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## Form -990-PF

## **Return of Private Foundation**

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

Do not enter social security numbers on this form as it may be made public.

mation about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

	nent of the Treasury				n this form as it may be mi		<b>ZU IU</b>
	Revenue Service	<del></del>	orm 990-	2016	e instructions is at www.ir.	JUN 30, 2017	Open to Public Inspection
	of foundation	or ray lear negliging O	<u>и т,</u>	7010	, and enumy	A Employer identification i	
Wallie	Orioundation					A Employer identification i	lulivei
ΤО	WBES FOU	MDATTON				95-3519577	
		box number if mail is not delivered to stre	et address		Room/suite	B Telephone number	
21	E. VICT	ORIA STREET			200	(805) 962-2	2121
		ovince, country, and ZIP or foreign	postal co	ode		C If exemption application is per	
SA	NTA BARB	ARA, CA 93101					
G Che	eck all that apply:	Initial return		Initial return of a f	ormer public charity	D 1 Foreign organizations,	check here
		Final return		Amended return		2 -	
		Address change		Name change		2 Foreign organizations mee check here and attach com	nputation ES% test,
H_Che	eck type of organiz	ration: X Section 501(c)(3)				E If private foundation statu	us was terminated
		) nonexempt charitable trust		axable private found	lation	under section 507(b)(1)(	A), check here
		assets at end of year   J   Accoun	•		Accrual	F If the foundation is in a 6	
	n Part II, col (c),		Other (sp		F1	under section 507(b)(1)(	B), check here
<b>▶</b> \$		916,073. (Part I, co				<del>                                     </del>	/d\ - · · · · ·
ran	(The total of ame	ounts in columns (b), (c), and (d) may not all the amounts in column (a) )		a) Revenue and penses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes
		gifts, grants, etc., received	<del>-</del>	750,750.		N/A	(cash basis only)
- }		if the foundation is not required to attach Sch. B		130,130.	<del> </del>	N/A	
		os and temporary	<u> </u>	73.	73.		STATEMENT 1
	oddr iiivodiiiioiik	interest from securities		1,659.	1,659.	<del></del>	STATEMENT 2
	5a Gross rents	more nom coodings			27000		<u> </u>
	b Net rental income	e or (loss)					
	6a Net gain or (loss)	from sale of assets not on line 10		17,375.			
<u>"</u>	b Gross sales price assets on line 6a	for all796,403.					
Revenue	7 Capital gain net ii	ncome (from Part IV, line 2)			17,375.	,	
· "	8 Net short-term	capital gain					
	9 Income modifi			<u> </u>			
1	0a and allowances	returns			<del> </del>		
	b Less Cost of goo		-				
	c Gross profit or	(loss)		2 001			ama messessen 2
·	1 Other income	oo d Abronah dd	<del> </del>	3,001. 772,858.		<del></del>	STATEMENT 3
		es 1 through 11	+	9,000.		·	0.
1	•	officers, directors, trustees, etc e Salaries and wages	-	9,000.		<del></del>	
- 1	• •	, employee benefits			<u> </u>	<del></del>	
	<b>6a</b> Legal fees	, employee benefits		<del></del>	<u>                                     </u>		
ens)	<b>b</b> Accounting fee	es STMT 4		1,500.	0.		0.
Expenses	c Other profession				<u> </u>	-	
	7 Interest	, , , , , , , ,					
E 1	8 Taxes	STMT.5		85.	0.		0.
1 S	9 Depreciation a	nd depletion					
Ē 2	Occupancy	MOV 17 2017 171					
<u>₹</u>  2	1 Travel, confere	ences, and meetings	\				
E 2	2 Printing and pr						
Operating and Administrative		s STMT_6		57,723.	809	,	1,000.
E 2		g and administrative					
ad	•	d lines 13 through 23		68,308.	809		1,000.
2		gifts, grants paid		996,950.	-		996,950.
2		s and disbursements	_	065 656			000 050
	Add lines 24 a		$\frac{1}{1}$	,065,258.	809	· <del> </del>	997,950.
2	7 Subtract line 2			-202 400			
	_	e over expenses and disbursements	-	<292,400.	18,298		
		It Income (if negative enter -0 )	-		10,498	N/A	

Fo	m 99	00-PF (2016) TOWBES FOUNDATION		95-3	35195 <u>7</u> 7 Page 2
F	art	Balance Sheets   Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	<del></del>
_			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	1	Savings and temporary cash investments	20,197.	27,703.	<u>27,703.</u>
	3	Accounts receivable >			
	١.	Less: allowance for doubtful accounts			<del></del>
	4	Pledges receivable >			
	۱.	Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	١,	disqualified persons  Other notes and loans receivable		<del>-</del>	<del></del>
	<b>'</b> '	Less; allowance for doubtful accounts			
w	Q	Inventories for sale or use			
ssets	"	Prepaid expenses and deferred charges		20.	20.
As	102	Investments - U.S. and state government obligations			
		Investments - corporate stock STMT 8	38,276.	0.	0.
	1	Investments - corporate bonds	30,270.		
		Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			<u> </u>
	13	Investments - other STMT 9	950,446.	863,796.	888,350.
	14	Land, buildings, and equipment: basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers - see the			
_	L	instructions. Also, see page 1, item I)	1,008,919.	891,519.	<u>916,073.</u>
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons		<u>175,000.</u>	
-iat	21	Mortgages and other notes payable			
_	22	Other liabilities (describe )			
	00	Tatal Park 1/Par (add bree 47 through 00)		175 000	
_	23	Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here	0.	175,000.	
es	24	and complete lines 24 through 26 and lines 30 and 31.  Unrestricted			
anc	25	Temporarily restricted			
Bala	26	Permanently restricted			
Fund Balances		Foundations that do not follow SFAS 117, check here			
F		and complete lines 27 through 31			
Assets or	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	1,008,919.	716,519.	
Net	30	Total net assets or fund balances	1,008,919.	716,519.	
_	31	Total liabilities and net assets/fund balances	1,008,919.	891,519.	
F	art	III Analysis of Changes in Net Assets or Fund Ba	alances		
_	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
•		st agree with end-of-year figure reported on prior year's return)	<del>. •</del>	1	1,008,919.
2		r amount from Part I, line 27a		2	<292,400.>
3		r increases not included in line 2 (itemize)		3	0.
4		lines 1, 2, and 3		4	716,519.
5		eases not included in line 2 (itemize)		5	0.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	lumn (b), line 30	6	716,519.
_					Form <b>990-PF</b> (2016)

(a) List and describe	the kind(s) of property sold (e.quest) or common stock, 200 sh	g , real estate,	income	( <b>b)</b> Ho P - F D - I	w acquired Purchase Donation	(c) Date (mo., c	acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a STOCK SALES - LT				<del>' ٽ</del>	D	05/2	28/14	05/04/17
b STOCK SALES - ST					D	VARI		VARIOUS
С								
d								
e		<del>,</del>		<u></u>				<u></u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				Gain or (loss is (f) minus	(g)
a 47,653.		ļ	<u>38,27</u>					9,377.
b 748,750.			<u>740,75</u>	2.				7,998.
C		<del> </del>						
d		<u> </u>						
e		the feet alone	10/01/00	-				<del></del>
Complete only for assets showing ga	<del></del>	T					Col. (h) gain not less thai	
(ı) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any			Losses	s (from col. (	(h))
a								9,377. 7,998.
<u>b</u>								7,998.
С	· · · · · · · · · · · · · · · · · · ·	ļ						
đ	· · · · · · · · · · · · · · · · · · ·	<u> </u>						
e		<u> </u>						
2 Capital gain net income or (net capita	I loss) { If gain, also enter if (loss), enter if	er in Part I, line D- in Part I, line	7 7	}	2			17,375.
Net short-term capital gain or (loss) a	`							
If gain, also enter in Part I, line 8, colu		(-)		}				
Part V   Qualification Und	er Section 4940(e) for			سلا	3		N/A	<u> </u>
Nas the foundation liable for the section f "Yes," the foundation does not qualify u	nder section 4940(e). Do not c	omplete this pa	rt					Yes X No
1 Enter the appropriate amount in each	column for each year; see the	instructions be	fore making any ei	ntries.				
(a) Base period years Calendar year (or lax year beginning ir			Net value of no	(c) ncharita	able-use asse	ts	Distrit (col. (b) div	(d) oution ratio vided by col. (c))
2015	<del></del>	92,765.		1,	308,72	7.		.758573
2014		<u>37,987.</u>			283,47			<u>.73082</u> 2
2013		5 <b>4</b> ,300.			392,91			<u>.620499</u>
2012		33,900.			611,16			.57964
2011	93	37,191.		<u> </u>	461,74	8.	<del></del>	.64114
2 Total of line 1, column (d)						2		3.330681
Average distribution ratio for the 5-ye	ar base period - divide the total	on line 2 by 5,	or by the number	of year	s			
the foundation has been in existence	f less than 5 years					3	-	.66613
Enter the net value of noncharitable-u	se assets for 2016 from Part X,	, line 5				4		1,102,860
Multiply line 4 by line 3						5		734,655
6 Enter 1% of net investment income (1	% of Part I, line 27b)					6	<u> </u>	183
7 Add lines 5 and 6						7		734,838
3 Enter qualifying distributions from Pa	rt XII, line 4					8		997,950
If line 8 is equal to or greater than line See the Part VI instructions.	7, check the box in Part VI, line	e 1b, and comp	olete that part usin	g a 1%	tax rate.			

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Pa	art VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see ir	ıstru	ctio	1s) <u> </u>
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🔀 and enter 1%	1	L		1	<u>83.</u>
	of Part I, line 27b		] _			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	_2_	<u> </u>			0.
3	Add lines 1 and 2	3	<u> </u>		1	83.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	<u> </u>			<u>0.</u>
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5	<u> </u>		_ 1	83.
6	Credits/Payments.	1				
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 4 C	<u>.</u>				
b	Exempt foreign organizations - tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868)					
d	I Backup withholding erroneously withheld					
7	Total credits and payments. Add lines 6a through 6d	7				40.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	. 9	1		1	43.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be: Credited to 2017 estimated tax		1			
	art VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interve	ne in			Yes	No
	any political campaign?		Ī	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definit	on)?	1	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials pub		, İ			
	distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?		-	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		Ì			
		•				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		-			
	managers ▶\$ 0.	_				_
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	, ог	l			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		_X_
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	1	A\r	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		<u>X</u>
	If "Yes," attach the statement required by General Instruction T		ſ			]
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					İ
	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 s	ate law				
	remain in the governing instrument?			6	X	1
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part	ΧV		7	X	
			ſ			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	If the accuracy "Vee" to line 7, has the foundation funcional a copy of Form 000 DF to the Attacks Copyred (or designate)					
D	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		İ	٥L	v	İ
0	of each state as required by General Instruction G? If "No," attach explanation	alan da.		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for conservations and the foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for conservations and the foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for conservations and the foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for conservations are conservations and the foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for conservations are conservations.	aienoar		c		v
40	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV		ļ	9_		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10 00(	L	(2016)
			For	111 33t	ノート	(2016)

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X

3b

4a

Yes X No

N/A

during the year?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

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

Form 4720, to determine if the foundation had excess business holdings in 2016)

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

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,

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

orm 990-PF (2016) TOWBES FOUNDATION			<u>95-35195</u>	77 Page <b>6</b>
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	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	1 4945(e))?	Ye	s X No	- } - }
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,	j	
any voter registration drive?	. , .		s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	7		s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
4945(d)(4)(A)? (see instructions)		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses, or t			
the prevention of cruelty to children or animals?	or oddodnonar parpooco, or r		s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the excentions described i		.5 [22] 110	
section 53.4945 or in a current notice regarding disaster assistance (see instru		in ricgulations	N/A	5ь
Organizations relying on a current notice regarding disaster assistance check h	•			<del>"</del>
		.nad		i l
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		_		[ [
expenditure responsibility for the grant?		I/A	s No	
If "Yes," attach the statement required by Regulations section 53 4945	• *			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	Г <del></del> 1	r <del></del>	
a personal benefit contract?	_	Y€	s X No	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		<u> </u>	6b X
If "Yes" to 6b, file Form 8870		<del></del> 1		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es 🗶 No 📙	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			<del></del>	7b
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	ınagers, Highly	/	
Paid Employees, and Contractors		_ <del></del> _		
List all officers, directors, trustees, foundation managers and their		(-) Companyation	(d) Contributions to	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other
(a) Name and address	to position	enter -0-)	compensation	allowances
SEE STATEMENT 10		9,000.	0.	0.
				1
				1
				<del></del>
<del></del>				
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."		
	(b) Title, and average		(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE	devoted to position	<del> </del>	compensation	dilowanocs
NOME				
		<del> </del>		<del> </del>
		<del> </del>		<b></b>
		<u> </u>		
		<u> </u>		L
Total number of other employees paid over \$50,000			<u>▶</u>	0
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Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, ent		
(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  Part IX-A Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant stat number of organizations and other beneficiaries served, conferences convened, research papers pri	istical information such as the	Expenses
1 N/A	oducea, etc.	
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year of N/A	n lines 1 and 2.	Amount
2		
All other program-related investments. See instructions.		
3		
Total, Add lines 1 through 3	<b>▶</b> i	0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndation	is, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes;		
a	Average monthly fair market value of securities	1a	88,370.
b	Average of monthly cash balances	1b	56,285.
C	Fair market value of all other assets	1c	975,000.
d	Total (add lines 1a, b, and c)	1d	1,119,655.
е	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	<u> </u>
3	Subtract line 2 from line 1d	3	1,119,655.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	16,795.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,102,860.
6	Minimum investment return Enter 5% of line 5	6	55,143.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here   in and do not complete this part.)	ıd certai	n
1	Minimum investment return from Part X, line 6	1	55,143.
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	183.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	54,960.
4	Recoveries of amounts treated as qualifying distributions	4	<u> </u>
5	Add lines 3 and 4	5	54,960.
6	Deduction from distributable amount (see instructions)	6	<u> </u>
<u>7_</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	54,960.
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	997,950.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	_2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	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	<u>997,950.</u>
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	<u>183.</u>
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	997,767.
	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.		

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# Part XIII Undistributed Income (see instructions)

	<del></del>	<del></del>		
	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,	Острис	1003 prior to 2010	2010	2010
line 7				54,960.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			0.	
b Total for prior years:				
,,		0.		<u></u> .
3 Excess distributions carryover, if any, to 2016:				
a From 2011 865,556.				
b From 2012 855,092.				
c From 2013 798,134.				
d From 2014 874,531.				
e From 2015 927, 379.				
f Total of lines 3a through e	4,320,692.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ► \$ 997,950.				
a 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.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.		<del></del>	54,960.
d Applied to 2016 distributable amount	942,990.			54,900.
e Remaining amount distributed out of corpus  5 Excess distributions carryover applied to 2016	942,990.		<del></del>	0.
(If an amount appears in column (d), the same amount				<u></u>
must be shown in column (a) )  6 Enter the net total of each column as				
indicated below:	5 062 600			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	5,263,682.			
b Prior years' undistributed income Subtract		0		
line 4b from line 2b		0.	<del></del>	
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				<del></del>
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			<u> </u>	0.
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	865,556.			
9 Excess distributions carryover to 2017				
Subtract lines 7 and 8 from line 6a	4,398,126.			<del></del>
10 Analysis of line 9.				
a Excess from 2012 855, 092.	1			
b Excess from 2013 798, 134.				
c Excess from 2014 874,531.				
d Excess from 2015 927, 379. e Excess from 2016 942, 990.				
				Form <b>990-PF</b> (2016)
623581 11-23-16				(2010)

	FOUNDATION		A		195// Page 10
Part XIV   Private Operating F			A, question 9)	N/A	
1 a If the foundation has received a ruling of			]		
foundation, and the ruling is effective for	,	•	▶ └		
b Check box to indicate whether the found		ig foundation described i		4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(h) 2016	Prior 3 years	(4) 2012	(a) Total
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed					<u> </u>
<b>b</b> 85% of line 2a	<del> </del>	<del></del>	ļ	<u> </u>	
c Qualifying distributions from Part XII,					
line 4 for each year listed	· · · · · · · · · · · · · · · · · · ·		<del> </del>	ļ. <u>.</u>	
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities				<u> </u>	
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
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test - enter				<del>                                     </del>	
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:				<del>                                     </del>	
(1) Total support other than gross			ļ		i
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	11				
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	had \$5,000 or m	ore in assets
at any time during t	he year-see instr	ructions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation why year (but only if they have contributed m			ributions received by the	foundation before the clo	se of any tax
MICHAEL TOWBES					
b List any managers of the foundation wh	o own 10% or more of th	e stock of a corporation (	or an equally large porti	on of the ownership of a p	artnership or
other entity) of which the foundation has	s a 10% or greater interes	st.			
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
				not accept unsolicited requ	uests for funds. If
the foundation makes gifts, grants, etc					
a The name, address, and telephone numi		•	cations should be addre	ssed <sup>.</sup>	
THE TOWBES FOUNDATIO 21 E. VICTORIA STREE		00, SANTA B	ARBARA, CA	93101	
b The form in which applications should b	e submitted and informa	tion and materials they sl			
SEE STATEMENT ATTACH c Any submission deadlines:	во - SCHEDU	DE #2			
SEE STATEMENT ATTACH					
d Any restrictions or limitations on awards			kinds of institutions, or	other factors	
SEE STATEMENT ATTACH	ED - SCHEDU	LE #2			

Page 11

3 Grants and Contributions Paid During the Ye	ar or Approved for Future F	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
		F		
SEE SCHEDULE #1				
				996,950.
		·		
		·		
Total	<del>,</del>	<del></del>	▶ 3a	996,950
b Approved for future payment				
NONE				
NONE				
	i			
Total		<u> </u>	L	
Total			<u>▶ 3b</u>	orm <b>990-PF</b> (2016

### **Analysis of Income-Producing Activities** Part XVI-A

Enter gross amounts unless otherwise indicated.	Unrelated	business income		by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	( <b>b)</b> Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
-	code	·····	Code		<del></del>
	- <del>                                    </del>	<del> </del>			
		<del></del>			
d			<del>                                     </del>		
			<del>                                     </del>		
t	_				
g Fees and contracts from government agencies		<del></del>			
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	73.	
4 Dividends and interest from securities			14	1,659.	
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		·			
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	17,375.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a FEDERAL TAX REFUND					295. 2,706.
b FLW TOUR REVENUE					2,706.
C					
d					
е					
12 Subtotal. Add columns (b), (d), and (e)		0.		19,107.	3,001.
13 Total Add line 12, columns (b), (d), and (e)				13	22,108.
(See worksheet in line 13 instructions to verify calculations	.)				
<del></del>					

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

Line No	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of									
	the founda	tion's exemp	t purposes (d	ther than by p	roviding funds fo	for such purposes).				
11A	REFUND	OF FEI	DERAL	EXCISE	TAX					
<u>11B</u>	TOURS C	F THE	FRANK	LLYOD	WRIGHT	BUILDING				
	<u> </u>									

Form 990-PF (		S FOUNDAT				95-35195	
Part XVII			sfers To a	and Transactions a	and Relations	hips With Noncharit	able
1 Did the o	rganization directly or indi	rectly engage in any	of the followin	ng with any other organization	on described in sect	ion 501(c) of	Yes N
	•			27, relating to political organ	nizations?		1 1
	s from the reporting founda	ation to a noncharital	ble exempt or	ganization of:			
(1) Cast							a(1) 2
(2) Othe						<u>  1</u>	a(2) 2
	nsactions.	hla aaaa aaaaaa					
	s of assets to a noncharita chases of assets from a no	• •				<del> -</del>	b(1) 2 b(2) 2
	tal of facilities, equipment,		nyanization				b(3) 2
	nbursement arrangements						b(4) 2
	ns or loan guarantees						b(3)   2  b(4)   2  b(5)   2
	ormance of services or me	mbership or fundrais	sing solicitatio	ons			b(6) 2
c Sharing	of facilities, equipment, ma	iling lists, other asse	ts, or paid em	ployees			1c 2
d If the ans	swer to any of the above is	"Yes," complete the t	following sche	edule. Column (b) should al	ways show the fair r	narket value of the goods, othe	er assets,
					ue in any transactior	or sharing arrangement, sho	א וח
	d) the value of the goods,						
(a) Line no	(b) Amount involved	(c) Name of		e exempt organization	(d) Description	of transfers, transactions, and sha	ing arrangements
			N/A				<del></del>
						_ <del></del>	
<del></del>	-						
		-					
	· · · · · · · · · · · · · · · · · · ·						
	·						
						<del></del>	
2a is the for	indation directly or indirec	ltly affiliated with or i	related to one	or more tax-exempt organ			<del></del>
	n 501(c) of the Code (other				Zanono doconzos		Yes X
	complete the following sch						
	(a) Name of org	anization		(b) Type of organization		(c) Description of relationship	
	N/A						
					<u> </u>		
					<del> </del>		
Linds	er penalties of perfery. I de	that I have examined the	s return include	ng accompanying schedules and	statements and to the	best of my knowledge	
				n taxpayer) is based on all inform		r has any knowledge return	e IRS discuss this with the preparer
Here	X / en /r	_		X11/13/17	CFO		Yes See instr )
Sig	nature of officer or trustee			Date	Title		163
	Print/Type preparer's na		Preparer's s		Date	Check If PTIN	
	CHRISLEY N		1	asyN. M	11-10-17	self- employed	
Paid	CPA			my	11-10-11	P000	025230
Preparer	1	OWAN GUNT	ERMANN			Firm's EIN ▶ 95-368	
Use Only							
	I			ST., 2ND FLOO	OR		
	SA	<u>NTA BARBA</u>	RA, CA	<u> 93101-2018</u>			962-917
						Forn	n <b>990-PF</b> (20

Schedule B\_\_\_\_\_ (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 .

OMB No 1545-0047

Name of the organization

Employer identification number

	TOWBES FOUNDATION	95~3519577
Organization type (checl	k one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	on
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
General Rule $oxed{X}$ For an organizat	(c)(7), (8), or (10) organization can check boxes for both the General Rule and a S tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution any one contributor. Complete Parts I and II. See instructions for determining a co	ns totaling \$5,000 or more (in money or
	ny one contributor. Complete Parts I and II. See instructions for determining a co	ontributor's total contributions
sections 509(a)( any one contrib	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990 EZ), Part II, line utor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of t EZ, line 1 Complete Parts I and II	e 13, 16a, or 16b, and that received from
year, total contr	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receir butions of more than \$1,000 exclusively for religious, charitable, scientific, literary of cruelty to children or animals. Complete Parts I, II, and III	
year, contribution is checked, enter purpose Don't o	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receipens exclusively for religious, charitable, etc., purposes, but no such contributions for here the total contributions that were received during the year for an exclusively complete any of the parts unless the <b>General Rule</b> applies to this organization beable, etc., contributions totaling \$5,000 or more during the year	totaled more than \$1,000 If this box y religious, charitable, etc,
out it <b>must</b> answer "No"	n that isn't covered by the General Rule and/or the Special Rules doesn't file Sche on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ o et the filing requirements of Schedule B (Form 990, 990-EZ, or 990 PF)	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

## TOWBES FOUNDATION

95-3519577

Part I	Contributors (See instructions) Use duplicate copies of Part I if additional	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MICHAEL TOWBES  21 E. VICTORIA STREET, SUITE #200  SANTA BARBARA, CA 93101	\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	MICHAEL TOWBES  21 E. VICTORIA STREET, SUITE #200  SANTA BARBARA, CA 93101	\$449,958.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	MICHAEL TOWBES  21 E. VICTORIA STREET, SUITE #200  SANTA BARBARA, CA 93101	\$ 290,792.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )

Name of organization

Employer identification number

## TOWBES FOUNDATION

95-3519577

Part II	Noncash Property (See instructions) Use duplicate copies of F	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
_2	SECURITIES		
		\$\$.	11/17/16
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
3	SECURITIES		
		\$ 290,792.	02/28/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		<b>\$</b>	
(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
		\$	00 990-F7 or 990-PF) (5

Name of orga	anization	<del></del>		Employer identification number	
TOWBES	FOUNDATION  Exclusively religious, charitable, etc., control	ibutions to organizations described	in section 501(c)(7) (8) o	95-3519577	
	the year from any one contributor. Complete completing Part III, enter the total of exclusively religious.  Use duplicate copies of Part III if additional	olumns (a) through (e) and the follows, charitable, etc., contributions of \$1,000 or	wing line entry. For grassization	nc	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held	
-		(e) Transfer of gif	•		
	Transferee's name, address, ar			nsferor to transferee	
				-	
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Doo	cription of how gift is held	
Part I	(b) r di pose oi giit	(c) Ose of gift	(u) Desi	Inputor of now girt is field	
		(e) Transfer of gif			
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of tra	insferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	(d) Description of how gift is held	
		(e) Transfer of gif	t		
	Transferee's name, address, ar	nd ZIP + 4	Relationship of tra	insferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held	
		(e) Transfer of gif			
	Transferee's name, address, ar			ansferor to transferee	

FORM 990-PF INTERE	ST ON SAVI	IGS ANI	TEMPOR	RARY	CASH :	INV	ESTMENTS	SI	PATEMENT	1
SOURCE			(A) REVENUE PER BOOK		(B) NET INVESTMENT INCOME		(C) ADJUSTED NET INCOME		G	
MONTECITO BANK & TR	UST			73.			73.			
TOTAL TO PART I, LI	NE 3		73.							
FORM 990-PF	DIVIDENDS	S AND I	INTEREST	r FRO	M SEC	URI	TIES	SI	PATEMENT	2
SOURCE	GROSS AMOUNT	G2	PITAL AINS IDENDS	RE	(A) VENUE BOOK		(B) NET INVES MENT INCO		(C) ADJUSTE NET INCO	
MONTECITO BANK & TRUST	1,659		0.	1	1,65	— - 9 <b>.</b>	1,65	9.		
TO PART I, LINE 4	1,659	- ——— · = ———	0.		1,65	9. ====================================	1,65	9.		
FORM 990-PF		ОТІ	HER INCO	OME				SI	PATEMENT	3
DESCRIPTION				(A) EVENU: R BOO			(B) T INVEST- NT INCOME		(C) ADJUSTEI NET INCOM	
FEDERAL TAX REFUND			<del></del> ,	2	295. ,706.		0			
TOTAL TO FORM 990-P	F, PART I,	LINE 3	11	3	,001.		0	 - = =		
FORM 990-PF		ACC	OUNTING	FEES				Sī	TATEMENT	4
DESCRIPTION		(A) EXPENS PER BO			VEST-		(C) ADJUSTED NET INCOM		(D) CHARITAI PURPOSI	
ACCOUNTING FEES		1	,500.	<del></del>	0	•	<del></del>			0.
TO FORM 990-PF, PG	 1, LN 16B	1	,500.		0	•	<del></del>	_		0.

FORM 990-PF	TAX	ES 	S'.		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
TAXES	85.	0.		0.	
TO FORM 990-PF, PG 1, LN 18	85.	0.		0.	
FORM 990-PF	OTHER E	XPENSES	S'	ratement 6	
DESCRIPTION	(A) EXPENSES PER BOOKS		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INVESTMENT CUSTODY FEES MEETINGS MEMBERSHIP DUES SECRETARIAL SERVICES ADMINISTRATION OF FRANK	809. 997. 1,000. 8,481.	809. 0. 0.		0. 0. 1,000. 0.	
LLOYD WRIGHT LANDMARK BUILDING AND OTHER PROJECTS OFFICE CONSULTING AUTO	35,711. 467. 9,938. 320.	0. 0. 0.		0. 0. 0.	
TO FORM 990-PF, PG 1, LN 23	57,723.	809.		1,000.	

SECRETARIAL SERVICES OF \$8,481 WERE PROVIDED BY THE TOWBES GROUP. MICHAEL TOWBES IS AN OWNER AND THE CHAIRMAN OF THE BOARD OF THE TOWBES GROUP.

•			
FORM 990-PF	CORPORATE STOCK		STATEMENT 8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
SPDR S&P 500 EFT TRUST	-	0.	0.
TOTAL TO FORM 990-PF, PART II	, LINE 10B	0.	0.
FORM 990-PF	OTHER INVESTMENTS		STATEMENT 9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
FRANK LLOYD WRIGHT LANDMARK BUILDING COUNTY CENTER LP	COST	950,446. <39,150.>	975,000. <39,150.>
EAST CARRILLO LP	COST	<47,500.>	
TOTAL TO FORM 990-PF, PART II	, LINE 13	863,796.	888,350.

FORM 990-PF PART VIII - LIST TRUSTEES AND	OF OFFICERS, DI FOUNDATION MANAG		STATI	EMENT 10
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
SHERIDAH GERARD 21 E. VICTORIA STREET, SUITE #200 SANTA BARBARA, CA 93101	PRESIDENT (JULY	2016 THRU 2,250.	APRIL 201	0.
MICHAEL TOWBES 21 E. VICTORIA STREET, SUITE #200 SANTA BARBARA, CA 93101	CFO (JULY 2016 1.00	THRU APRIL 0.		0.
LYNN C. TOWBES 21 E. VICTORIA STREET, SUITE #200 SANTA BARBARA, CA 93101				0.
ROBERT L. SKINNER 21 E. VICTORIA STREET, SUITE #200 SANTA BARBARA, CA 93101	DIRECTOR 1.00	2,250.	0.	0.
CRAIG A. ZIMMERMAN 21 E. VICTORIA STREET, SUITE #200 SANTA BARBARA, CA 93101	CFO (STARTING M	MAY 2017) 2,250.	0.	0.
ANNE SMITH TOWBES 21 E. VICTORIA STREET, SUITE #200 SANTA BARBARA, CA 93101		750.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	9,000.	0.	0.