

**Return of Private Foundation** 

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

2018

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

For	calen	dar year 2018 or tax year beginning	, 2018	3, and e	ending		, 20
Nam	e of fou	ndation			A Employe	r identification numbe	ər
Em	erson (	Griffin Toring Private Foundation				30-0802804	
Nun	ber and	street (or P O box number if mail is not delivered to street address)	Room	/suite	B Telephor	e number (see instruct	ons)
204	40 Pins	e Vista Drve		ŀ		360-601-1989	
		, state or province, country, and ZIP or foreign postal code			C. If exempt	tion application is pend	
Dos	id, OR	07702		į	• II OXOIII pi	non application to pena	ing, oncon notor [
			of a former public	charity	D 4 Favorer	n eventiations, shook	hara h 🗀
u	CHECK	Final return Amended		Cricarity	U I. Foreigi	n organizations, check	here ▶ ∐
		☐ Address change ☐ Name char		İ		n organizations meeting	
	Chaol		<del></del>	7		here and attach computed foundation status was	
		type of organization: Section 501(c)(3) exempt p		,_,_ <u>'</u> /		07(b)(1)(A), check here	
		on 4947(a)(1) nonexempt charitable trust   Other tax			1		
		narket value of all assets at J Accounting method	: ☑ Casn ☐ Ad	ccruai		ndation is in a 60-mont	
		f year (from Part II, col. (c), Other (specify)			under se	ction 507(b)(1)(B), chec	khere ▶ ∐
	line 16		on cash basis.)	<u></u>		<del>,</del>	
	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net	investment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books		come	income	purposes
		the amounts in column (a) (see instructions).)				<u> </u>	(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	20250				
	2	Check ► ☐ if the foundation is not required to attach Sch. B				<u> </u>	
	3	Interest on savings and temporary cash investments	2				
	4	Dividends and interest from securities					
	5a	Gross rents					
	b	Net rental income or (loss)					
Ä	6a	Net gain or (loss) from sale of assets not on line 10			,		
Revenue	b	Gross sales price for all assets on line 6a					
Š	7	Capital gain net income (from Part IV, line 2)					
Œ	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					<u> </u>
	b	Less: Cost of goods sold			<del> </del>		
	C	Gross profit or (loss) (attach schedule)	,				
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	20252				,
Ø	13	Compensation of officers, directors, trustees, etc.					
Se	14	Other employee salaries and wages					
Expenses	15	Pension plans, employee benefits		_			ļ
X	16a	Legal fees (attach schedule)					
_	b	Accounting fees (attach schedule)			RECE	IVED	
:≥	С	Other professional fees (attach schedule)		L		IC.	
tra	17	Interest		B022	FEB 1	5 2019	
JŠ.	18	Taxes (attach schedule) (see instructions)		<u> </u>	1 60 1	5 2019 €,	
Ē	19	Depreciation (attach schedule) and depletion			AAA-		
Þ	20	Occupancy			OGDE	N, UT	
9	21	Travel, conferences, and meetings					<u> </u>
Operating and Administrative	22	Printing and publications					
g	23	Other expenses (attach schedule)	70				
äŧ	24	Total operating and administrative expenses.					
ē		Add lines 13 through 23	70				
ç	25	Contributions, gifts, grants paid	20000				
	26	Total expenses and disbursements. Add lines 24 and 25	20070				28000
	27	Subtract line 26 from line 12:					]
	a	Excess of revenue over expenses and disbursements	180			<u> </u>	<u> </u>
	b	Net investment income (if negative, enter -0-) .			0	<del></del>	<b> </b>
	С	Adjusted net income (if negative, enter -0-)				180	

For Paperwork Reduction Act Notice, see instructions.

