1b(6)</b> |            | <b>No</b> |
| <b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .   | <b>1c</b>    |            | <b>No</b> |
| <b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received |              |            |           |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

**b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

<b>Sign Here</b>	Under penalties of perjury, 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.		
	***** _____ Signature of officer or trustee	2017-11-08 _____ Date	***** _____ Title

May the IRS discuss this return with the preparer shown below  
 (see instr.)? ☒ **Yes** ☐ **No**

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN  P00178796
	CATHERINE MACAULAY				
	Firm's name ▶ DAMITZ BROOKS NIGHTINGALE				Firm's EIN ▶ 77-0076647
	Firm's address ▶ 200 EAST CARRILLO STREET SUITE 303 SANTA BARBARA, CA 93101				Phone no (805) 963-1837

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
TCW #6415 - CONCENTRATED CORE	P	2015-01-01	2016-12-31
TCW #6416 - CONCENTRATED VALUE	P	2015-01-01	2016-12-31
GS #4315 - CONCENTRATED GROWTH	P	2015-01-01	2016-12-31
GS #4307 - STRATEGIC VALUE	P	2015-01-01	2016-12-31
CYPRESS PARTNERS	P	2015-01-01	2016-12-31
TCW #1004 - SECURITIZED OPPORTUNITIES	P	2015-01-01	2016-12-31
GS #5737 - ADVISORY	P	2015-01-01	2016-12-31
GAIN ON REDEMPTION - TCW #6415 CONCENTRATED CORE	P	2015-01-01	2016-12-31
GAIN ON REDEMPTION - TCW #1004 SECURITIZED	P	2015-01-01	2016-12-31
GAIN ON REDEMPTION - TCW #7333 SELECT EQUITIES	P	2015-01-01	2016-12-31

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
708,963			708,963
208,466			208,466
15,309			15,309
		24,031	-24,031
28,150			28,150
		4,044	-4,044
		81,005	-81,005
23,108			23,108
17,229			17,229
91,801			91,801

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (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	
			708,963
			208,466
			15,309
			-24,031
			28,150
			-4,044
			-81,005
			23,108
			17,229
			91,801

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**


List and describe the kind(s) of property sold (e g , real estate, <b>(a)</b> 2-story brick warehouse, or common stock, 200 shs MLC Co )	<b>(b)</b> How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
SETTLEMENT INCOME	P	2015-01-01	2016-12-31
DISTRIBUTION IN EXCESS OF BASIS - GROW FUND	P	2015-01-01	2016-12-31
CAPITAL GAINS DIVIDENDS	P		

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	<b>(g)</b> Cost or other basis plus expense of sale	<b>(h)</b> Gain or (loss) (e) plus (f) minus (g)
1,034			1,034
3,985			3,985
209,262			209,262

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			<b>(l)</b> Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
<b>(i)</b> F M V as of 12/31/69	<b>(j)</b> Adjusted basis as of 12/31/69	<b>(k)</b> Excess of col (i) over col (j), if any	
			1,034
			3,985
			209,262


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AMERICAN INDIAN COLLEGE FUND 8333 GREENWOOD BOULEVARD DENVER, CO 80221	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	1,000
ANIMAL RESCUE TEAM 875 CARRIAGE DRIVE SOLVANG, CA 93463	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	25,000
CALIFORNIA NARCOTIC OFFICERS ASSOCIATION 28245 AVENUE CROCKER SANTA CLARITA, CA 91355	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	5,000
CALIFORNIA POLYTECHNIC STATE UNIVERSITY FOUNDATION  ONE GRAND AVENUE HERON HALL NO 103 SAN LUIS OBISPO, CA 93407	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	200,000
CALIFORNIA STATE PARKS FOUNDATION 50 FRANCISCO STREET NO 110 SAN FRANCISCO, CA 94133	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	25,000
<b>Total . . . . .</b> 				1,705,407
<b>3a</b>				



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
COMMUNITY FOUNDATION OF JACKSON HOLE 245 EAST SIMPSON AVENUE JACKSON, WY 83001	NONE	PC	JENNY LAKE RANGERS AND FUN RUN	5,000
DIRECT RELIEF 27 SOUTH LA PATERA LANE GOLETA, CA 93117	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	50,000
DOCTORS WITHOUT WALLS - SANTA BARBARA STREET MEDICINE 19 EAST MICHELTORENA STREET SANTA BARBARA, CA 93101	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	10,000
DOMESTIC VIOLENCE SOLUTIONS FOR SANTA BARBARA COUNTY PO BOX 1536 SANTA BARBARA, CA 93102	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	5,000
DOS PUEBLOS HIGH SCHOOL 7266 ALAMEDA AVENUE GOLETA, CA 93117	NONE	PC	RIVIERA ROBOTICS	5,000
Total . . . . . ▶ 3a				1,705,407

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FAMILY SERVICE AGENCY OF SANTA BARBARA 123 WEST GUTIERREZ STREET SANTA BARBARA, CA 93101	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	1,000
FOODBANK OF SANTA BARBARA COUNTY INC 4554 HOLLISTER AVENUE SANTA BARBARA, CA 93110	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	15,000
FOUNDATION FOR SANTA BARBARA HIGH SCHOOL 700 EAST ANAPAMU STREET SANTA BARBARA, CA 93103	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	5,000
FRIENDS OF YOSAR INC PO BOX 611 YOSEMITE, CA 95389	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	5,000
GIRLS INCORPORATED 120 WALL STREET NEW YORK, NY 10005	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	10,000
<b>Total . . . . .</b> <b>3a</b>				1,705,407

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GIRLS ROCK SANTA BARBARA 810 EAST GUTIERREZ STREET UNIT D SANTA BARBARA, CA 93103	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	5,000
GOLETA VALLEY COTTAGE HOSPITAL FOUNDATION 351 S PATTERSON AVENUE SANTA BARBARA, CA 931112403	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	50,000
GRAND CANYON ASSOCIATION 4 TONTO STREET GRAND CANYON VILLAGE, AZ 86023	NONE	PC	PREVENTATIVE SEARCH & RESCUE	75,000
HEARTS THERAPEUTIC EQUESTRIAN CENTER 4420 CALLE REAL SANTA BARBARA, CA 93110	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	15,507
INLAND EMPIRE SEARCH AND RESCUE COUNCIL 13255 FIRST AVENUE VICTORVILLE, CA 92935	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	20,000
<b>Total . . . . .</b> <b>3a</b>				1,705,407

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MEMORIAL SLOAN-KETTERING CANCER CENTER 1275 YORK AVENUE NEW YORK, NY 10065	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	1,000
MONTECITO TRAILS FOUNDATION PO BOX 5481 SANTA BARBARA, CA 93150	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	5,000
MOUNTAIN RESCUE ASSOCIATION PO BOX 880868 SAN DIEGO, CA 92168	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	10,000
NATURE TRACK FOUNDATION INC PO BOX 953 LOS OLIVOS, CA 93441	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	5,000
RESTORE HETCH HETCHY 3286 ADELINE STREET SUITE 7 BERKELEY, CA 94703	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	10,000
<b>Total</b> . . . . . 				1,705,407
<b>3a</b>				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE SALVATION ARMY SANTA BARBARA CORPS 4849 HOLLISTER AVENUE SANTA BARBARA, CA 93111	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	100
SANTA BARBARA BOTANIC GARDEN 1212 MISSION CANYON ROAD SANTA BARBARA, CA 93105	NONE	PC	SANTA ROSA ISLAND STUDIES	5,000
SANTA BARBARA CHANNELKEEPER INC 714 BOND AVENUE SANTA BARBARA, CA 93103	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	5,000
SANTA BARBARA COUNTY TRAILS COUNCIL PO BOX 22352 SANTA BARBARA, CA 93121	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	5,000
SANTA BARBARA MUSEUM OF NATURAL HISTORY 2559 PUESTA DEL SOL SANTA BARBARA, CA 93105	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	5,000
<b>Total . . . . .</b> <b>3a</b>				1,705,407