Cat. No 11289X

Form **990-PF** (2018)



Pa	irt [l	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year
		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
•	1	Cash-non-interest-bearing			
	2	Savings and temporary cash investments	682		862
	3	Accounts receivable ►			
		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) ▶	<del></del> -	:	_ •
		Less: allowance for doubtful accounts ▶			
Assets	8	Inventories for sale or use			
386	9	Prepaid expenses and deferred charges			
Ä	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶			
	·	Less: accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers-see the		862	
		instructions. Also, see page 1, item I)	682	002	862
	17	Accounts payable and accrued expenses			
Ø	18	Grants payable		***	
Liabilities	19	Deferred revenue			
p:	20	Loans from officers, directors, trustees, and other disqualified persons			
Ë	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ► )	·-···		
	23	i otal liabilities (add lines 17 through 22)			
ģ		Foundations that follow SFAS 117, check here ▶ □			
Balances		and complete lines 24 through 26, and lines 30 and 31.			
ā	24	Unrestricted			!
Ba	25	Temporarily restricted		<del>-</del>	
פַ	26	Permanently restricted		-	
ן קֿי		Foundations that do not follow SFAS 117, check here ▶ ☑			
뒫	07	and complete lines 27 through 31.			
8	27	Capital stock, trust principal, or current funds	682	862	
<u>8</u>	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
Net Assets or Fund	29	Retained earnings, accumulated income, endowment, or other funds	O	0	
÷	30	Total net assets or fund balances (see instructions)	682	862	
ž	31	Total liabilities and net assets/fund balances (see			
Da	rt III	Analysis of Changes in Net Assets or Fund Balances	682	862	
		Analysis of Changes in Net Assets or Fund Balances I net assets or fund balances at beginning of year—Part II, colur	mn (a) line 20 (	t agree with	<del></del>
•		of-year figure reported on prior year's return)			600
2	Fnte	r amount from Part I, line 27a			682
3					180
_		lines 1, 2, and 3			
-	0	anners and the dead of the three of the colors.			862
6	Total	eases not included in line 2 (itemize)  I net assets or fund balances at end of year (line 4 minus line 5)—F	Part II, column (b). Iir	ie 30 6	862

		l(s) of property sold (for example, real estate e, 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.)
1a	N/A					
b						
<u>c</u>						
<u>d</u>			<del></del>			
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		Gain or (loss) us (f) minus (g))
<u>a</u>						
<u>b</u>			·			<del></del>
<u>C</u>					<u> </u>	<del> </del>
<u>d</u>						
<u>e</u>	Complete only for assets show	ring gain in column (h) and owned by th	e foundation	on 12/31/69.		
		(i) Adjusted basis		s of col. (i)		Col. (h) gain minus not less than -0-) or
	(i) FMV as of 12/31/69	as of 12/31/69		(j), if any	Losse	s (from col. (h))
а	······································					· · · · · · · · · · · · · · · · · · ·
b			•		,	
С			· · · · · · · · · · · · · · · · · · ·			
d			·····			
е					· · · · · · · · · · · · · · · · · · ·	
2	Capital gain net income or	$(\text{net capital loss})  \{  \text{If gain, also} \\  \text{If (loss), ent} $			2	
3	If gain, also enter in Part I,	or (loss) as defined in sections 122 line 8, column (c). See instruction	ns. If (loss)	, enter -0- in	_	
		- Cookies 4040/s) for Doduce			3	
Part		r Section 4940(e) for Reduced at a foundations subject to the sect	<del>,,,,,,,,</del> ,			
Sec	ion 494()(d)(2) anniles Teave	this part blank				
Vas t	s," the foundation doesn't qu	ection 4942 tax on the distributable lalify under section 4940(e). Do not	complete ti	his part.		
Vas t	ne foundation liable for the s s," the foundation doesn't qu Enter the appropriate amou	ection 4942 tax on the distributable	complete ti	his part.		s.
Vas t "Ye:	ne foundation liable for the s s," the foundation doesn't qu	ection 4942 tax on the distributable lalify under section 4940(e). Do not	complete to	his part.	aking any entrie	
Vas t "Ye:	ne foundation liable for the so," the foundation doesn't queen the appropriate amount (a)  Base period years (or tax year beginning in)  2017	ection 4942 tax on the distributable alify under section 4940(e). Do not unt in each column for each year; s	complete to ee the instru Net value of	his part. uctions before ma	aking any entrie	S. (d) Distribution ratio
Vas t "Ye:	ne foundation liable for the so," the foundation doesn't quenter the appropriate amoundation generated amoundation (a)  Base period years andar year (or tax year beginning in)  2017  2016	ection 4942 tax on the distributable alify under section 4940(e). Do not not in each column for each year; so the Adjusted qualifying distributions 620 1283	complete the eethe instru Net value of	his part. uctions before ma	aking any entrie	S.  (d) Distribution ratio b) divided by col. (c))  100  100
Vas t "Ye:	ne foundation liable for the so," the foundation doesn't quenter the appropriate amoundation years pendod years and year (or tax year beginning in)  2017  2016  2015	ection 4942 tax on the distributable alify under section 4940(e). Do not until in each column for each year; so (b)  Adjusted qualifying distributions 620 1283 806	complete the ethe instru Net value of	his part. uctions before ma	aking any entrie	(d) Distribution ratio (b) divided by col. (c)) 100 100
Vas t "Ye:	ne foundation liable for the so," the foundation doesn't question the appropriate amoundation doesn't question the appropriate amoundation (a)  Base period years index year deginning in)  2017  2016  2015  2014	ection 4942 tax on the distributable alify under section 4940(e). Do not not in each column for each year; so the Adjusted qualifying distributions 620 1283	complete the ethe instru Net value of	his part. uctions before ma	aking any entrie	S.  (d) Distribution ratio b) divided by col. (c))  100  100
Vas t "Ye:	ne foundation liable for the so," the foundation doesn't quenter the appropriate amoundation years pendod years and year (or tax year beginning in)  2017  2016  2015	ection 4942 tax on the distributable alify under section 4940(e). Do not until in each column for each year; so (b)  Adjusted qualifying distributions 620 1283 806	complete the ethe instru Net value of	his part. uctions before ma	aking any entrie	(d) Distribution ratio (b) divided by col. (c))  100 100 100
Vas t	ne foundation liable for the set," the foundation doesn't que Enter the appropriate amout (a)  Base penod years (or tax year beginning in)  2017  2016  2015  2014  2013	ection 4942 tax on the distributable alify under section 4940(e). Do not not in each column for each year; so Adjusted qualifying distributions 620 1283 806	complete the ethe instru Net value of	his part. uctions before ma	aking any entrie	(d) Distribution ratio (b) divided by col. (c))  100  100  100  100
Vas t "Ye: 1 Cale	ne foundation liable for the set," the foundation doesn't que Enter the appropriate amout (a)  Base penod years (or tax year beginning in)  2017  2016  2015  2014  2013  Total of line 1, column (d)	ection 4942 tax on the distributable alify under section 4940(e). Do not not in each column for each year; so the Adjusted qualifying distributions 620 1283 806 1551	complete the ethe instru Net value of	his part. uctions before ma (c) f nonchantable-use a	aking any entriessets (col. o o o o o o o o o o o o o o o o o o	(d) Distribution ratio (b) divided by col. (c))  100  100  100  100
Vas t	ne foundation liable for the set," the foundation doesn't que Enter the appropriate amout (a) Base penod years (or tax year beginning in) 2017 2016 2015 2014 2013  Total of line 1, column (d) Average distribution ratio for	ection 4942 tax on the distributable alify under section 4940(e). Do not not in each column for each year; so Adjusted qualifying distributions 620 1283 806	Net value of	his part. uctions before ma (c) f nonchantable-use a	aking any entriessets (col. 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Distribution ratio b) divided by col. (c)) 100 100 100 100
Vas t f "Ye: 1 Cale	ne foundation liable for the set," the foundation doesn't que Enter the appropriate amout (a) Base penod years ndar year (or tax year beginning in) 2017 2016 2015 2014 2013  Total of line 1, column (d) Average distribution ratio for the number of years the foundation doesn't question the set of t	ection 4942 tax on the distributable alify under section 4940(e). Do not not in each column for each year; so the following distributions 620 1283 806 1551	Net value of the complete the instruction of the control of the co	his part.  uctions before ma (c) f noncharitable-use as	aking any entriessets (col.	(d) Distribution ratio (b) divided by col. (c))  100 100 100 100
Vas t	ne foundation liable for the set," the foundation doesn't que Enter the appropriate amout (a) Base penod years ndar year (or tax year beginning in) 2017 2016 2015 2014 2013  Total of line 1, column (d) Average distribution ratio for the number of years the foundation doesn't question the set of t	ection 4942 tax on the distributable alify under section 4940(e). Do not ant in each column for each year; so the distributions (b) Adjusted qualifying distributions 620 1283 806 1551 1551 1551 1551 1551 1551 1551 15	Net value of the complete the instruction of the control of the co	his part.  uctions before ma (c) f noncharitable-use as	aking any entriessets (col. 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(d) Distribution ratio b) divided by col. (c))  100  100  100  100
Vas t f "Yee 1 Cale	Enter the appropriate amoundary (a) Base pennod years and year (or tax year beginning in)  2017  2016  2015  2014  2013  Total of line 1, column (d) Average distribution ratio for the number of years the foundary the number of years the foundary the number of years the foundary line 4 by line 3	ection 4942 tax on the distributable alify under section 4940(e). Do not ant in each column for each year; so the distributions (b) Adjusted qualifying distributions 620 1283 806 1551 1551 1551 1551 1551 1551 1551 15	Net value of the complete the instruction of the control of the co	his part.  uctions before ma (c) f noncharitable-use as	aking any entriessets (col. 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(d) Distribution ratio b) divided by col. (c))  100  100  100  100
Was t f "Yee 1 Cale 2 3 4 5	Enter the appropriate amoundary (a) Base pennod years and year (or tax year beginning in)  2017  2016  2015  2014  2013  Total of line 1, column (d) Average distribution ratio for the number of years the foundary the number of years the foundary the number of years the foundary line 4 by line 3	ection 4942 tax on the distributable alify under section 4940(e). Do not until in each column for each year; so (b)  Adjusted qualifying distributions  620 1283 806 1551  or the 5-year base period—divide undation has been in existence if lemaritable-use assets for 2018 from	Net value of the complete the instruction of the control of the co	his part.  uctions before ma (c) f noncharitable-use as	aking any entriessets (col. o o o o o o o o o o o o o o o o o o	(d) Distribution ratio b) divided by col. (c)) 100 100
Vas t f "Yee 1 1 Cale 2 3 4 5 6	ne foundation liable for the set," the foundation doesn't que Enter the appropriate amout (a) Base penod years ndar year (or tax year beginning in)  2017 2016 2015 2014 2013  Total of line 1, column (d) Average distribution ratio for the number of years the four Enter the net value of noncle Multiply line 4 by line 3  Enter 1% of net investment Add lines 5 and 6	ection 4942 tax on the distributable alify under section 4940(e). Do not until in each column for each year; so (b)  Adjusted qualifying distributions  620 1283 806 1551  or the 5-year base period—divide undation has been in existence if lemaritable-use assets for 2018 from	Net value of the total on the t	his part.  uctions before ma (c) f nonchantable-use and line 2 by 5.0, or ears	aking any entriessets (col. 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(d) Distribution ratio (b) divided by col. (c))  100 100 100 100

orm 99	10-PF (2018)		Í	Page <b>4</b>
Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see i	nstru		
	Exempt operating foundations described in section 4940(d)(2), check here			l i
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			
b			0	
	here ▶ □ and enter 1% 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-)			
3	Add lines 1 and 2			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			
6	Credits/Payments:			1
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 6a			
b	Exempt foreign organizations—tax withheld at source 6b			
C	Tax paid with application for extension of time to file (Form 8868) . 6c 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d			
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			
10	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 2019 estimated tax > Refunded > 11			
11 252	Enter the amount of line 10 to be: Credited to 2019 estimated tax ▶ Refunded ▶ 11    VII-A Statements Regarding Activities		0	L
		•	Yes	No
ıa	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?	1a	103	<del>                                      </del>
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	-		<u> </u>
-	instructions for the definition	1b		1
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			1
	published or distributed by the foundation in connection with the activities.			}
C	Did the foundation file Form 1120-POL for this year?	10		✓
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers. ► \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<b>✓</b>
_	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	<u> </u>		
4-	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.	3		<b>√</b>
4a b	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b		<b>✓</b>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		1
J	If "Yes," attach the statement required by General Instruction T.	<b> </b> -		<del></del>
6	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?	6	<b>→</b>	
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 XV	7	✓	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			

rari	VIFA Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	
	Website address ▶ http://www.emersongriffintoringfoundation.org/			
14	***************************************	0-601-	1989	
	Located at ▶ 20440 Pine Vista Drive ZIP+4 ▶	9770	2	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	ļ	✓.
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
Dart	the foreign country ►  VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1	L	
rart	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<del>T</del>	Yes	No
1a	During the year, did the foundation (either directly or indirectly):	$\vdash$	100	<del></del>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? $\square$ Yes $\square$ 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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .	<u> </u>		
	Organizations relying on a current notice regarding disaster assistance, check here	1b		<u> </u>
С	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 2018?	1c		7
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018?			
h	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b	_	<b>-</b> /
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	▶ 20 <u>, 20</u> , 20 <u>, 20</u>			
3a	Did the foundation hold more than a 2% direct or Indirect Interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2018 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 2018.)	25		ـــا
An	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b 4a		_
4a b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	70		<del>                                     </del>
_	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		7

Pai	t VII-B Statements Regarding Activitie	s tor v	Yhich Form	4/20	мау ве н	equire	ed (contii	nued)			
5a	During the year, did the foundation pay or incur	<del></del>					•		1	Yes	No
	(1) Carry on propaganda, or otherwise attempt	•		on (sec	tion 4945(e	))? .	☐ Yes	√ No			
	(2) Influence the outcome of any specific publi								1		i
	directly or indirectly, any voter registration d	rive?					☐Yes	<b></b> ✓ No			l
	(3) Provide a grant to an individual for travel, stu	ıdv. or					_	✓ No		٠.	-
	(4) Provide a grant to an organization other tha	•									i
	section 4945(d)(4)(A)? See instructions						Yes	<b>⊘</b> No	ŀ		
	(5) Provide for any purpose other than religious										1
	purposes, or for the prevention of cruelty to						☐Yes	√ No			
b								_	1		
	in Regulations section 53.4945 or in a current no								5b		
	Organizations relying on a current notice regard							▶□			
С											İ
	because it maintained expenditure responsibility							No			
	If "Yes," attach the statement required by Regul	ations s	section 53.49	45-5(ď	).		_	_	1 :		
6a						emiums					
	** **			-			☐ Yes	✓ No		.	
b	Did the foundation, during the year, pay premiur	ns, dire	ctly or indire	ctly, on	a personal	benefit	contract	? .	6b		
	If "Yes" to 6b, file Form 8870.		-	-	-						
7a	At any time during the tax year, was the foundation	a party	to a prohibite	d tax sh	elter transad	ction?	☐ Yes	✓ No			ii
b	If "Yes," did the foundation receive any proceed	s or ha	ve any net in	come a	ttributable	to the tr	ransaction	n? .	7b		
8	Is the foundation subject to the section 4960 ta										
	remuneration or excess parachute payment(s) d								1 .		
Pai	t VIII Information About Officers, Direct	tors, 1	Γrustees, F	ounda	tion Mana	agers,	Highly F	Paid E	mploy	ees,	
	and Contractors							-			
1	List all officers, directors, trustees, and found	_			<del></del>				•		
	(a) Name and address	hou	e, and average irs per week ed to position	(If i	mpensation not paid, nter -0-)	emplo	Contributions yee benefit erred compe	plans	(e) Expe	nse acc allowan	
Raiph	H Emerson III 20440 Pine Vista Dr Bend OR 97702	Secret	<del></del>		•						
		Treasu	-		0			o			0
Kuna	Vaswani 515 E Denny Way, Seattle, WA 98112				•						
		Vice Pi	resident .25		0			o			0
Pavar	Naswani 1575 Tremont St #704,Boston, MA 02120										
		Preside	ent .25		. 0			0			0
		<u> </u>				L					
2	Compensation of five highest-paid employe "NONE."	es (oth	er than tho	se incl	uded on li	ne 1—:	see instr	uctions	i). If no	one, e	enter
			(b) Trtle, and a	verage			(d) Contribu		43.5		
	(a) Name and address of each employee paid more than \$50,00	00	hours per v	veek	(c) Comper	sation	employee plans and o		(e) Experother a	nse acc allowan	
			devoted to p				compens	sation			
					[			-			
			<u> </u>								
<b></b>											
					ļ						
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								l			
	(		-								
			<u> </u>								
Total	number of other employees paid over \$50,000 .							. ▶			

	and Contractors (continued)  Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE"	= »
<u> </u>	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
N/A	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
14/74		
	······································	
	number of others receiving over \$50,000 for professional services	
Par	t IX-A Summary of Direct Charitable Activities	
	t the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of janizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1	N/A	
	***************************************	
		o
2		
3		
4		
•		
Par	t IX-B Summary of Program-Related Investments (see instructions)	
De	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	N/A	
		0
2		
	other program-related investments. See instructions.	
3		
Total	. Add lines 1 through 3	
	~ · · · · · · · · · · · · · · · · · · ·	1

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreit see instructions.)	gn to	undations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:	4-	_
a	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	1667
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1667
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1667
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	ınstructions)	4	1667
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations, check here ► and do not complete this part.)	ounda	ations
1	Minimum investment return from Part X, line 6	1	0
2a	Tax on investment income for 2018 from Part VI, line 5		
b	Income tax for 2018. (This does not include the tax from Part VI.) 2b 0		
C	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	,
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	o
Part	XII Qualifying Distributions (see instructions)	<del>I</del>	
1	Amounts paid (Including administrative expenses) to accomplish charitable, etc., purposes:	Г	
а	Expenses, contributions, gifts, etctotal from Part I, column (d), line 26	1a	20070
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.,		<u></u>
	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:	┢	
а	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	20070
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	<del>                                     </del>	20070
•	Enter 1% of Part I, line 27b. See instructions	5	•
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	20070
J	• • • •		
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	wne.	
			Form <b>990-PF</b> (2018)

art	Ondistributed income (see instruction	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1	Distributable amount for 2018 from Part XI, line 7				
2 a	Undistributed income, if any, as of the end of 2018.  Enter amount for 2017 only	-			-
b	Total for prior years: 20 , 20 , 20	<del></del>	+		<del> </del>
3	Excess distributions carryover, if any, to 2018:	<del></del>			<del> </del>
а	From 2013				
b	From 2014	1			
C	From 2015	j			1
đ	From 2016	]		•	ļ
е	From 2017				
f	Total of lines 3a through e				
4	Qualifying distributions for 2018 from Part XII, line 4: ▶ \$				
<b>a</b>	Applied to 2017, but not more than line 2a .			<del></del>	
b	Applied to undistributed income of prior years (Election required—see instructions)	4-30			
С	Treated as distributions out of corpus (Election required—see instructions)				
đ	Applied to 2018 distributable amount				
e	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5		<del></del>	<del> </del>	
b	Prior years' undistributed income. Subtract line 4b from line 2b				
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				
d	Subtract line 6c from line 6b. Taxable amount—see instructions				
е	Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount—see instructions				
f	Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019				
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)				
8	Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions) .				
9	Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
а	Excess from 2014				
þ	Excess from 2015				
C	Excess from 2016				
đ	Excess from 2017		1		
е	Excess from 2018		1		i l

	MV Drivete Operating Foundati	liana /aaa inatu	rations and Davi	1 M A		Page 1
Part	· · · · · · · · · · · · · · · · · · ·	<del></del>		<del></del>	<u> </u>	
12	If the foundation has received a ruling					
	foundation, and the ruling is effective for				L <u></u>	
	Check box to indicate whether the foun		e operating found		ection	3) or 🗌 4942(j)(
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2018	<b>(b)</b> 2017	(c) 2016	(d) 2015	······································
	each year listed					
b	85% of line 2a					
C	Qualifying distributions from Part XII,					
	line 4 for each year listed		1		/	
d	Amounts included in line 2c not used directly			/		***
	for active conduct of exempt activities					
е	Qualifying distributions made directly			<del>                                     </del>		
•	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the	·· -		<del>                                     </del>		··· · · · · · · · · · · · · · · · · ·
•	alternative test relied upon.			/		
_	-					
а	"Assets" alternative test—enter:		1	1/	]	
	(1) Value of all assets			<i>Y</i>		
	(2) Value of assets qualifying under		/	/	1	
b	section 4942(j)(3)(B)(i)		ļ/			
U	of minimum investment return shown in		/			
	Part X, line 6 for each year listed		//_			
C	"Support" alternative test-enter:					
	(1) Total support other than gross			ļ		
	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		ď			
	organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from	· · · · · · · · · · · · · · · · · · ·	<del> </del>	·		<del></del>
	an exempt organization			1		
	(4) Gross investment income		-			
Part		i (Complete ti	is part only if	the foundation h	ad \$5 000 or mo	re in assets a
	any time during the year—				au 40,000 or mo	ne in assets a
1	Information Regarding Foundation N		13.)	· · · · · · · · · · · · · · · · · · ·		
	List any managers of the foundation w		ted more than 2	% of the total cente	ibutions received b	ny tha faundatia
•	before the close of any tax year (but or					by the reuneane
	before the close of any tax year (but of	ny ii tiley have o	Sittibuted more t	man \$5,000). (Gee 3	ection 507 (d)(z).)	
V/A	List one managers of the formulation of	100/ a			/	
b	List any managers of the foundation of					go portion of th
	ownership of a partnership or other en	uty) of which the	roundation has a	10% or greater inte	erest.	
V/A		<del>,</del>				
2	Information Regarding Contribution,					
	Check here ▶ ☐ if the foundation of					
	unsolicited requests for funds. If the fo		gifts, grants, etc.	, to individuals or o	rganizations under	other conditions
	complete items 2a, b, c, and d. See ins					
а	The name, address, and telephone nur	nber or email ad	dress of the perso	on to whom applica	tions should be ad-	dressed:
b	The form in which applications should	be submitted an	d information and	materials they sho	uld include:	
				-		
С	Any submission deadlines:					
	A	<del></del>				
d	Any restrictions or limitations on awa	ards, such as b	y geographical a	reas, charitable fie	elds, kinds of insti	tutions, or othe
	factors:					

	Part XV Supplementary Information (continued)							
3	Grants and Contributions Paid During t	he Year or Approv	ed for Fu	ture 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	Contribution				
а	Paid during the year							
				[				
N/A	•							
				1				
		1			}			
				1				
	Total	· · · · · · · ·		▶ 3a				
b	Approved for future payment							
				<u> </u>				
	Total			▶ 3b				

		s amounts unless otherwise indicated.	<del>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</del>	Isiness income	Excluded by secti	on 512, 513, or 514	(1)
	Ū		(a) Business code	(b)	(c) Exclusion code	(d) Amount	Related or exemp function income
1	Progr	am service revenue:					(See instructions.)
	a _					, 	
	b	Manager 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1			1		
	c _						
	d _	A - 14" - " - 1				·········	
	e _						
	f _				-		
	_	ees and contracts from government agencies					
_		pership dues and assessments	<u> </u>				
3		st on savings and temporary cash investments					
4		ends and interest from secunties					<del> </del>
5		ental income or (loss) from real estate:				<del></del>	
		ebt-financed property					
_		ot debt-financed property				······································	
_		ental income or (loss) from personal property					
7		investment Income			1		
8		or (loss) from sales of assets other than inventory					<del></del>
9		come or (loss) from special events	ļ				
		s profit or (loss) from sales of inventory			-		
11		revenue: a					
	b _				-	· · · · · · · · · · · · · · · · · · ·	
		<del></del>			-		
	<u> </u>						· · · · · · · · · · · · · · · · · · ·
4.0	e Cultur	4-1-4-1					
12	Subto	otal. Add columns (b), (d), and (e)	L		1	- 12	
		. Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation				13	<del></del>
	rt XVI			ont of Evons	at Dumasas	<del></del>	
	e No.					A	
	▼	Explain below how each activity for which accomplishment of the foundation's exempt pur	poses (other that	n by providing fu	nds for such purp	-A contributed if oses). (See instruc	mportantly to the ctions.)
			<del></del>			•	· · · · · · · · · · · · · · · · · · ·
		· · · · · · · · · · · · · · · · · · ·			·	·····	
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Firm's name Firm's address ▶

Paid

Preparer Use Only

Form 99		<u></u>					****	1	Page 1
Part	XVII	Informatio Organizati		sfers to and Transaction	ons and I	Relationships W	ith Noncha	ritable	Exemp
1	in s	the organization	directly or indirectly	engage in any of the follow 501(c)(3) organizations)					res No
а			porting foundation to	o a noncharitable exempt o	rganizatior	n of:			
	(1)	Cash			·			1a(1)	✓
		(2) Other assets							
b	Other transactions:  (1) Sales of assets to a noncharitable exempt organization							41-743	
							1b(1) 1b(2)	<b>→</b> ✓	
				er assets				1b(3)	<b>\</b>
								1b(4)	1
	(5) L	oans or loan gua	arantees					1b(5)	1
				nip or fundraising solicitatio				1ხ(6)	1
		-	•	sts, other assets, or paid er				1c	
đ	valu	e of the goods, o	ther assets, or servi	s," complete the following cee given by the reporting ement, show in column (d)	foundation	i. If the foundation	received less	s than fa	air marke
(a) Line	no.	(b) Amount involved	(c) Name of nonch	haritable exempt organization	(d) Desc	inption of transfers, tra	nsactions, and sha	aring arran	gements
						·			
	_					· · · · · · · · ·			
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	desc	ribed in section :	501(c) (other than se	ffiliated with, or related to ction 501(c)(3)) or in section		nore tax-exempt	organizations 	☐ Yes	☑ No
ь	1) 1	(a) Name of organ	e following schedule	(b) Type of organizatio	n	(c) De	scription of relatio	nshin	
		(a) Hame or organ		(b) Type of organization	·•	(0) 20	301101101101101		
		<del>- ·····</del>	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			·		
	T 0=3	or northead (	I dealare that I have aver	and there exists an arrangement are seen		d atatamants d t - "	hant of my leaves	d=0 == -1 t-	haf at A-
Sign Here	COTT			ed this return, including accompanying an texpayer) is based on all information		parer has any knowledge	May the li with the p	RS discuss	this return
		nature of officer or tru	stee	Date Tit			See instru	ctions.	Yes □ No
Paid	*	Print/Type preparer	r's name	Preparer's signature		Date	Check I if	PTIN	

Check [] if self-employed

Firm's EIN ▶

Phone no.

## Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

**Employer identification number** 

2018

**Emerson-Griffin-Toring Private Foundation** 30-0802804 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 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 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 331/3% 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 (entering "N/A" in column (b) instead of the contributor name and address), 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. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't 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 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Employer identification number

Part I	Contributors (see instructions). Use duplicate cor	pies of Part I if additional space is	needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	Emerson Family Dynasty Trust  20440 Pine Vista Drive  Bend, OR 97702	\$ 15000	Person Payroli Noncash  (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	Ralph H Emerson II  1740 Fairfield Ave  Reno, NV 89509	\$ 5000	Person Payroll Noncash  (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		s	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		<b>\$</b>	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$ 	Person		

Name of organization

**Employer identification number** 

Part II	Noncash Property (see instructions). Use duplicate copies	of Part II if additional sp	ace is needed.
(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
		\$	

Schedule	R	/Form	990	990-F7	or 990-PF	(2018)
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Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

lame of org	ganization			Employer identi	fication numbe			
Part III	Exclusively religious, charitable, etc (10) that total more than \$1,000 for the following line entry. For organizati contributions of \$1,000 or less for the Use duplicate copies of Part III if addi	the year from any or ions completing Part l e year. (Enter this info	ne contributor. ( III, enter the total rmation once. S	Complete columns <b>(a)</b> thre of <i>exclusively</i> religious, o	ough (e) and			
(a) No. from	(b) Purpose of gift	(c) Use of		(d) Description of how	gift is held			
Part I								
		(e) Transfer	of gift		• • • • • • • • • • • • • • • • • • • •			
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee					
(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							
<u> </u>			******					
[ ]								
(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							
-								
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Description of how	gift is held			
Part I								
	(e) Transfer of gift							
-	Transferee's name, address, an	d ZIP + 4	Relation	ship of transferor to transf	eree			
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