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SANTA BARBARA POLICE ACTIVITIES LEAGUE INC 1235 CHAPALA STREET SANTA BARBARA, CA 93101	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	5,000
SANTA BARBARA SCHOOL OF SQUASH 1530 CHAPALA STREET SUITE F SANTA BARBARA, CA 93101	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	10,000
SANTA BARBARA COMMUNITY YOUTH PERFORMING ARTS CENTER INC 721 EAST COTA STREET SANTA BARBARA, CA 93103	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	3,000
SCHOLARSHIP FOUNDATION OF SANTA BARBARA 2253 LAS POSITAS ROAD SANTA BARBARA, CA 93105	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	200,000
SEMPERVIRENS FUND 419 SOUTH SAN ANTONIO ROAD NO 211 LOS ALTOS, CA 94022	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	20,000
<b>Total . . . . .</b> <b>3a</b>				1,705,407

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SPECIAL OLYMPICS SOUTHERN CALIFORNIA INC 1600 FORBES WAY NO 200 LONG BEACH, CA 90810	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	1,000
TETON COUNTY SEARCH & RESCUE FOUNDATION PO BOX 1063 JACKSON, WY 83001	NONE	PC	BACKCOUNTRY ZERO	20,000
TETON SCIENCE SCHOOLS INC 700 COYOTE CANYON ROAD JACKSON, WY 83001	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	25,000
THE FOUNDATION FOR SANTA BARBARA CITY COLLEGE 721 CLIFF DRIVE SANTA BARBARA, CA 93109	NONE	PC	SINGLE PARENTS ARRIVING READY FOR COLLEGE (SPARC) PROGRAM	50,000
THE LAND TRUST FOR SANTA BARBARA COUNTY 1530 CHAPALA STREET SUITE A SANTA BARBARA, CA 93101	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	50,000
<b>Total . . . . .</b> ► <b>3a</b>				1,705,407

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
TRANSITIONS MENTAL HEALTH ASSOCIATION 784 HIGH STREET SAN LUIS OBISPO, CA 93401	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	10,000
UCSB SEDGWICK RESERVE 3566 BRINKERHOFF ROAD SANTA YNEZ, CA 93460	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	30,800
UNIVERSITY OF CALIFORNIA SANTA BARBARA  4219 CHEADLE HALL UC SANTA BARBARA SANTA BARBARA, CA 93106	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	300,000
UNITED BOYS AND GIRLS CLUBS OF SANTA BARBARA COUNTY 1124 CASTILLO STREET SANTA BARBARA, CA 93101	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	5,000
UNITY SHOPPE INC 110 WEST SOLA STREET SANTA BARBARA, CA 93101	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	1,000
<b>Total . . . . .</b> ► <b>3a</b>				1,705,407



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WASHINGTON STATE UNIVERSITY FOUNDATION WASHINGTON STATE UNIVERSITY PULLMAN, WA 99164	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	300,000
WILDERNESS YOUTH PROJECT INC 5386 HOLLISTER AVENUE GOLETA, CA 93111	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	10,000
WILLBRIDGE OF SANTA BARBARA INC 2904 STATE STREET SANTA BARBARA, CA 93105	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	1,000
YOSEMITE FOUNDATION DBA YOSEMITE CONSERVANCY  101 MONTGOMERY STREET SUITE 1700 SAN FRANCISCO, CA 94104	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	75,000
ZION NATIONAL PARK FOUNDATION ZION NATIONAL PARK SPRINGDALE, UT 84767	NONE	PC	IN FURTHERANCE OF SECTION 501(C)(3) CHARITABLE PURPOSE	5,000
<b>Total . . . . . ▶</b> <b>3a</b>				1,705,407

**TY 2016 Accounting Fees Schedule****Name:** RAINTREE FOUNDATION**EIN:** 77-0359291

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
TAX PREPARATION & BOOKKEEPING	27,710	26,325		1,385

**TY 2016 Investments Corporate Bonds Schedule****Name:** RAINTREE FOUNDATION**EIN:** 77-0359291

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
TCW #7333 - CORE FIXED INCOME	345,736	353,443
TCW #7333 - EMERGING MARKETS	558,088	536,909

**TY 2016 Investments Corporate Stock Schedule****Name:** RAINTREE FOUNDATION**EIN:** 77-0359291

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
GOLDMAN SACHS #4315 - CONCENTRATED GROWTH	629,253	732,640
GOLDMAN SACHS #4307 - STRATEGIC VALUE	769,570	842,042
GOLDMAN SACHS #5737 - ADVISORY	904,929	881,659
TCW #7333 - FOCUSED EQUITIES	2,928,735	3,479,187
TCW #7333 - SELECT EQUITIES FUND	2,953,866	3,141,222
UBS #8567 - KEY TECHNOLOGY INC	3,193	118,965

**TY 2016 Investments - Other Schedule****Name:** RAINTREE FOUNDATION**EIN:** 77-0359291

<b>Category/ Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
TCW SECURITIZED OPPORTUNITIES, LP	AT COST	989,671	1,216,178
THE CYPRESS PARTNERS LP	AT COST	1,753,756	1,857,856

**TY 2016 Legal Fees Schedule****Name:** RAINTREE FOUNDATION**EIN:** 77-0359291

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
LEGAL FEES	1,051	0		1,051

**TY 2016 Other Decreases Schedule**

**Name:** RAINTREE FOUNDATION

**EIN:** 77-0359291

Description	Amount
ADJUST CONTRIBUTIONS TO COST BASIS	120,047

**TY 2016 Other Expenses Schedule****Name:** RAINTREE FOUNDATION**EIN:** 77-0359291**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEES	252	252		0
CALIFORNIA FILING FEES	10	0		10
ANNUAL LICENSE FEE	150	0		150
OFFICE EXPENSE	47	0		47
INVESTMENT FEES	34,535	34,535		0
CYPRESS PARTNERS	36,330	36,330		0



## TY 2016 Other Income Schedule

**Name:** RAINTREE FOUNDATION

**EIN:** 77-0359291

### Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
OTHER INVESTMENT INCOME	1,515	1,515	1,515

**TY 2016 Other Liabilities Schedule****Name:** RAINTREE FOUNDATION**EIN:** 77-0359291

Description	Beginning of Year - Book Value	End of Year - Book Value
PAYROLL LIABILITIES	0	118

**TY 2016 Other Professional Fees Schedule****Name:** RAINTREE FOUNDATION**EIN:** 77-0359291

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
INVESTMENT MANAGEMENT FEES	57,466	57,466		0

**TY 2016 Taxes Schedule****Name:** RAINTREE FOUNDATION**EIN:** 77-0359291

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
FEDERAL TAX PAYMENTS	19,500	0		0
FOREIGN TAXES	682	682		0
PENALTIES AND INTEREST	152	0		0
PAYROLL TAXES	1,180	944		236

<b>Schedule B</b> (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	<b>Schedule of Contributors</b>  ▶ <b>Attach to Form 990, 990-EZ, or 990-PF</b> ▶ <b>Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <u>www.irs.gov/form990</u></b>	OMB No 1545-0047  <b>2016</b>
	<b>Name of the organization</b> RAINTREE FOUNDATION	<b>Employer identification number</b> 77-0359291

Organization type (check one)

<b>Filers of:</b>	<b>Section:</b>
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)( ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.  
**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . . ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

<b>Name of organization</b> RAINTREE FOUNDATION	<b>Employer identification number</b> 77-0359291
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<b>Part I</b> <b>Contributors</b> (see instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JAMES FRANK 1255 FRANKLIN RANCH ROAD GOLETA, CA93117	\$ 123,240	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )

<b>Name of organization</b> RAINTREE FOUNDATION	<b>Employer identification number</b> 77-0359291
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<b>Part II</b> <b>Noncash Property</b> (see instructions) Use duplicate copies of Part II if additional space is needed			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	10,300 SHARES OF KEY TECHNOLOGY INC STOCK	\$ 123 240	2016-12-23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

**Name of organization**  
RAINTREE FOUNDATION**Employer identification number**

77-0359291

**Part III** **Exclusively** religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of **exclusively** religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ► \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee