## Form **8879-EO**

# IRS e-file Signature Authorization for an Exempt Organization For calendar year 2014, or fiscal year beginning NOV 1 , 2014, and ending OCT 3

<b>-</b>			
2014, and ending	OCT	31	.20 15

OMB No. 1545-1878

Department of the Treasury	▶ Do not send to the IRS. Keep for your records.		20 1 <del>4</del>
Internal Revenue Service	► Information about Form 8879-EO and its instructions is at www.irs.gov/form8	87 <u>9</u> eo.	
Name of exempt organization		Employer	identification number
CS FUND		95-3	607882
Name and title of officer			
ROXANNE TURN			
EXECUTIVE DI			
Part I Type o	f Return and Return Information (Whole Dollars Only)		
on line <b>1a, 2a, 3a, 4a,</b> o	eturn for which you are using this Form 8879-EO and enter the applicable amount, if any, from 5a, below, and the amount on that line for the return being filed with this form was blank, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable by Total revenue, if any (Form 990, Part VIII, column (A), line 12)	then leave le line belov	line <b>1b</b> , <b>2b</b> , <b>3b</b> , <b>4b</b> , or <b>5b</b> , w. <b>Do not</b> complete more
2a Form 990-EZ check			
3a Form 1120-POL che			
4a Form 990-PF check			1,766.
5a Form 8868 check he	` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		
Part II Declar	ation and Signature Authorization of Officer		
intermediate service pro (a) an acknowledgementhe date of any refund. I debit) entry to the finance return, and the financial 1-888-353-4537 no later processing of the electropayment. I have selected organization's consent to	amount in Part I above is the amount shown on the copy of the organization's electronic revider, transmitter, or electronic return originator (ERO) to send the organization's return to to freceipt or reason for rejection of the transmission, (b) the reason for any delay in procest applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an cial institution account indicated in the tax preparation software for payment of the organizinstitution to debit the entry to this account. To revoke a payment, I must contact the U.S than 2 business days prior to the payment (settlement) date. I also authorize the financial onic payment of taxes to receive confidential information necessary to answer inquiries and a personal identification number (PIN) as my signature for the organization's electronic representation of the payment of the organization of electronic funds withdrawal.	the IRS and essing the re electronic f zation's fede . Treasury F institutions d resolve is	d to receive from the IRS eturn or refund, and (c) funds withdrawal (direct eral taxes owed on this Financial Agent at involved in the esues related to the
Officer's PIN: check or	•		
X I authorize M	FO EFILING SERVICES CO.	to enter my	
	ERO firm name		Enter five numbers, b
is being filed venter my PIN  As an officer of	re on the organization's tax year 2014 electronically filed return. If I have indicated within t with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also au on the return's disclosure consent screen.  of the organization, I will enter my PIN as my signature on the organization's tax year 2014	thorize the	aforementioned ERO to
	in this return that a copy of the return is being filed with a state agency(ies) regulating cha enter my PIN on the return's disclosure consent screen.	nties as par	t of the IRS Fed/State
Officer's signature	Date ▶		
Part III   Certific	cation and Authentication		
	your six-digit electronic filing identification		
	by your five-digit self-selected PIN.  38234048502  do not enter all zeros	2	
	numeric entry is my PIN, which is my signature on the 2014 electronically filed return for the ting this return in accordance with the requirements of <b>Pub. 4163</b> , Modernized e-File (MeFness Returns.		
ERO's signature 🕨	Date ▶		
	ERO Must Retain This Form - See Instructions		
	Do Not Submit This Form To the IRS Unless Requested To Do	So	

LHA For Paperwork Reduction Act Notice, see instructions. 423051 09-29-14

Form **8879-EO** (2014)

#### EXTENDED TO JUNE 15, 2016 **Return of Private Foundation**

Form **990-PF** 

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.

OMB No. 1545-0052

Department of the Treasury ► Information about Form 990-PF and its separate instructions is at <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

In beginning NOV 1, 2014 , and ending OCT 31, 2015 For calendar year 2014 or tax year beginning A Employer identification number Name of foundation CS FUND 95-3607882 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite **B** Telephone number 469 BOHEMIAN HIGHWAY (707) 874-2942City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 95472-9579 FREESTONE, CA G Check all that apply: Initial return Initial return of a former public charity **D** 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation **H** Check type of organization: E If private foundation status was terminated Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: L Cash Accrual F If the foundation is in a 60-month termination X Other (specify) MODIFIED CASH (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here ... 1,907,851. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) for charitable purposes (cash basis only) expenses per books income income 950,000 N/A Contributions, gifts, grants, etc., received Check if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 25. 25. STATEMENT 36,638. 36,638. STATEMENT 4 Dividends and interest from securities 18,200. 18,200. STATEMENT **5a** Gross rents 18,200. **b** Net rental income or (loss) 58,234 6a Net gain or (loss) from sale of assets not on line 10 **b** Gross sales price for all assets on line 6a ..... 846,851. 7 Capital gain net income (from Part IV, line 2) 58,234. 8 Net short-term capital gain Income modifications Gross sales less returns and allowances **b** Less: Cost of goods sold ... c Gross profit or (loss) 11 Other income 1,063,097. 113,097. Total. Add lines 1 through 11 19,948. 19,433. 515. Compensation of officers, directors, trustees, etc. 13 14 Other employee salaries and wages ..... 73,576. 51,891. 134. 16,397 107. 15,800. 15 Pension plans, employee benefits 6,852. 0. 6,852. Expenses 16a Legal fees STMT 4 17,135. **b** Accounting fees **STMT** 5 12. 17,123. 19,119. 17,511. 1,608. c Other professional fees STMT 6 17 Interest 2,913. Taxes STMT 11,475. 6,922. 18 Depreciation and depletion 19 5,822. 5,822. 0. 20 Occupancy 17,698. 0. 17,698. 21 Travel, conferences, and meetings ...... and 22 Printing and publications ...... 681. 0. 681. 8,699. 23 Other expenses STMT 8 3,596. 5,103. Operating 24 Total operating and administrative 197,402 24,788. 148,933. expenses. Add lines 13 through 23 350,504 350,504. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 547,906 24,788 499,437. Add lines 24 and 25 27 Subtract line 26 from line 12: 515,191 **a** Excess of revenue over expenses and disbursements 88,309. **b Net investment income** (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions.

C Adjusted net income (if negative, enter -0-).

Form **990-PF** (2014)

N/A

Form 990-PF (2014) CS FUND 95-3607882 Page 2

	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
Р	arı	column should be for end-of-year amounts only.	(a) Book Value	( <b>b</b> ) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	174,183.	218,239.	218,239.
	2	Savings and temporary cash investments	118,581.	8,332.	8,332.
	3	Accounts receivable ► 110.			
		Less: allowance for doubtful accounts	26.	110.	110.
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
ţ	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
ğ		Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 11	253,059.	267,152.	378,159.
	C	Investments - corporate bonds STMT 12	649,820.	421,672.	432,498.
	11	Investments - land, buildings, and equipment: basis $123,000$ .			
		Less: accumulated depreciation	123,000.	123,000.	215,000.
	12	Investments - mortgage loans			
	13	Investments - other STMT 13	264,256.	317,503.	366,623.
	14	Land, buildings, and equipment: basis ► 930, 932.			
		Less: accumulated depreciation STMT $14 \rightarrow 421,010$ .	509,922.	509,922.	288,890.
	15	Other assets (describe )			
	16	Total assets (to be completed by all filers - see the			
_		instructions. Also, see page 1, item I)	2,092,847.		1,907,851.
		Accounts payable and accrued expenses	2,045.	-89.	
		Grants payable	652,500.		
es		Deferred revenue			
Liabilities		Loans from officers, directors, trustees, and other disqualified persons			
<u>ia</u>		Mortgages and other notes payable	0	22 (01	
_	22	Other liabilities (describe ► ACCRUED PAYROLL )	0.	23,681.	
		T. 18 188 ( 118 47 8 100)	654 545	22 502	
_	23	Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here	654,545.	23,592.	
		,			
S	0.4	and complete lines 24 through 26 and lines 30 and 31.	1,438,302.	1,842,338.	
Š	24	Unrestricted Temporarily restricted	1,430,302.	1,042,330.	
sala	25	Temporarily restricted			
ğ	20	Permanently restricted  Foundations that do not follow SFAS 117, check here			
Ξ		and complete lines 27 through 31.			
ō	27				
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
4ss	29	Retained earnings, accumulated income, endowment, or other funds			
Net Assets or Fund Balance	30	Total net assets or fund balances	1,438,302.	1,842,338.	
Z		Total not added of fully buildings	2,230,3026	2,012,000	
	31	Total liabilities and net assets/fund balances	2,092,847.	1,865,930.	
=			. ,	, -,	

## Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		Т	
	(must agree with end-of-year figure reported on prior year's return)	1		1,438,302.
2	Enter amount from Part I, line 27a	2	П	515,191.
3	Other increases not included in line 2 (itemize)  SEE STATEMENT 9	3		2,500.
4	Add lines 1, 2, and 3	4	П	1,955,993.
5	Decreases not included in line 2 (itemize) ► SEE STATEMENT 10	5		113,655.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6		1,842,338.

Form 990-PF (2014) CS FU						9.	<u>5-360'</u>	7882	Page 3
Part IV Capital Gains and	Losses for Tax on In	vestment	Income	1 /1 3 11					
	the kind(s) of property sold (e.g. ouse; or common stock, 200 shs			(b) How ac P - Purc D - Dona	cquired (	c) Date a	acquired av. vr.)	( <b>d)</b> Dat (mo., da	
1a	, or common stock, 200 sns	. WILO 00.)		D - Dona	D - Donation (e., e.g., y.v.) (e.				
	TATEMENTS								
c									
d									
е									
(e) Gross sales price	(f) Depreciation allowed		t or other basis				ain or (loss)		
	(or allowable)	pius e	xpense of sale			(e) plus	(f) minus (	9)	
a b									
C									
d									
e 846,851.			788,61	7.				58	,234.
Complete only for assets showing ga	in in column (h) and owned by t	he foundation	on 12/31/69				ol. (h) gain		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any		col. (	k), but n Losses	ot less than (from col. (l	1-0-) <b>or</b> 1))	
a									
b									
C									
d e								58	,234.
	( If goin, also anter	in Dort I line	7	7					, 2310
2 Capital gain net income or (net capital	loss) { If gain, also enter If (loss), enter -0-	in Part I, line	<i>i</i> 7	. } 2				58	,234.
3 Net short-term capital gain or (loss) as	s defined in sections 1222(5) an	d (6):							
If gain, also enter in Part I, line 8, colu				<b>}</b>   _			3T / 3		
If (loss), enter -0- in Part I, line 8  Part V   Qualification Under	er Section 4940(e) for	Reduced	Tay on Net	. )  3 Investn	ent Inco	me	N/A		
(For optional use by domestic private fou						,,,,,			
		540(a) tax on	not invostment in	001110.)					
If section 4940(d)(2) applies, leave this pa	art blank.								
Was the foundation liable for the section	4942 tax on the distributable am	ount of any ye	ar in the base per	iod?				Yes	X No
If "Yes," the foundation does not qualify u									
1 Enter the appropriate amount in each		structions be	ore making any e					(d)	
Base period years	(b) Adjusted qualifying dist	ributions	Net value of no	(C) ncharitable-	use assets	Ι,	Distrib (col. (b) divi	(d) ution ratio	(0))
Calendar year (or tax year beginning in 2013	)   , , , , ,	0,921.			5,175.		(coi. (b) divi		58050
2012	2,66	3,675.		2,93	$\frac{3,273}{1,067}$				08773
2011	2,67	6,190.		3,23	2,727.				27843
2010		0,895.			2,853.				06073
2009	2,86	4,753.		3,01	8,681.			. 9	49008
								4 0	40747
2 Total of line 1, column (d)				- <b>f</b>		2		4.0	49747
<b>3</b> Average distribution ratio for the 5-year the foundation has been in existence in	•		•	-		3		. 8	09949
the foundation has been in existence i	1 1655 tilali 5 years							• • •	00040
4 Enter the net value of noncharitable-us	se assets for 2014 from Part X, I	ine 5				4	•	1,839	,426.
5 Multiply line 4 by line 3						5		1,489	<u>,841.</u>
<b>a F 1 1 1 1 1 1 1 1 1 1</b>	o/ (D           07 )								002
6 Enter 1% of net investment income (1	% of Part I, line 2/b)					6			883.
7 Add lines 5 and 6						7		1,490	,724.
8 Enter qualifying distributions from Par						8		499	,437.
If line 8 is equal to or greater than line See the Part VI instructions.	, check the box in Part VI, line	ib, and comp	iete triat part usin 	ya 1% taxi 	ate.				

F05\_\_\_\_1

Part '	VI Excise Tax Based on Investment Income (Section 4940	0(a). 4	940(b). 4	1940(	e). or 4	948	- see i	nstru		ns)
	empt operating foundations described in section 4940(d)(2), check here and er				7				-	,
	e of ruling or determination letter: (attach copy of letter if nec			ons)						
	mestic foundations that meet the section 4940(e) requirements in Part V, check here					1			1,7	66.
	Part I, line 27b					•			_ , .	
c All	other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Part	I line 12 co	 L (h)						
	under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Ot			. ,		2				0.
	I lines 1 and 2				1	3			1,7	
	otitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. O					4				0.
	s based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-					5			1,7	66.
	dits/Payments:									
	14 estimated tax payments and 2013 overpayment credited to 2014	6a		18,	306.					
	mpt foreign organizations - tax withheld at source	6b								
	paid with application for extension of time to file (Form 8868)	6c								
	kup withholding erroneously withheld	6d								
	al credits and payments. Add lines 6a through 6d					7		1	8,3	06.
8 Ent	er any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attac	ched				8			-	
	due. If the total of lines 5 and 8 is more than line 7, enter amount owed					9				
	erpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				1	10		1	6,5	40.
	er the amount of line 10 to be: Credited to 2015 estimated tax		6,000.			11		1	0,5	40.
Part '	/II-A Statements Regarding Activities						•			
<b>1a</b> Du	ing the tax year, did the foundation attempt to influence any national, state, or local legisl	lation or	did it partici	pate or	intervene	in			Yes	No
any	political campaign?							1a		Х
<b>b</b> Did	it spend more than \$100 during the year (either directly or indirectly) for political purpos							1b		Х
If t	he answer is "Yes" to <sub>1a</sub> or <sub>1b</sub> , attach a detailed description of the activities and	d copie	s of any ma	aterials	publishe	ed or				
dis	tributed by the foundation in connection with the activities.									
<b>c</b> Did	the foundation file Form 1120-POL for this year?							1c		Х
<b>d</b> Ent	er the amount (if any) of tax on political expenditures (section 4955) imposed during the	year:								
(1)	On the foundation. $\blacktriangleright$ \$ (2) On foundation managers.	.▶ \$			0.					
e Ent	er the reimbursement (if any) paid by the foundation during the year for political expendi	ture tax	imposed on	founda	tion					
ma	nagers. ► \$0 .									
<b>2</b> Has	s the foundation engaged in any activities that have not previously been reported to the IF	RS?						2		X
If "	Yes," attach a detailed description of the activities.									
<b>3</b> Has	s the foundation made any changes, not previously reported to the IRS, in its governing in	nstrume	nt, articles o	f incorp	oration, o	r				
	aws, or other similar instruments? If "Yes," attach a conformed copy of the change							3		X
	the foundation have unrelated business gross income of \$1,000 or more during the year $\frac{1}{2}$							4a		Х
b If "	es," has it filed a tax return on <b>Form 990-T</b> for this year?					N	[/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		Х				
	Yes," attach the statement required by General Instruction T.									
	the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eit	ther:								
	y language in the governing instrument, or									
	y state legislation that effectively amends the governing instrument so that no mandatory	•							77	
ren	nain in the governing instrument?							6	X	
<b>7</b> Did	the foundation have at least $\$5,000$ in assets at any time during the year? If "Yes," contains the foundation have at least $\$5,000$ in assets at any time during the year?	nplete F	Part II, col. (	(c), and	d Part XV			7	X	
	er the states to which the foundation reports or with which it is registered (see instruction	ns) 🔼								
	A				,					
	ne answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Al	-	•	-	,				37	
	each state as required by General Instruction G? If "No," attach explanation							8b	X	
	he foundation claiming status as a private operating foundation within the meaning of sec		, . ,	,	,					v
	r 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," c							9		X
<b>10</b> Did	any persons become substantial contributors during the tax year? If "Yes," attach a schedu	le listing t	their names and	d addres	ses			10		X

	1 990-PF (2014) CS FUND	95-3607	882		Page (
Pa	art VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				1
	section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory				
	If "Yes," attach statement (see instructions)		12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	<u> </u>
	Website address ► WWW.CSFUND.ORG	(505)	<u> </u>		4.0
14	The books are in care of ROXANNE TURNAGE  Telephone no.	. <u>►(707)</u>	874	-29	42
	Located at ► 469 BOHEMIAN HIGHWAY, FREESTONE, CA	ZIP+4 ▶ <u>95</u>	4/2		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041 -</b> Check here			▶	
	and enter the amount of tax-exempt interest received or accrued during the year	* 15		/A	NIa
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,		ا مد ا	Yes	No X
	securities, or other financial account in a foreign country?		16		
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the nan	ie oi trie			
Pá	foreign country ►  art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required				
•	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1:	a During the year did the foundation (either directly or indirectly):				110
.,		Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
		Yes X No			
		Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes 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)?	Yes X No			
	(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.)	Yes X No			
١	b If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations				
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		1b		X
	Organizations relying on a current notice regarding disaster assistance check here	▶Ш			
(	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected				
	before the first day of the tax year beginning in 2014?		1c		X
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)):				
6	a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginni				
		Yes X No			
	If "Yes," list the years ▶,,,,,,,,,,,,,,				
١					
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attack the section 4942(a)(b) to all years listed, answer "No" and attack the section 4942(a)(b) to all years listed, answer "No" and attack the section 4942(a)(b) to all years listed, answer "No" and attack the section 4942(a)(b) to all years listed, answer "No" and attack the section 4942(a)(b) to all years listed, answer "No" and attack the section 4942(a)(b) to all years listed, answer "No" and attack the section 4942(a)(b) to all years listed, answer "No" and attack the section 4942(a)(b) to all years listed, answer "No" and attack the section 4942(a)(b) to all years listed, answer "No" and attack the section 4942(a)(b) to all years listed, answer "No" and attack the section 4942(a)(b) to all years listed, and the section 4942(a)(b) to all years listed, and the section 4942(a)(b) to all years listed the years		١,,		
	statement - see instructions.)  If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	N/A	2b		
2.	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
0		Yes X No			
	during the year?				
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to				
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule	-			
	Form 4720, to determine if the foundation had excess business holdings in 2014.)		3b		
48	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		Х
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpos				
	had not been removed from jeopardy before the first day of the tax year beginning in 2014?		4b		Х

Part VII-B	Statements Regarding Activities for Whice	ch F	orm 4720 May Be P	Required (cont	inued)			
5a During the	year did the foundation pay or incur any amount to:							
(1) Carry (	on propaganda, or otherwise attempt to influence legislation (se	ection -	4945(e))?		Yes X	No		
(2) Influen	ice the outcome of any specific public election (see section 495	55); or	to carry on, directly or indire	ctly,				
any vo	ter registration drive?				Yes X			
(3) Provid	e a grant to an individual for travel, study, or other similar purpo	oses?			Yes X	No		
(4) Provid	e a grant to an organization other than a charitable, etc., organiz	zation	described in section					
4945(	d)(4)(A)? (see instructions)				Yes X	No		
	e for any purpose other than religious, charitable, scientific, liter			or				
the pre	evention of cruelty to children or animals?				Yes X	No		
	ver is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify							
section 53.	4945 or in a current notice regarding disaster assistance (see ir	nstruc	tions)?		N/	<u>A</u> <u>t</u>	5b	
Organizatio	ns relying on a current notice regarding disaster assistance che	eck he	re		▶∟			
	er is "Yes" to question 5a(4), does the foundation claim exempti							
expenditure	e responsibility for the grant?		N	/A	Yes	No		
	ttach the statement required by Regulations section 53.4		• •					
	ndation, during the year, receive any funds, directly or indirectly							
	benefit contract?							
	ndation, during the year, pay premiums, directly or indirectly, or	n a pe	rsonal benefit contract?			[_6	3b	X
	6b, file Form 8870.							
7a At any time	during the tax year, was the foundation a party to a prohibited	tax sh	elter transaction?		Yes X	No _		
b If "Yes," did	the foundation receive any proceeds or have any net income at					.A	7b	
Part VIII	Information About Officers, Directors, True Paid Employees, and Contractors	uste	es, Foundation Ma	nagers, Higr		STAT	CMEN	г 16
List all office	cers, directors, trustees, foundation managers and th	heir c	ompensation.		SEE	SIAII	CMEN	1 10
		T		(c) Compensation	n (d) Conți	ributions to	(e) E	kpense
	(a) Name and address		(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	employee b	ributions to penefit plans eferred	ačcoui	nt, other vances
			to position	unter 0 /	Compe	ensation	unovi	
		-						
SEE STAT	PEMENT 15			163,972	. 33,	908.		0.
				-				
2 Compensa	tion of five highest-paid employees (other than those	e incl		enter "NONE."	(d) o .		( ) [	
(a) Nan	ne and address of each employee paid more than \$50,000		(b) Title, and average hours per week	(c) Compensation	employee b	ributions to benefit plans eferred	(e) E	kpense nt, other
.,			devoted to position	,	and u	ensation	allow	ances
MONICA N			ROGRAM DIREC					•
	EMIAN HWY, FREESTONE, CA 954		40.00	117,452	<u>· 29,</u>	602.		0.
BAILEY N			DEPUTY DIRECT			242		^
	EMIAN HWY, FREESTONE, CA 954		40.00	112,452	· 28,	342.		0.
MELANIE			PROGRAM DIREC		27	076		Λ
	•		40.00	110,602	• 41,	876.		0.
ROSE COL	HEN EMIAN HWY, FREESTONE, CA 954		RANT ADMINIS 32.00	62,720	1 5	808.		0.
±UJ DUHI	EMIAN RWI, FREESTOINE, CA 934	: / 4	34.00	04,140	· 15,	000.		<u> </u>
		-						
F	f other employees paid over \$50,000							0

Page 6

Form 990-PF (2014)	95-:	3607882 Page 7
Part VIII Information About Officers, Directors, Trustees, For Paid Employees, and Contractors (continued)	oundation Managers, Highly	Ţ.
3 Five highest-paid independent contractors for professional services. If non	e, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	<b>(b)</b> Type of service	(c) Compensation
NONE		
	<del></del>	
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities		<b>&gt;</b>   0
List the foundation's four largest direct charitable activities during the tax year. Include releva	unt statistical information such as the	
number of organizations and other beneficiaries served, conferences convened, research page		Expenses
1N/A		
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 on lines 1 and 2.	Amount
1N/A		
2		
All other program-related investments. See instructions.		

Total. Add lines 1 through 3

Form 990-PF (2014) CS FUND 95-3607882 Page 8

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	1,032,217
	Average of monthly cash balances	1b	434,479
	Fair market value of all other assets	1c	400,742
d	Total (add lines 1a, b, and c)	1d	1,867,438
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	0 .
3	Subtract line 2 from line 1d	3	1,867,438
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	28,012
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,839,426
6	Minimum investment return. Enter 5% of line 5	6	91,971
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	91,971
2a			
b	Income tax for 2014. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1,766
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	90,205
4	Recoveries of amounts treated as qualifying distributions	4	2,500
5	Add lines 3 and 4	5	92,705
6	Deduction from distributable amount (see instructions)	6	0 .
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	92,705
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		400 400
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	499,437
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:		
а	Suitability test (prior IRS approval required)	3a	
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	499,437
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	0 .
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	499,437
	<b>Note.</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies for	the section

Form 990-PF (2014) CS FUND 95-3607882 Page 9

## Part XIII Undistributed Income (see instructions)

			-	
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2013	2013	2014
1 Distributable amount for 2014 from Part XI,				
line 7				92,705.
2 Undistributed income, if any, as of the end of 2014:				
<b>a</b> Enter amount for 2013 only			0.	
<b>b</b> Total for prior years:				
, ,		0.		
Excess distributions carryover, if any, to 2014:				
<b>a</b> From 2009				
<b>b</b> From 2010				
<b>c</b> From 2011				
<b>d</b> From 2012				
eFrom 2013 1,796,452.				
f Total of lines 3a through e	1,796,452.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: ▶\$499,437.				
a Applied to 2013, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior			J.	
		0.		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	0.			92,705.
d Applied to 2014 distributable amount	406 722			92,705.
e Remaining amount distributed out of corpus	406,732.			0
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	2,203,184.			
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
<b>c</b> Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed		0.		
<b>d</b> Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				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 2009	-			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	2,203,184.			
10 Analysis of line 9:	_,200,1040			
<b>a</b> Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013 1,796,452. e Excess from 2014 406,732.				
e Excess from 2014 406,732.				Form 000 DE (0014)

423581 11-24-14

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

ROXANNE TURNAGE, 707-874-2942

469 BOHEMIAN HIGHWAY, FREESTONE, CA 954729579

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

SEE STATEMENT 18

c Any submission deadlines:

SEE STATEMENT

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

SEE STATEMENT 18

Form **990-PF** (2014)

423601 11-24-14

Form 990-PF (2014) CS FUND 95-3607882 Page 11

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year AS YOU SOW NONE PC NANOMATERIALSIN FOOD 1611 TELEGRAPH AVENUE, SUITE 1450 PROGRAM OAKLAND, CA 94612 40,000. CENTER FOR CONSTITUTIONAL RIGHTS NONE PC GENERAL SUPPORT 666 BROADWAY NEW YORK, NY 10012 115,000. COMING CLEAN, INC. NONE PC COMING CLEAN 41 OAKVIEW TERRACE NANOTECHNOLOGY PROJECT BOSTON, MA 02130 15,000. COUNCIL ON AGING NONE РC FREESTONE FUND - GRANT 730 BENNETT VALLEY ROAD SANTA ROSA, CA 95404 72. FOOD FOR THOUGHT NONE PC FREESTONE FUND - GRANT P.O. BOX 1608 FORESTVILLE, CA 95436 72. SEE CONTINUATION SHEET(S) 350,504. ➤ 3a Total **b** Approved for future payment NONE Total **▶** 3b

95-3607882 Page 12 CS FUND Form 990-PF (2014)

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

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income	Excluded by section 512, 513, or 514		(e)
Enter gross amounts unless otherwise indicated.	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion code	Amount	function income
a	5505				
C					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14		
4 Dividends and interest from securities			14	36,638.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
<b>b</b> Not debt-financed property			16	18,200.	
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	58,234.	
9 Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
C					
d					
е					
12 Subtotal. Add columns (b), (d), and (e)		0.		113,097.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	113,097.
(See worksheet in line 13 instructions to verify calculations.)				_	<u> </u>

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 foundation's exempt purposes (other than by providing funds for such purposes).	

CS FUND 95-3607882 Page 13

## Form 990-PF (2014) Part XVII In Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1	Did the	organization directly or indir	rectly engage in any o	of the followin	g with any other organization	on described in sect	tion 501(c) of		Yes	No
	the Cod	le (other than section 501(c)	)(3) organizations) or	in section 52	7, relating to political organ	nizations?				
a	Transfe	rs from the reporting founda	ation to a noncharitat	ole exempt or	ganization of:					
	(1) Cas	sh						1a(1)		X
	(2) Oth	ner assets						1a(2)		X
b		ansactions:								
	(1) Sal	les of assets to a noncharital	ble exempt organizat	ion				1b(1)		X
		rchases of assets from a nor								X
	(3) Re	ntal of facilities, equipment,	or other assets					1b(3)		X
	(4) Rei	imbursement arrangements						1b(4)		X
	( <b>5</b> ) L0	ans or loan guarantees						1b(5)		X
										X
	<ul> <li>c Sharing of facilities, equipment, mailing lists, other assets, or paid employees</li> <li>d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, or</li> </ul>								oto	
u		ces given by the reporting for		_	• •	-			eis,	
		(d) the value of the goods,			שני ונישט נוומוז וומו ווומואטני עמוני	ic in any transaction	Tor snaring arrangement, s	onow in		
(a)∟	ine no.	(b) Amount involved			exempt organization	(d) Description	n of transfers, transactions, and	sharing an	rangeme	nts
			, ,	N/A	1 3	( , = =====			g	
				,		+				
_										
2a		oundation directly or indirect					Г		v	No
		on 501(c) of the Code (other complete the following sch		(3)) or in sect	ION 52/?		L	Yes	A	_ NO
U	ii res,	(a) Name of org			(b) Type of organization	1	(c) Description of relations	hin		
		N/A	amzation		(b) Type of organization		(b) Description of relations	ШР		
		11/11								
		der penalties of perjury, I declare						v the IRS o	discuss t	this
Si		belief, it is true, correct, and con	nplete. Declaration of pre	parer (other that	n taxpayer) is based on all inforn	EXECU.	retisher	y the IRS ourn with the own below	e prepar	er tr )?
He	ere					DIRECT	ror [	X Yes		No
	S	ignature of officer or trustee			Date	Title				
		Print/Type preparer's na	nme	Preparer's s	gnature	Date	Check if PTIN			
_							self- employed			
Pa		PAUL VALAC						0118		
	epare		EFILING	SERVIC	ES CO		Firm's EIN ► 20-1	5970	91	
US	se Onl	-	1 8 60775	0m5==	m autm= 25					
		Firm's address ► 11					/010\	767	0.1	2.0
		F.P	INT, MI 4	0207-1	049		Phone no. (810)			
							F	orm <b>99</b> 0	ノーアド	(ZU 14)

CONTINUATION FOR 990-PF, PART IV 95-3607882 **PAGE** OF 5 1 Part IV Capital Gains and Losses for Tax on Investment Income (**b)** How acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold P - Purchase D - Donation (mó., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) VANGUARD FIXED INCOME SHORT TERM P 05/30/1404/24/15 <sub>1a</sub> 2.096 ADMIRAL VANGUARD FIXED INCOME SHORT TERM P 04/30/1404/24/15 3.436 ADMIRAL P 2.026 VANGUARD FIXED INCOME 06/30/1404/24/15 SHORT TERM ADMIRAL \_ VANGUARD FIXED INCOME SHORT TERM ADMIRAL P 03/31/1404/24/15 FIXED P 08/29/1404/24/15 13.039 VANGUARD INCOME SHORT TERM ADMIRAL 416.354 VANGUARD FIXED INCOME P 01/30/1404/24/15 SHORT TERM ADMIRA 18.439 BLACKROCK FLOATING RATE INCOME PORTFOLIO P 06/02/1404/28/15 BLACKROCK FLOATING RATE P INCOME PORTFOLIO 05/01/1404/28/15 1897.964 BLACKROCK FLOATING RATE P 04/10/1404/28/15 INCOME PORTFOLIO VANGUARD HIGH-YIELD CORP INVESTOR SHR P 10/31/1409/30/15 P VANGUARD HIGH-YIELD CORP INVESTOR SHR 02/27/15|09/30/15 827.815 VANGUARD HIGH-YIELD CORP INVESTOR SHR P 04/24/1509/30/15 m 922.377 VANGUARD HIGH-YIELD CORP INVESTOR SHR P 04/28/1509/30/15 P 11/28/1409/30/15 n 11.829 VANGUARD FIXED INCOME SHORT TERM -ADMIRAL <sub>0</sub> 12.433 VANGUARD FIXED INCOME SHORT TERM ADMIRAL P 10/31/1409/30/15 (g) Cost or other basis (h) Gain or (loss) (f) Depreciation allowed (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 0. 23. 23. a Ō. 37. 37. b 22. 22. С  $3\overline{04}$ 303. d 140. 140. 0. е 4,476. 9 4,467. 191. 194. 3  $\overline{-1}$  . 127. 128. h -247.19,682. 19,929. 40. 43. -3. 39.  $\overline{-3}$  . 36. -306. 4,694. 5,000. -341.5,230. 5,571. m <del>-1</del>. 127. 126. n 132. 133. -1.0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) but not less than "-0-") (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any 0. a 0. b С d 0 е 9 3. <del>-</del>1. h -247.-3. <del>-3</del>. -306. -341.m -1.n -1.

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05-01-14

2

3

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

2 Capital gain net income or (net capital loss) ...... { If gain, also enter in Part I, line 7 } If (loss), enter "-0-" in Part I, line 7

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

Part IV Capital Gains and Losses for Tax on Investment Income (**b)** How acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold P - Purchase D - Donation 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo., day, yr.) VANGUARD FIXED INCOME SHORT TERM 01/30/1509/30/15 ADMIRAL h 12.449 VANGUARD FIXED INCOME SHORT TERM P 09/30/1409/30/15 ADMIRAL P c 11.589 VANGUARD FIXED INCOME 02/27/15|09/30/15 SHORT TERM ADMIRAL VANGUARD FIXED INCOME SHORT TERM ADMIRAL P 12/31/1409/30/15 INCOME SHORT TERM P 07/29/1409/30/15 2274.522 VANGUARD FIXED ADMIR 1282.672 BLACKROCK FLOATING RATE PORTFOLIO P 03/31/1510/01/15 INCOME q 201.008 BLACKROCK FLOATING RATE INCOME PORTFOLIO P 04/10/1410/01/15 FD P 10.784 TEMPLETON GLBL BOND ADV CL TGBAX 06/16/1403/25/15 05/15/1403/25/15 10.864 TEMPLETON GLBL BOND FD ADV CL TGBAX P ADV CL TGBAX 2129.326 TEMPLETON GLBL BOND FD P 04/10/1403/25/15 P 399.042 TEMPLETON GLBL BOND FD ADV CL TGBAX 04/10/1404/29/15 439.754 TEMPLETON GLBL BOND FD ADV  $C\Gamma$ TGBAX P 04/10/1410/01/15 01/11/1312/12/14 m 300 GENERAL MILLS GIS D n 100 JONES LANG LASALLE INC JLL 06/20/1312/12/14 D 0 1300 NORFOLK SOUTHERN CORP NSC D 05/31/12|12/12/14 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 131 132. -1. a Ō. 133. 133. b  $\overline{-1}$  . 123. 124. С 131 131. 0. d 24,224. 24,428. -204.е 12,968. 13,250. -282**.** 2,032.  $2, \overline{111}$ . -79**.** 133. 143. -10. h <u>-9.</u> 134. 143. 26,233. 27,937. -1,704.5,000. 5,235. -235. 5,770. <del>-770.</del> 5,000. 12,200. 15,637. 3,437. m 8,926. 5,427. 14,353. n 132,984. 86,164. 46,820. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) but not less than "-0-") (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any -1. a Ō. b С Ō. d -204.е -282. -79**.**  $\overline{-10}$  . h -9. -1,704.-235. -770.3,437. m 5,427. n 46,820. 2 Capital gain net income or (net capital loss)  $\dots$  { If gain, also enter in Part I, line 7 } Part I, line 7 2 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8

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3

Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold P - Purchase D - Donation 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo., day, yr.) 1a 404 OLD DOMINION FGHT LINES INC ODFL 11/11/13/12/12/14 D 11/08/13|12/12/14 b 1096 OLD DOMINION FGHT LINES INC ODFL D c 350 STANLEY BLACK & DECKER INC SWK 06/28/1212/12/14 D d 11.387 VANGUARD INDEX FDS 500 ADMIRAL VFIAX P 09/19/14|12/02/14 772.476 VANGUARD INDEX FDS 500 ADMIRAL VFIAX P 07/29/1412/02/14 9.021 VANGUARD INDEX FDS 500 ADMIRAL VFIAX P 12/17/1409/30/15 q 442.599 VANGUARD INDEX FDS 500 ADMIRAL P 07/29/1409/30/15 P 11/06/1304/24/15 VANGUARD ADMIRAL REIT INDEX FUND VGSLX 11/06/1304/27/15 17.101 VANGUARD ADMIRAL REIT INDEX FUND VGSLX P TWITTER INC TWTR P 04/07/1102/13/15 P 54 TWITTER INC TWTR 02/04/1102/13/15 63 SOLARCITY CORPORATION SCTY P 08/10/0706/26/15 08/10/0708/05/15 SOLARCITY CORPORATION SCTY P n 0 KIT DIGITAL INC KITD P 02/04/1402/05/15 0 0 CIBER INC. CBROLD P 04/26/1404/27/15 (g) Cost or other basis (h) Gain or (loss) (f) Depreciation allowed (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 19,432. 31,343 11,911. a 32,863. 85,030. 52,167. b 32,761 21,957. 10,804. С 2,111. 68. 2,179. d 147,821. 140,529. 7,292. е 1,598. 1,674. -76**.** 78,402. -2,116. 80,518. 2,486. 3,000. 514. h <u>342.</u> 2,000. 1,658. 340. 87. 253. 2,624. 540. 2,084. 3,363. 3,514. 151. 4,673. 4,865. 192. m <del>3.</del> 3. n 4. 4. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) but not less than "-0-") (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any 11,911. а 32,863. b 10,804. С 68. d 7,292. е -76. -2,116.514. h 342. 253. 2,084. 3,363. 4,673. m n 4. 2 Capital gain net income or (net capital loss)  $\dots$  { If gain, also enter in Part I, line 7 } Part I, line 7 2 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c).

423591 05-01-14

If (loss), enter "-0-" in Part I, line 8

16210603 790376 F05

3

Part IV   Capital Gains and Losses for Tax on Investment Income								
(a) List and describe the kind(s) of property sol 2-story brick warehouse; or common stock, 2		( <b>b)</b> How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)				
1a MFO EQUITY FUND (JOINT VENTURE		P						
b MFO EQUITY FUND (JOINT VENTURE	)	P						
c MFO WESTFIELD FUND A (JOINT VE	NTURE)	P						
d MFO WESTFIELD FUND A (JOINT VE	NTURE)	P						
e MFO TOWLE FUND (JOINT VENTURE)		P						
MFO TOWLE FUND (JOINT VENTURE)								
g WAM INTERNATIONAL EQUITY COMMON TR FUND P								
h WAM INTERNATIONAL EQUITY COMMO		P						
WAM INTERNATIONAL EQUITY COMMO		P						
j DRAPER FISHER JURVETSON GROWTH								
k CROSSLINK VENTURES V FROM SCH		P						
	OINT VENTURE)	P						
m MFO EQUITY FUND - RECOVERY OF		EX P						
n WAM INTL EQUITY FUND - RECOVER								
0 MFO TOWLE FUND - RECOVERY OF D								
(e) Gross sales price (f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		) Gain or (loss) llus (f) minus (g)					
a 17,545.	17,465.			80.				
b 87,171.	67,536.			19,635.				
c 15,222.	16,751.			-1,529.				
d 27,397.	14,473.			12,924.				
e 5,459.	5,607.			-148.				
f 20,385.	12,040.			8,345.				
g 186.	198.			-12.				
h 33.	31.			2.				
i 30.				30.				
j 451.				451.				
k	2,569.			-2,569.				
2,058.	2,212.			-154.				
m	86,817.			-86,817.				
n	635.			-635.				
0	8,248.			-8,248.				
Complete only for assets showing gain in column (h) and owned by	the foundation on 12/31/69		ses (from col. (h))	1 (12)				
(i) F.M.V. as of 12/31/69 (j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		of col. (h) gain over ot less than "-0-")					
a				80.				
b				19,635.				
С				-1,529.				
d				12,924.				
e				-148.				
f				8,345.				
g				-12.				
h				2.				
i				30.				
j				451.				
k				-2,569.				
				-154.				
m				-86,817.				
n				-635.				
0				-8,248.				
2 Capital gain net income or (net capital loss) { If gain, also enter "-(	in Part I, line 7	2						
3 Net short-term capital gain or (loss) as defined in sections 1222(5) ar If gain, also enter in Part I, line 8, column (c).	` \							

CONTINUATION FOR 990-PF, PART IV 95-3607882 PAGE 5 OF 5 Part IV Capital Gains and Losses for Tax on Investment Income (**b)** How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mó., day, yr.) 18 MFO WESTFIELD FUND A - RECOVERY OF DISTRIBUTIONS P b TWC-YAHOO TUMBLER PJT TITAN DOUBLE REPORTED P c CAPITAL GAINS DIVIDENDS е m n 0 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 7,192. -7,192.a 357. 0. 357. 598. 598. h m n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any -7,192.а 0. b <u>598.</u> С е m

423591 05-01-14

n 0

2

3

N/A

58,234.

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

 $2 \quad \text{Capital gain net income or (net capital loss)} \quad \dots \quad \left\{ \begin{array}{l} \text{If gain, also enter in Part I, line 7} \\ \text{If (loss), enter "-0-" in Part I, line 7} \end{array} \right\}$ 

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

CS FUND 95-3607882

Part XV Supplementary Information				
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	00114115441011	
FRIENDS OF THE EARTH 1100 15TH ST NW 11TH FLOOR	NONE	₽C	EMERGING TECHNOLOGIES	
WASHINGTON , DC 20005				70,000.
GOVERNMENT ACCOUNTABILITY PROJECT 1612 K ST., NW WASHINGTON, DC 20006	NONE	PC	GENERAL SUPPORT MATCH	75,000.
GRATON DAY LABOR CENTER 2981 BOWEN ST GRATON, CA 95444	NONE	PC	FREESTONE FUND - GRANT	72.
LIVING ROOM PO BOX 14056 SANTA ROSA, CA 95402	NONE	PC	FREESTONE FUND - GRANT	72.
OCCIDENTAL AREA HEALTH CENTER PO BOX 100 OCCIDENTAL, CA 95465	NONE	PC	FREESTONE FUND - GRANT	72.
PARTNERSHIP FOR CIVIL JUSTICE FUND 617 FLORIDA AVE NW WASHINGTON, DC 20001	NONE	PC	GENERAL SUPPORT	20,000.
REBUILDING TOGETHER SEBASTOPOL P.O. BOX 21 SEBASTOPOL, CA 95473	NONE	PC	FREESTONE FUND - GRANT	72.
SYRACUSE UNIVERSITY OFFICE OF SPONSORED PROGRAMS, BROWN HALL SYRACUSE, NY 13244	NONE	PC	TRAC: FOIAPROJECT.ORG	15,000.
TWIN HILLS FIREFIGHTERS 4500 HESSEL ROAD SEBASTOPOL, CA 95472	NONE	PC	FREESTONE FUND - GRANT	72.
Total from continuation sheets				180,360.

#### 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** 

CS FUND 95-3607882

Organiza	Organization type (check 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						
		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							
	, ,	covered by the <b>General Rule</b> or a <b>Special Rule</b> . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.						
General	Rule							
	•	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.						
Special I	Rules							
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% 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, II, and III.							
	year, contributions is checked, enter h purpose. Do not co	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., implete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year						

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet 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) (2014)

Name of organization Employer identification number

CS FUND 95-3607882

Parti	Contributors (see instructions). Use duplicate copies of Part I if addition	ai space is needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	MARYANNE MOTT  469 BOHEMIAN HWY  FREESTONE, CA 95472	\$15,710.	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	
2	MARYANNE MOTT  469 BOHEMIAN HWY  FREESTONE, CA 95472	\$\$	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	
3	MARYANNE MOTT  469 BOHEMIAN HWY  FREESTONE, CA 95472	\$133,211 <b>.</b>	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	
4	MARYANNE MOTT  469 BOHEMIAN HWY  FREESTONE, CA 95472	\$31,736.	Person Payroll Noncash  (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
5	MARYANNE MOTT  469 BOHEMIAN HWY  FREESTONE, CA 95472	\$86,096.	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	
6	MARYANNE MOTT  469 BOHEMIAN HWY  FREESTONE CA 95472	\$33,337.	Person Payroll Noncash  (Complete Part II for	

Name of organization

CS FUND

Employer identification number

95-3607882

I alti	Continuators (see instructions). Ose duplicate copies of Part I if a	dullional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	MARYANNE MOTT  469 BOHEMIAN HWY  FREESTONE, CA 95472	\$\$	Person X Payroll
(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 Noncash (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 Noncash (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.)

Name of organization Employer identification number

CS FUND

95-3607882

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	additio	onal space is needed.	
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
	300 SHS GENERAL MILLS			
1	·			
		\$_	15,710.	12/11/14
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
	100 SHS JONES LANG LASALLE INC			
2		\$_	14,410.	12/11/14
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
	1300 SHS NORFOLK SOUTHERN CORP			
3	· ———			
		\$_	133,211.	12/11/14
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
4	404 SHS OLD DOMINION FGHT LINES INC			
		\$_	31,736.	_12/11/14_
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
5	1096 SHS OLD DOMINION FGHT LINES INC			
		\$_	86,096.	12/11/14
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
6	350 SHS STANLEY BLACK & DECKER INC			
		\$_	33,337.	12/11/14

Name of orga	nization		Employer identification number		
CS FUN	D		95-3607882		
Part III	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete completing Part III, enter the total of exclusively religiou.  Use duplicate copies of Part III if addition	s, charitable, etc., contributions of \$1,000 c	ed in section 501(c)(7), (8), or (10) that total more than \$1,000 for lowing line entry. For organizations or less for the year. (Enter this info. once.)		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gi	gift		
-	Transferee's name, address, a	nd 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		
	Transferee's name, address, a	(e) Transfer of gi	gift  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 gir	gift		
-	Transferee's name, address, a	nd 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 gi	gift		
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
-					

FORM 990-PF INTERE	ST ON SAVIN	GS AND TEMPOR	ARY CASH IN	IVESTMENTS	STATEMENT 1
SOURCE		(A) REVENUE PER BOOK		(B) IVESTMENT ICOME	(C) ADJUSTED NET INCOME
MERRILL LYNCH GOVERS			15. 10.	15. 10.	
TOTAL TO PART I, LI	NE 3		25.	25.	
FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECUR	ITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVES' MENT INCO	
DRAPER FISHER JURVETSON GROWTH FUND FROM SCHEDULE	23.	0.	23.	2:	3.
MFO ALTERNATE ASSET MUTUAL FUNDS	0.	0.	0.		0.
MFO CORPORATE BOND MUTUAL FUNDS MFO D&D SMID CAP VALUE FUND JOINT	8,912.	13.	8,899.	8,89	9.
VENTURE) MFO EQUITY FUND	65.	0.	65.	6	5.
(JOINT VENTURE) MFO FOREIGN EQUITY	7,130.	0.	7,130.	7,13	0.
FUNDS MFO STOCK MUTUAL	8,835.	568.	8,267.	8,26	7.
FUNDS	9,168.	0.	9,168.	9,16	8.
MFO TOWLE FUND (JOINT VENTURE)	576.	0.	576.	57	6.
MFO WESTFIELD FUND A (JOINT VENTURE)	1,189.	17.	1,172.	1,17	2.
TOBIAS WHITE & CO NOMINEE WAM INTERNATIONAL EQUITY COMMON TR	665.	0.	665.	66	5.
FUND	673.	0.	673.	67	3.
TO PART I, LINE 4	37,236.	598.	36,638.	36,63	<u> </u>

FORM 990-PF	RENTAL IN	COME		STATEMENT 3
KIND AND LOCATION OF PROPERTY	ī.		ACTIVITY NUMBER	GROSS RENTAL INCOME
PASTURE RENT 489 BOHEMIAN HWY	_		1 2	200. 18,000.
TOTAL TO FORM 990-PF, PART I,	LINE 5A			18,200.
FORM 990-PF	LEGAL	FEES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
LEGAL	6,852.	0.		6,852.
TO FM 990-PF, PG 1, LN 16A =	6,852.	0.		6,852
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
BOOKKEEPING & ACCOUNTING PAYROLL SERVICES ACCOUNTING MANAGEMENT FEE	11,800. 1,835. 3,500.	0. 12. 0.		11,800 1,823 3,500
TO FORM 990-PF, PG 1, LN 16B	17,135.	12.		17,123.
FORM 990-PF (	OTHER PROFES	SIONAL FEES		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
PENSION PLAN ADMINISTRATION INVESTMENT MANAGEMENT FEE	1,619. 17,500.			1,608
TO FORM 990-PF, PG 1, LN 16C	19,119.	17,511.		1,608
=				

FORM 990-PF	TAX	ES	STATEMENT 7		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLI PURPOSES	
REAL ESTATE & PAYROLL TAXES FOREIGN TAX WITHHELD MFO EQUITY FUND (JOINT	10,702. 744.	2,140. 744.		6,922	
VENTURE) FOREIGN TAXES WITHHELD	29.	29.		0	
TO FORM 990-PF, PG 1, LN 18 =	11,475.	2,913.		6,922	
FORM 990-PF	OTHER E	XPENSES	S'	PATEMENT (	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLI PURPOSES	
OFFICE SUPPLIES	2,189.	0.		2,189	
INSURANCE	1,836.	0.		1,836	
TELEPHONE & COMMUNICATIONS	78.	0.		78	
POSTAGE & DELIVERY	-73.	0.		-73	
DUES & MEMBERSHIPS	802.	0.		802	
BANK CHARGES	86.	0.		86	
ANNUAL CREDIT CARD CHARGES	69.	0.		69	
STATE FILING FEES ASSETS ACQUIRED IN FURTHERING CHARITABLE	297.	0.		297	
PURPOSE	1,068.	0.		1,068	
COMPUTER SUPPLIES & EXPENSES	-1,434.	0.		-1,434	
FUNDERS OUTREACH CROSSLINK VENTURES V	185.	0.		185	
INVESTMENT INT. EXP. FROM SCH K-1 CROSSLINK VENTURES V	17.	17.		0	
PORTFOLIO DEDUCTIONS FROM					
SCH K-1 DRAPER FISHER JURVETSON GROWTH FUND PORTFOLIO	807.	807.		0	
DEDUCTIONS FROM SCHEDULE K-1	1,787.	1,787.		0	
DRAPER FISHER JURVETSON					
DRAPER FISHER JURVETSON GROWTH FUND NON-DEDUCTIBLE EXP FROM SCHEDULE K-1 MFO D&D SMID CAP VALUE FUND PORTFOLIO DEDUCTIONS (JOINT	6.	6.		0	

CS FUND				95-3607	882
MFO TOWLE FUND PORTFOLIO DEDUCTIONS (JOINT VENTURE) MFO WESTFIELD FUND A	525.	525.			0.
PORTFOLIO DEDUCTIONS (JOINT VENTURE)	391.	391.			0.
WAM INTERNATIONAL EQUITY COMMON TR FUND	57.	57.			0.
TO FORM 990-PF, PG 1, LN 23	8,699.	3,596.		5,1	03.
FORM 990-PF OTHER INCREASES	IN NET ASSETS	OR FUND BAL	ANCES	STATEMENT	9
DESCRIPTION				AMOUNT	
PRIOR YEAR GRANT REPORTED AS A PAYABLE VS AN EXPENSE					00.
TOTAL TO FORM 990-PF, PART III, LINE 3				2,5	00.
FORM 990-PF OTHER DECREASE	S IN NET ASSETS	OR FUND BAI	LANCES	STATEMENT	10
DESCRIPTION				AMOUNT	
EXCESS OF FMV OVER DONOR'S BA	113,655.				
TOTAL TO FORM 990-PF, PART II	I, LINE 5			113,6	55.
FORM 990-PF	CORPORATE ST	OCK		STATEMENT	11
DESCRIPTION		воок	VALUE	FAIR MARKE VALUE	т
3942.206 TEMPLETON INSTITUTION 372.751 VANGUARD ADMIRAL EURO			89,170.	80,0	27.
FUND 1849.6 VANGUARD ADMIRAL EMERG			27,071.	24,2	88.
INDEX FUND	ING MARKEIS SIO	CK	65,763.	53,8	05.
5241.2530 DREYFUS TOTAL EMERG 828.8481 WAM INTERNATIONAL EQ			64,728.	53,9	
FND			0.	8,0	
12712.148 MFO EQUITY FUND 19595.1 MFO - D&D SMID CAP VA	T.TTE		0. 19,500.	93,4 20,7	
3731.401 MFO TOWLE FUND	non		0.	20,7	
275.7897667 MFO WESTFIELD FUN	D A		0.	21,6	
.016 MFO NORTHPOINTE FUND A -:			44=	-	
VALUATION: FMV			117.	1	17.

95-3607882

CS FUND			95-3607882
65 TWITTER INC		803.	1,850.
TOTAL TO FORM 990-PF, PART II, LINE	10B	267,152.	378,159.
FORM 990-PF CORPO	ORATE BONDS		STATEMENT 12
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
5032.242 VANGUARD ADMIRAL SHORT-TERM GRADE BOND 5296.209 VANGUARD ADMIRAL HIGH-YIELD VALUATION: EMV		54,036. 31,926.	53,543. 30,718.
1176.086 VANGUARD INDEX FDS 500 ADMII 2237.075 VANGUARD INDEX FDS SMCP INDEX			225,891. 122,346.
TOTAL TO FORM 990-PF, PART II, LINE 10C		421,672.	432,498.
FORM 990-PF OTHER	INVESTMENTS		STATEMENT 13
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
3329.599 BLACKROCK FLOATING RATE INC PORTFOLIO CL	FMV	34,961.	33,596.
351.506 VANGUARD ADMIRAL REIT INDEX FUND 2967.381 STEELPATH MLP FUNDS SELECT	FMV FMV	29,565.	39,798.
40 CL A 1387.302 TEMPLETON GLOBAL BOND FD 85000 CROSSLINK VENTURES V	FMV	35,807. 18,200. 22,378.	30,119. 16,259. 20,577.
	FMV		
80000 DRAPER FISHER JURVETSON GROWTH FUND 3968 BALTER LONG/SHORT FOILTY	FMV FMV	51,592.	100,127.
		·	•

366,623.

317,503.

TOTAL TO FORM 990-PF, PART II, LINE 13

FORM 990-PF DEPRECIATION OF ASSE	TTS NOT HELD FOR	INVESTMENT	STATE	EMENT 14
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	воог	VALUE
469 BOHEMIAN HWY	271,304.	271,304.	,	0.
IMPROVEMENTS - 469 BOHEMIAN HWY EQUIPMENT COMPUTER EQUIPMENT FURNITURE & FIXTURES FURNITURE & FIXTURES BUILDING SOLAR PANELS LANDSCAPING FURNITURE & FIXTURES	81,701. 46,984. 24,290. 28,753. 1,670. 408,404. 26,609. 23,062. 18,155.	73,588. 28,472. 17,817. 28,159. 1,670. 0. 0.		8,113. 18,512. 6,473. 594. 0. 408,404. 26,609. 23,062. 18,155.
TOTAL TO FM 990-PF, PART II, LN 14	930,932. ————————————————————————————————————	421,010.	= <del></del>	509,922.
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- BE		EXPENSE ACCOUNT
SEE ALSO FEDERAL STMTS 16 & 17 FOR COMPENSATION EXPLANATION AND RECONCILIATION	OR CA-199 STMT	7	0.	0.
FREESTONE, CA 95472				
MARYANNE MOTT 469 BOHEMIAN HWY FREESTONE, CA 95472	TRUSTEE 4.00	0.	0.	0.
MICHAEL WARSH 469 BOHEMIAN HWY	TRUSTEE 2.00	3,375.	0.	
FREESTONE, CA 95472				0.
CORINNE MEADOWS-EFRAM 469 BOHEMIAN HWY FREESTONE, CA 95472	VICE-PRESIDENT	/TRUSTEE 9,685.	0.	0.

CS FUND			95-	-3607882
TERESA ROBINSON 469 BOHEMIAN HWY FREESTONE, CA 95472	SECRETARY/TRUSTEE 2.00	3,375.	0.	0.
KAU'I KELIIPIO 469 BOHEMIAN HWY FREESTONE, CA 95472	TREASURER/TRUSTEE 2.00	3,375.	0.	0.
ROXANNE TURNAGE 469 BOHEMIAN HWY FREESTONE, CA 95472	EXECUTIVE DIRECTOR 20.00 1	34,537.	33,908.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII 1	.63,972.	33,908.	0.

FORM 990-PF

OFFICERS, DIRECTORS, TRUSTEES AND FOUNDATION MANAGERS COMPENSATION EXPLANATION PART VIII, LINE 1

STATEMENT

16

PERSON'S NAME

EXPENSES SHARED WITH ANOTHER FOUNDATION

COMPENSATION EXPLANATION

PAGE 1, LINE 13 HAS BEEN REDUCED BY THE FOLLOWING REIMBURSEMENT FROM ANOTHER FOUNDATION. SEE ALSO STMT 17 FOR RECONCILIATION OF PAGE 1, LINE 13 TO COMPENSATION SHOWN ON PART VIII.

EXECUTIVE DIRECTOR BOARD TRUSTEES

\$118,465 25,559

\$144,024

#### GENERAL EXPLANATION

STATEMENT 17

#### FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

FORM 990PF, PAGE 1, PART I, LINE 13, COLUMN A - ADJUSTMENT OF OFFICER/TRU

#### **EXPLANATION:**

THIS FOUNDATION SHARES FACILITIES AND PERSONNEL WITH ANOTHER PRIVATE FOUNDATION. ALL COMPENSATION OF PERSONNEL IS REPORTED UNDER THE NAME AND FEDERAL IDENTIFICATION NUMBER OF THIS FOUNDATION. ACCORDINGLY, OFFICER/TRUSTEE COMPENSATION IS REPORTED IN FULL ON PART VIII BUT IS REPORTED ON PART I NET OF THE REIMBURSEMENT AS FOLLOWS:

TOTAL FROM PART VIII REIMBURSEMENT FROM FOUNDATION SHARING EXPENSES	163,972 -144,024
NET TO PART I, LINE 13, COLUMN A	19,948

SIMILARLY, COMPENSATION OF ALL OTHER PERSONNEL IS REPORTED ON PART I NET OF THE REIMBURSEMENT AS FOLLOWS:

TOTAL COMPENSATION OF OTHER EMPLOYEES REIMBURSEMENT FROM FOUNDATION SHARING	457,059 -383,483
NET TO PART I, LINE 14, COLUMN A	73,576

#### GENERAL EXPLANATION

STATEMENT 18

FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

PART XV, LINES 2A THROUGH 2D - GRANT APPLICATION SUBMISSION INFORMATION EXPLANATION:

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED:

ROXANNE TURNAGE 469 BOHEMIAN HIGHWAY FREESTONE, CA 95472 TELEPHONE NUMBER 707-874-2942

#### FORM AND CONTENT OF APPLICATIONS

REQUESTS FOR SUPPORT SHOULD BE MADE BY LETTER OF INQUIRY (LOI). LOIS SHOULD BE ADDRESSED TO INQUIRIES@CSFUND.ORG OR 469 BOHEMIAN HIGHWAY, FREESTONE CA 95472. THEY WILL BE ACKNOWLEDGED AS SOON AS POSSIBLE. LOIS SHOULD BE NO MORE THAN THREE PAGES IN LENGTH AND CONTAIN THE FOLLOWING INFORMATION:

A CONTACT PERSON'S NAME, TITLE, MAILING ADDRESS, TELEPHONE, AND E-MAIL ADDRESS

BASIC INFORMATION ABOUT THE ORGANIZATION, INCLUDING A BRIEF MISSION STATEMENT AND AN OVERVIEW OF CURRENT ACTIVITIES

A DESCRIPTION OF THE ORGANIZATION'S APPROACH TO THE SPECIFIC PROBLEM BEING ADDRESSED AND PLANNED ACTIVITIES FOR THE FOLLOWING YEAR

A LINE ITEM BUDGET OF PROJECTED EXPENSES FOR THE ORGANIZATION AND PROJECT, IF APPLICABLE

A LIST OF SECURED AND POTENTIAL FUNDING SOURCES (GRANTS RECEIVED, PROPOSALS PENDING, PLANNED SUBMISSIONS, EARNED INCOME, ETC.)

PLEASE DO NOT INCLUDE BROCHURES, REPORTS, NEWS CLIPPINGS, CDS, DVDS, OR OTHER MATERIALS WITH LOIS. PLASTIC FOLDERS, BINDERS OR OTHER PRESENTATION MATERIALS ARE NOT NECESSARY. DUE TO THE HIGH NUMBER OF REQUESTS RECEIVED, WE ARE NOT ABLE TO TRANSLATE AND REVIEW LOIS SUBMITTED IN LANGUAGES OTHER THAN ENGLISH AND SPANISH.

KINDLY REFRAIN FROM SENDING A FULL PROPOSAL UNLESS INVITED TO DO SO. IF YOUR ORGANIZATION OR PROJECT IS FOUND TO FALL WITHIN THE FOUNDATION'S FUNDING PRIORITIES, A FULL PROPOSAL WILL BE INVITED. THE FOUNDATION PROVIDES GENERAL SUPPORT AND PROJECT SPECIFIC GRANTS. APPLICANT ORGANIZATIONS MUST BE CLASSIFIED AS A 501(C)(3) BY THE US INTERNAL

CS FUND 95-3607882

REVENUE SERVICE. FOREIGN APPLICANTS SHOULD NOTE THAT THE FOUNDATION MAKES A VERY LIMITED NUMBER OF DIRECT GRANTS ABROAD (I.E., WITHOUT FISCAL SPONSORSHIP BY A US-BASED ORGANIZATION). THE FOUNDATION DOES NOT PROVIDE SUPPORT TO INDIVIDUALS, ENDOWMENTS, BOOKS, FILMS, OR DIRECT LOBBYING ACTIVITIES.

#### ANY SUBMISSION DEADLINES

THERE ARE NO DEADLINES FOR LETTERS OF INQUIRY THEY ARE ACCEPTED THROUGHOUT THE YEAR. PROPOSALS MUST BE RECEIVED BY THE FIRST MONDAY IN JANUARY FOR CONSIDERATION DURING THE SPRING GRANTMAKING CYCLE OR THE FIRST MONDAY IN AUGUST FOR CONSIDERATION DURING THE FALL GRANTMAKING CYCLE. FUNDING DECISIONS ARE MADE DURING BOARD MEETINGS GENERALLY HELD IN APRIL AND DECEMBER, RESPECTIVELY.

#### RESTRICTIONS AND LIMITATIONS ON AWARDS

CS FUND IS CURRENTLY GRANTING IN THREE CATEGORIES, EACH ONE WITH A SPECIFIC EMPHASIS: FOOD SOVEREIGNTY RIGHTS AND GOVERNANCE EMERGING TECHNOLOGIES

BOARD INITIATED GRANTS: OCCASIONALLY THE FOUNDATION MAY INTITIATE SUPPORT FOR PROJECTS THAT FALL OUTSIDE OF THE ESTABLISHED GUIDELINES.

THE FOUNDATION IS CURRENTLY FUNDING IN THE FOLLOWING CATEGORIES:

#### FOOD SOVEREIGNTY

GRANTMAKING IN THIS AREA IS FOCUSED ON PRESERVING NATIVE AND HEIRLOOM SEEDS, BUILDING HEALTHY AND FERTILE SOILS, AND PROTECTING AND RESTORING THE POPULATIONS AND DIVERSITY OF NATIVE POLLINATORS. THIS PROGRAM MAKES MOST OF ITS GRANTS TO ORGANIZATIONS IN THE GLOBAL SOUTH PROMOTING TRADITIONAL AGRICULTURAL KNOWLEDGE AND AGROECOLOGICAL PRACTICES.

#### RIGHTS AND GOVERNANCE

GRANTMAKING IN THIS AREA IS FOCUSED ON PROTECTING THE RIGHT TO DISSENT; MAKING THE FEDERAL GOVERNMENT MORE OPEN, EFFECTIVE, AND ACCOUNTABLE; ENSURING THAT US NATIONAL SECURITY POLICIES RESPECT THE RULE OF LAW; BUILDING A PROGRESSIVE MOVEMENT TO COUNTER CONSERVATIVE AND CORPORATE INFLUENCE IN THE COURTS; AND MAKING THE RULES OF INTERNATIONAL TRADE MORE DEMOCRATIC, JUST, AND SUSTAINABLE.

#### EMERGING TECHNOLOGIES

GRANTMAKING IN THIS AREA IS FOCUSED ON PROMOTING PRECAUTIONARY ASSESSMENT, REGULATION AND OVERSIGHT OF NANOTECHNOLOGY, SYNTHETIC BIOLOGY, AND GEOENGINEERING.

#### 2014 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1 990-PF

Asset No.	Description	Date Acquired	Method	Life	C o l	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	469 BOHEMIAN HWY	10/31/85	SL	15.00	1	L6	271,304.				271,304.	271,304.		0.	271,304.
2	IMPROVEMENTS - 469 BOHEMIAN HWY	11/23/94	SL	10.00	1	L6	81,701.				81,701.	73,588.		0.	73,588.
3	EQUIPMENT	VARIOUS	SL	5.00	1	L6	46,984.				46,984.	28,472.		0.	28,472.
4	COMPUTER EQUIPMENT	VARIOUS	SL	5.00	1	L6	24,290.				24,290.	17,817.		0.	17,817.
5	FURNITURE & FIXTURES	VARIOUS	SL	5.00	1	L6	28,753.				28,753.	28,159.		0.	28,159.
6	FURNITURE & FIXTURES	03/15/91	SL	5.00	1	L 6	1,670.				1,670.	1,670.		0.	1,670.
7	BUILDING	09/01/09	SL	25.00	1	L6	408,404.				408,404.			0.	
8	SOLAR PANELS	09/01/09	SL	7.00	1	L6	26,609.				26,609.			0.	
9	LANDSCAPING	09/01/09	SL	15.00	1	L 6	23,062.				23,062.			0.	
10	FURNITURE & FIXTURES	09/01/09	SL	7.00	1	L6	18,155.				18,155.			0.	
	* TOTAL 990-PF PG 1 DEPR						930,932.				930,932.	421,010.		0.	421,010.

### Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 ·

OMB No. 1545-1709

	u are filing for an <b>Automatic 3-Month Extension, comple</b> u are filing for an <b>Additional (Not Automatic) 3-Month Ex</b>					▶ ᠘	<u>.                                     </u>
•	complete Part II unless you have already been granted				rm 8868.		
	onic filing (e-file). You can electronically file Form 8868 if					for a corporat	ion
require	d to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically f	ile Form 88	368 to rec	quest an exter	nsion
of time	to file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for	Transfers A	Associate	d With Certai	n
Persor	al Benefit Contracts, which must be sent to the IRS in par	er format	(see instructions). For more details	on the elec	tronic filir	ng of this form	٦,
visit w	ww.irs.gov/efile and click on e-file for Charities & Nonprofits						
Part	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies nee	eded).			
A corp	oration required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and	complete		_	_
Part I	,					▶ ∟	
	er corporations (including 1120-C filers), partnerships, REN ncome tax returns.	IICs, and t	rusts must use Form 7004 to reques	st an exten	sion of tir	ne	
	T			1		ifying numbe	
Type o	Name of exempt organization or other filer, see instru	ictions.		Employer	identifica	ation number	(EIN) or
print	CC FUND				05.3	(07000	
File by th	CS FUND				95-3	607882	
due date filing you		ee instruc	tions.	Social se	curity nur	nber (SSN)	
eturn. S	ee 409 BOHDMIAN HIGHWAI						
nstruction	only, town or poor office, state, and zin code. For a re-	oreign add	Iress, see instructions.				
	FREESTONE, CA 95472-9579						
						Г	0 4
Enter 1	he Return code for the return that this application is for (file	e a separa	te application for each return)			Ц	J   <del>4</del>
A 1:	aki a u	Datum	I A				
Applic	ation	Return	Application Is For				eturn
s For	000 or Form 000 F7	Code					Code
	90 or Form 990-EZ	01	Form 990-T (corporation)				07
	90-BL		Form 1041-A				08
	.720 (individual) 190-PF	03	Form 4720 (other than individual) Form 5227				10
	90-FF 90-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11
	90-T (trust other than above)	06	Form 8870				12
OIIII	ROXANNE TURNAG		1 01111 807 0				12
■ The	books are in the care of <b>A69 BOHEMIAN H</b>		Y - FREESTONE CA	95472			
	ephone No. (707) 874-2942		Fax No. ▶	33172			
	e organization does not have an office or place of busines	s in the l lr				- ⊾ □	
	is is for a Group Return, enter the organization's four digit						 rk this
box D		7					
	request an automatic 3-month (6 months for a corporation				010 1110 07	(101101011101101	
-	· 4 <b>-</b> · ·	•	tion return for the organization name		The exter	nsion	
·	s for the organization's return for:						
	calendar year or						
ĺ	► X tax year beginning NOV 1, 2014	, an	d ending OCT 31, 2015				
	, , , , , , , , , , , , , , , , , , , ,		<u> </u>		_		
2	f the tax year entered in line 1 is for less than 12 months, o	heck reas	on: Initial return	Final retur	n		
	Change in accounting period						
За	f this application is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069,	enter the tentative tax, less any				
1	nonrefundable credits. See instructions.			За	\$	1,8	300.
-	f this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an	y refundable credits and				
	estimated tax payments made. Include any prior year overp	oayment a	llowed as a credit.	3b	\$	18,3	306.
	Balance due. Subtract line 3b from line 3a. Include your pa						
	by using EFTPS (Electronic Federal Tax Payment System).	See instru	ctions.	3c	\$		0.
Cautio	n. If you are going to make an electronic funds withdrawal	(direct de	bit) with this Form 8868, see Form 8	3453-EO ar	nd Form 8	879-EO for pa	ayment
instruc	tions.						

TAXABLE YEAR **2014** 

## California Exempt Organization Annual Information Return

428941 11-26-14 FORM

199

Cal	endar Year	2014 or 1	fiscal year beginning (mm/dd/yyyy) $11/01/2014$ , and ending (r	nm/dd/yyy	/y)	10	/31/2015 .
	rporation/Or		3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		fornia corp	oration	number
CS	FUN	D			1017	528	}
Ac	ditional Infor	mation. See	e instructions.	FE	IN		
					95-3	607	882
	eet address				PMB no.		
46	59 BO	HEMI	AN HIGHWAY				
Cit	-			State	ZIP code		
	REEST			CA	9547		
Fo	reign country	name	Foreign province/state/county		Foreign p	ostal co	ode
_	FI						
A	First Retu	rn	Yes X No J If exempt under R&TC Se				
В			Yes X No engaged in political activi				
C D	Final Info		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				rolg? • Yes _A_ No
ט			• Surrendered (Withdrawn) sources	-			¢
			organized Enter date: (mm/dd/yyyy) • L If organization is exempt				
Ε	Check ac	-					
-	(1)	Cash					
F	Federal re		· · · · · · · · · · · · · · · · · · ·				
-	(1) ●	] 990T	(2) ● X 990-PF (3) ● Sch H (990) N Did the organization file F				
G	Is this a g	roup filin	g? See instructions. • Yes X No report taxable income?				• Yes X No
Н	-	-	in a group exemption? Yes X No 0 Is the organization under				
	If "Yes," w	hat is the	parent's name? IRS audited in a prior yea	r <b>?</b>			• Yes <b>X</b> No
			<b>P</b> Is an IRS Form 1023/102	4 pending	?		Yes X No
1			n have any changes to its guidelines • Yes X No Date filed with IRS				
			FTB? See instructions.				
<u>P</u>	art I		Part I unless not required to file this form. See General Instructions B and C.				004 544
			oss sales or receipts from other sources. From Side 2, Part II, line 8			1	901,714.00
			oss dues and assessments from members and affiliates			2	00
F	Receipts	3 Gro	OSS CONTributions, gifts, grants, and similar amounts received al gross receipts for filing requirement test. Add line 1 through line 3. s line must be completed. If the result is less than \$50,000, see General Instruction B	STMT	<u>†</u> . •	3	950,000.00
	and	4 This	s line must be completed. If the result is less than \$50,000, see General Instruction B	SIMI		4	1,851,714.00
R	evenues	5 Co	st of goods sold  st or other basis, and sales expenses of assets sold  5  7 8	38,61	7 00		
			,			7	788,617.00
			tal costs. Add line 5 and line 6 tal gross income. Subtract line 7 from line 4			8	1,063,097.00
			tal expenses and disbursements. From Side 2, Part II, line 18		•	9	547,906.00
Е	xpenses		cess of receipts over expenses and disbursements. Subtract line 9 from line 8		•	10	515,191.00
			ng fee \$10 or \$25. See General Instruction F			11	10.00
			tal payments			12	00
	Filing		nalties and Interest. See General Instruction J			13	00
	Fee		e tax. See General Instruction K		_	14	00
		15 Ba	lance due. Add line 11, line 13, and line 14. Then subtract line 12 from the result		<b>(</b>	15	10.00
		it is true, o	natries of perjury, I declare that I have examined this return, including accompanying schedules and statem correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which pre	ents, and to eparer has a	the best only knowled	t my kn Ige.	owledge and belief,
Sig	n	0:	Title	Date			Telephone
He	re	Signature of officer		RE			707-874-2942
		Drangrar's	Date	Check			• PTIN
		Preparer's signature	<b>&gt;</b>	self-en	nployed	•	P00118036 ● FEIN
Pai		Firm's nan					
	parer's	(or yours, if self-	MFO EFILING SERVICES CO			_	20-1597091 ● Telephone
Us	Only	employed) and addre					(810) 767-0136
		Marrate	FLINT, MI 48502-1649		• X	т	<del></del>
_		iviay the	FTB discuss this return with the preparer shown above? See instructions		● [ 🔥	」Yes	No No

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.

	1	Gross sales or receipts from all	business activities. See instruc	tions	•	1	00
	2	Interest			•	2	25.00
	3	Dividends			•	3	36,638.00
Receipts	4	Gross rents			•	4	18,200.00
from	5	Gross royalties			•	5	00
Other	6	Gross royalties Gross amount received from sal	le of assets (See Instructions)	STA	TEMENT 3 •	6	846,253.00
Sources	7	Other income		SEE STA	TEMENT 4 •	7	598.00
	8	Total gross sales or receipts fro	m other sources. Add line 1 th	rough line 7. Enter here and o	on Side 1, Part I, line 1	8	901,714.00
	9	Contributions, gifts, grants, and	similar amounts paid	STA	TEMENT 5 •	9	350,504.00
	10	Disbursements to or for member	ers		•	10	00
	11	Disbursements to or for member Compensation of officers, direct	tors, and trustees	SEE STA	TEMENT 6 •	11	163,972.00
	12	Other salaries and wages			•	12	73,576.00
Expenses	13	Interest			•	13	00
and	14					14	11,475.00
Disburse-	15	Rents			•	15	5,822.00
ments	16	Depreciation and depletion (See	instructions)		•	16	0.00
	17	Depreciation and depletion (See Other Expenses and Disburseme	ents	SEE STA	TEMENT 7 $\bullet$	17	-57,443. <sub>00</sub>
		Total expenses and disburseme	ents. Add line 9 through line 17	. Enter here and on Side 1, Pa	art I, line 9	18	547,906. <sub>00</sub>
Sched	ule L	Balance Sheets	Beginning of	taxable year		of taxal	ble year
Assets			(a)	(b)	(c)		(d)
1 Cash				292,764.		•	,
		s receivable		26.		•	110.
		ceivable				•	<u> </u>
						•	<u> </u>
		state government obligations		640.000		•	404 680
		in other bonds STMT 8		649,820.		•	,
		in stock STMT 9		253,059.		•	267,152.
8 Morto	gage lo	ans ments		064 056		•	
			020 020	264,256.	020 02	_ •	317,503.
10 a Dep	oreciab	le assets	930,932.	F00 000	930,93		F00 000
		mulated depreciation	( 421,010.)	509,922.	( 421,010		509,922.
11 Land				123,000.		•	
				2 002 047		•	
		S		2,092,847.			1,865,930.
Liabilities				2,045.			-89.
14 Accou				652,500.		9	
		s, gifts, or grants payable		032,300.		9	<u> </u>
		notes payable					<u>,                                      </u>
17	jayes p	payable les <b>STMT</b> 11					23,681.
10 Capite	IIIUUIIII Joetook	or principal fund					25,001.
		ital surplus. Attach reconciliation					<u>'</u>
		nings or income fund		1,438,302.			1,842,338.
		ties and net worth		2,092,847.			1,865,930.
Schedi			per books with income per re				1,003,3301
Conca	uic iv		dule if the amount on Schedul		s than \$50,000.		
1 Net in	come	per books					
2 Feder				not included in th		- 1	•
		pital losses over capital gains		8 Deductions in this			
		recorded on books this year			ome this year	T I	•
		corded on books this year not		9 Total. Add line 7		г	
		this return	•	10 Net income per re			
		ne 1 through line 5	<u> </u>			t	515,191.
			· · · · · · · · · · · · · · · · · · ·				·

FORM 199	CASH CONTRIBUTIONS NCLUDED ON PART I, LINE 3	ST.	ATEMENT 1
CONTRIBUTOR'S NAME	CONTRIBUTOR'S ADDRESS	DATE OF GIFT	AMOUNT
MARYANNE MOTT	469 BOHEMIAN HWY FREESTONE, CA 95472	12/12/14	635,500.
TOTAL INCLUDED ON LINE 3		-	635,500.

	SH CONTRIBUTIC ON PART I, LI		STATEMENT 2
CONTRIBUTOR'S NAME	CONTRIBUTOR'S	S ADDRESS	
MARYANNE MOTT	469 BOHEMIAN	HWY FREESTONE, CA	95472
PROPERTY DESCRIPTION	DATE OF GIFT	TOTAL AMOUNT	FMV OF GIFT
300 SHS GENERAL MILLS	12/11/14	15,710.	15,710.
CONTRIBUTOR'S NAME	CONTRIBUTOR'S	S ADDRESS	
MARYANNE MOTT	469 BOHEMIAN	HWY FREESTONE, CA	95472
PROPERTY DESCRIPTION	DATE OF GIFT	TOTAL AMOUNT	FMV OF GIFT
100 SHS JONES LANG LASALLE INC	12/11/14	14,410.	14,410.
CONTRIBUTOR'S NAME	CONTRIBUTOR'S	S ADDRESS	
MARYANNE MOTT	469 BOHEMIAN	HWY FREESTONE, CA	95472
PROPERTY DESCRIPTION	DATE OF GIFT	TOTAL AMOUNT	FMV OF GIFT
1300 SHS NORFOLK SOUTHERN CORP	12/11/14	133,211.	133,211.
CONTRIBUTOR'S NAME	CONTRIBUTOR'S	S ADDRESS	
MARYANNE MOTT	469 BOHEMIAN	HWY FREESTONE, CA	95472
PROPERTY DESCRIPTION	DATE OF GIFT	TOTAL AMOUNT	FMV OF GIFT
404 SHS OLD DOMINION FGHT LINES INC	12/11/14	31,736.	31,736.
CONTRIBUTOR'S NAME	CONTRIBUTOR'S	S ADDRESS	
MARYANNE MOTT	469 BOHEMIAN	HWY FREESTONE, CA	95472
PROPERTY DESCRIPTION	DATE OF GIFT	TOTAL AMOUNT	FMV OF GIFT
1096 SHS OLD DOMINION FGHT LINES INC	12/11/14	86,096.	86,096.

CONTRIBUTOR'S NAME	CONTRIBUTOR'S	ADDRESS	
MARYANNE MOTT	469 BOHEMIAN	HWY FREESTONE, CA	95472
PROPERTY DESCRIPTION	DATE OF GIFT	TOTAL AMOUNT	FMV OF GIFT
350 SHS STANLEY BLACK & DECKER INC	12/11/14	33,337.	33,337.
TOTAL INCLUDED ON LINE 3			314,500.

FORM 199 GROSS AMOUNT F	ROM	SALE	OF INV	ESTMEN	T PROP	ERTY	Z S'	PATEME	νт 3
DESCRIPTION				TE IRED	DAT: SOL			THOD UIRED	
2.096 VANGUARD FIXED INCOME SHO - ADMIRAL SHRS VFSUX	ORT	TERM	05/3	0/14	04/24	/15	PUR	CHASED	
	(	COST OTHER		DEPR	EC.		PENSE SALE		OSS PRICE
	_		23.		0.		0.		23.
DESCRIPTION				TE IRED	DAT:			THOD UIRED	
3.436 VANGUARD FIXED INCOME SHO - ADMIRAL SHRS VFSUX	ORT	TERM	04/3	0/14	04/24	/15	PUR	CHASED	
	(	COST OTHER		DEPR	EC.		PENSE SALE		OSS PRICE
	_		37.		0.		0.		37.
DESCRIPTION				TE IRED	DAT:			THOD UIRED	
2.026 VANGUARD FIXED INCOME SHO - ADMIRAL SHRS VFSUX	ORT	TERM	06/3	0/14	04/24	/15	PUR	CHASED	
	(	COST OTHER	OR BASIS	DEPR	EC.		PENSE SALE		OSS PRICE
			22.		0.		0.		22.
DESCRIPTION				TE IRED	DAT:			THOD UIRED	
28.165 VANGUARD FIXED INCOME ST TERM - ADMIRAL SHRS VFSUX	HORT	r	03/3	1/14	04/24	/15	PUR	CHASED	
	(	COST OTHER	OR BASIS	DEPR	EC.		PENSE SALE	GRO SALES	
	_		304.		0.		0.		303.

DESCRIPTION		DA' ACQU		DAT! SOL!			THOD JIRED	
13.039 VANGUARD FIXED INCOME SHOTTERM - ADMIRAL SHRS VFSUX	RT	08/2	9/14	04/24	/15	PUR	CHASED	•
	COST OTHER	OR BASIS	DEPI	REC.		PENSE SALE		OSS PRICE
		140.		0.		0.		140.
DESCRIPTION		DA' ACQU		DAT:			THOD JIRED	
416.354 VANGUARD FIXED INCOME SHOTERM - ADMIRAL SHRS VFSUX	ORT	01/3	0/14	04/24	/15	PUR	CHASED	•
	COST OTHER	OR BASIS	DEPI	REC.		PENSE SALE		OSS PRICE
	4	1,467.		0.		0.		4,476.
DESCRIPTION		DA' ACQU		DAT:			THOD JIRED	
18.439 BLACKROCK FLOATING RATE PORTFOLIO CL BFRIX	NCOME	06/0	2/14	04/28	/15	PUR	CHASED	•
	COST OTHER	OR BASIS	DEPI	REC.		PENSE SALE		OSS PRICE
		194.		0.		0.		191.
DESCRIPTION		DA' ACQU		DAT! SOL!			THOD JIRED	
12.237 BLACKROCK FLOATING RATE IN PORTFOLIO CL BFRIX	NCOME	05/0	1/14	04/28	/15	PUR	CHASED	•
		OR BASIS	DEPI	REC.		PENSE SALE		OSS PRICE
		128.		0.		0.		127.
DESCRIPTION		DA' ACQU		DAT			THOD JIRED	
1897.964 BLACKROCK FLOATING RATE INCOME PORTFOLIO CL BFRIX		04/1	0/14	04/28	/15	PUR	CHASED	•
		OR BASIS	DEPI	REC.		PENSE SALE		OSS PRICE
	19	9,929.		0.		0.	1	9,682.

DESCRIPTION		DA! ACQU		DAT SOL			THOD UIRED	
7.117 VANGUARD HIGH-YIELD CORP - INVESTOR SHR VWEHX		10/3	1/14	09/30	/15	PUR	CHASED	•
	COST OTHER		DEPI	REC.		PENSE SALE		OSS PRICE
		43.		0.		0.		40.
DESCRIPTION		DA' ACQU		DAT SOL			THOD UIRED	
6.359 VANGUARD HIGH-YIELD CORP - INVESTOR SHR VWEHX		02/2	7/15	09/30	/15	PUR	CHASED	•
	COST OTHER		DEPI	REC.		PENSE SALE		OSS PRICE
		39.		0.		0.		36.
DESCRIPTION		DA'		DAT SOL			THOD UIRED	
	-	04/2	4/15	09/30	/15	PUR	CHASED	•
	COST OTHER		DEPI	REC.		PENSE SALE		OSS PRICE
	5	,000.		0.		0.		4,694.
DESCRIPTION		DA'		DAT SOL			THOD UIRED	
922.377 VANGUARD HIGH-YIELD CORP INVESTOR SHR VWEHX	-	04/28	3/15	09/30	/15	PUR	CHASED	,
	COST OTHER		DEPI	REC.		PENSE SALE		OSS PRICE
	5	,571.		0.		0.		5,230.
DESCRIPTION		DA'		DAT SOL			THOD UIRED	
11.829 VANGUARD FIXED INCOME SHOTTERM - ADMIRAL SHRS VFSUX	RT	11/2	8/14	09/30	/15	PUR	CHASED	
	COST OTHER		DEPI	REC.		PENSE SALE		OSS PRICE
		127.		0.		0.		126.

DESCRIPTION		DA' ACQU		DAT:			THOD JIRED	
12.433 VANGUARD FIXED INCOME SH TERM - ADMIRAL SHRS VFSUX	ORT	10/3	1/14	09/30/15		PURCHASED		
	COST OTHER		DEPI	REC.		PENSE SALE	GRO SALES	OSS PRICE
		133.		0.		0.		132.
DESCRIPTION		DA'		DAT:			THOD JIRED	
12.309 VANGUARD FIXED INCOME SH TERM - ADMIRAL SHRS VFSUX	ORT	01/3	0/15	09/30	/15	PUR	CHASED	
	COST OTHER		DEPI	REC.		PENSE SALE	GRO SALES	OSS PRICE
		132.		0.		0.		131.
DESCRIPTION		DA'		DAT:			THOD JIRED	
12.449 VANGUARD FIXED INCOME SH TERM - ADMIRAL SHRS VFSUX	ORT	09/3	0/14	09/30	/15	PUR	CHASED	
	COST OTHER		DEPI	REC.		PENSE SALE	GRO SALES	OSS PRICE
		133.		0.		0.		133.
DESCRIPTION		DA'		DAT:			THOD JIRED	
11.589 VANGUARD FIXED INCOME SH TERM - ADMIRAL SHRS VFSUX	ORT	02/2	7/15	09/30	/15	PUR	CHASED	
		OR BASIS	DEPI	REC.		PENSE SALE		
		124.		0.		0.		123.
DESCRIPTION		DATE ACQUIRED		DAT:			THOD JIRED	
12.287 VANGUARD FIXED INCOME SH TERM - ADMIRAL SHRS VFSUX	IORT	12/3	1/14	09/30	/15	PUR	CHASED	
	COST OTHER	OR BASIS	DEPI	REC.		PENSE SALE		

DESCRIPTION		DA ACQU		DAT! SOL!			THOD JIRED	
2274.522 VANGUARD FIXED INCOME STERM - ADMIRAL SHRS VFSUX	HORT	07/2	9/14	09/30	/15 PUR		CHASED	
		r or Basis	DEPI	REC.		PENSE SALE		OSS PRICE
	24	4,428.		0.		0.	2	4,224.
DESCRIPTION		DA ACQU		DAT!			THOD JIRED	
1282.672 BLACKROCK FLOATING RATE INCOME PORTFOLIO CL BFRIX		03/3	1/15	10/01	/15	PUR	CHASED	
		r or Basis	DEPI	REC.		PENSE SALE		OSS PRICE
	13	3,250.		0.		0.	1	2,968.
DESCRIPTION		DA ACQU		DAT:			THOD JIRED	
201.008 BLACKROCK FLOATING RATE PORTFOLIO CL BFRIX	INCOME	04/1	0/14	10/01	/15	PUR	CHASED	
		r or Basis	DEPI	REC.		PENSE SALE		OSS PRICE
		2,111.		0.		0.		2,032.
DESCRIPTION		DA ACQU		DAT:			THOD JIRED	
10.784 TEMPLETON GLBL BOND FD ANTGBAX	DV CL	06/1	6/14	03/25	/15	PUR	CHASED	
		r or Basis	DEPI	REC.		PENSE SALE	_	OSS PRICE
		143.		0.		0.		133.
DESCRIPTION		DA ACQU		DAT!			THOD JIRED	
10.864 TEMPLETON GLBL BOND FD AND TGBAX	DV CL	05/1	5/14	03/25	/15	PUR	CHASED	
		r or Basis	DEPI	REC.		PENSE SALE		OSS PRICE
		143.		0.		0.		134.

DESCRIPTION		DA ACQU		DAT:			THOD UIRED
2129.326 TEMPLETON GLBL BOND FD CL TGBAX	ADV	04/1	0/14	03/25	/15	PUR	CHASED
	COST OTHER 1		DEPI	REC.		PENSE SALE	GROSS SALES PRICE
	27	,937.		0.		0.	26,233.
DESCRIPTION		DA ACQU		DAT SOL			THOD UIRED
399.042 TEMPLETON GLBL BOND FD TGBAX	ADV CL	04/1	0/14	04/29	/15	PUR	CHASED
	COST OTHER 1		DEPI	REC.		PENSE SALE	GROSS SALES PRICE
	5	,235.		0.		0.	5,000.
DESCRIPTION		DA ACQU		DAT SOL			THOD UIRED
439.754 TEMPLETON GLBL BOND FD TGBAX	ADV CL	04/1	0/14	10/01	/15	PUR	CHASED
	COST OTHER 1		DEPI	REC.		PENSE SALE	GROSS SALES PRICE
	5	,770.		0.		0.	5,000.
DESCRIPTION		DA ACQU		DAT SOL			THOD UIRED
300 GENERAL MILLS GIS		01/1	1/13	12/12	/14	DON	ATED
	COST OTHER 1		DEPI	REC.		PENSE SALE	
	12	,200.		0.		0.	15,637.
DESCRIPTION		DA ACQU		DAT SOL			THOD UIRED
100 JONES LANG LASALLE INC JLL		06/2	0/13	12/12	/14	DON	ATED
	COST OTHER 1		DEPI	REC.		PENSE SALE	GROSS SALES PRICE
	8	,926.		0.		0.	14,353.

DESCRIPTION		DA ACQU		DAT: SOL:			THOD UIRED
1300 NORFOLK SOUTHERN CORP NSC		05/3	1/12	12/12	/14	DON	ATED
	COST OTHER		DEPI	REC.		PENSE SALE	GROSS SALES PRICE
	86	,164.		0.		0.	132,984.
DESCRIPTION		DA ACQU		DAT:			THOD UIRED
404 OLD DOMINION FGHT LINES INC	ODFL	11/1	1/13	12/12	/14	DON	ATED
	COST OTHER		DEPI	REC.		PENSE SALE	GROSS SALES PRICE
	19	,432.		0.		0.	31,343.
DESCRIPTION		DA ACQU		DAT:			THOD UIRED
1096 OLD DOMINION FGHT LINES INC	ODFL	11/0	8/13	12/12	/14	DON	ATED
	COST OTHER		DEPI	REC.		PENSE SALE	GROSS SALES PRICE
	52	1,167.		0.		0.	85,030.
DESCRIPTION		DA ACQU		DAT:			THOD UIRED
350 STANLEY BLACK & DECKER INC ST	WK	06/2	8/12	12/12	/14	DON	ATED
	COST OTHER		DEPI	REC.		PENSE SALE	GROSS SALES PRICE
	21	,957.		0.		0.	32,761.
DESCRIPTION		DA ACQU		DAT:			THOD UIRED
11.387 VANGUARD INDEX FDS 500 ADI	MIRAL	09/1	9/14	12/02	/14	PUR	CHASED
	COST OTHER		DEPI	REC.		PENSE SALE	GROSS SALES PRICE
	2	2,111.		0.		0.	2,179.

DESCRIPTION		DA' ACQU					THOD UIRED	
772.476 VANGUARD INDEX FDS 500 AI	OMIRAL	07/2	9/14	12/02	/14	PUR	CHASED	
	COST OTHER		DEPI	REC.		PENSE SALE		OSS PRICE
	140	,529.		0.		0.	14	7,821.
DESCRIPTION		DA'		DAT:			THOD UIRED	
9.021 VANGUARD INDEX FDS 500 ADMI	IRAL	12/1	7/14	09/30	/15	PUR	CHASED	
	COST OTHER		DEPI	REC.		PENSE SALE		OSS PRICE
	1	,674.		0.		0.		1,598.
DESCRIPTION		DA' ACQU		DAT:			THOD UIRED	
442.599 VANGUARD INDEX FDS 500 AI	OMIRAL	07/2	9/14	09/30	/15	PUR	CHASED	
	COST OTHER		DEPI	REC.		PENSE SALE		OSS PRICE
	80	,518.		0.		0.	7	8,402.
DESCRIPTION		DA'		DAT:			THOD UIRED	
25.637 VANGUARD ADMIRAL REIT INDI	EΧ	11/0	5/13	04/24	/15	PUR	CHASED	
	COST OTHER		DEPI	REC.		PENSE SALE		OSS PRICE
	2	,486.		0.		0.		3,000.
DESCRIPTION		DA'		DAT! SOL!			THOD UIRED	
17.101 VANGUARD ADMIRAL REIT INDI FUND VGSLX	ΞX	11/0	5/13	04/27	/15	PUR	CHASED	
	COST OTHER		DEPI	REC.		PENSE SALE		OSS PRICE

DESCRIPTION			TE IRED	DAT SOL			THOD UIRED	
7 TWITTER INC TWTR		04/0	7/11	02/13	/15	PUR	CHASED	-
	COST OTHER	OR BASIS	DEP	REC.		PENSE SALE		OSS PRICE
		87.		0.		0.		340.
DESCRIPTION			TE IRED	DAT SOL			THOD UIRED	
54 TWITTER INC TWTR		02/0	4/11	02/13	/15	PUR	CHASED	-
		OR BASIS	DEP:	REC.		PENSE SALE		OSS PRICE
		540.		0.		0.		2,624.
DESCRIPTION			TE IRED	DAT SOL			THOD UIRED	
63 SOLARCITY CORPORATION SCTY		08/1	0/07	06/26	/15	PUR	CHASED	-
		OR BASIS	DEP	REC.		PENSE SALE		OSS PRICE
		151.		0.		0.		3,514.
DESCRIPTION			TE IRED	DAT SOL			THOD UIRED	
80 SOLARCITY CORPORATION SCTY		08/1	0/07	08/05	/15	PUR	CHASED	-
	COS'. OTHER	OR BASIS	DEP	REC.		PENSE SALE		OSS PRICE
		192.		0.		0.		4,865.
DESCRIPTION			TE IRED	DAT SOL			THOD UIRED	
0 KIT DIGITAL INC KITD		02/0	4/14	02/05	/15	PUR	CHASED	-
		OR BASIS	DEP	REC.		PENSE SALE		OSS PRICE
		0.		0.		0.		3.

DESCRIPTION		DA ACQU		DAT: SOL:			THOD UIRED
0 CIBER INC. CBROLD		04/2	6/14	04/27	/15	PUR	CHASED
	COST OTHER		DEPR	EC.		PENSE SALE	GROSS SALES PRICE
		0.		0.		0.	4.
DESCRIPTION		DA ACQU		DAT:			THOD UIRED
MFO EQUITY FUND (JOINT VENTURE)						PUR	CHASED
	COST OTHER		DEPR	EC.		PENSE SALE	GROSS SALES PRICE
	17	,465.		0.		0.	17,545.
DESCRIPTION		DA ACQU		DAT SOL			THOD UIRED
MFO EQUITY FUND (JOINT VENTURE)						PUR	CHASED
	COST OTHER		DEPR	EC.		PENSE SALE	GROSS SALES PRICE
	67	,536.		0.		0.	87,171.
DESCRIPTION		DA ACQU		DAT SOL			THOD UIRED
MFO WESTFIELD FUND A (JOINT VENT	URE)					PUR	CHASED
	COST OTHER		DEPR	EC.		PENSE SALE	GROSS SALES PRICE
	16	,751.		0.		0.	15,222.
DESCRIPTION		DA ACQU		DAT:			THOD UIRED
MFO WESTFIELD FUND A (JOINT VENT	URE)					PUR	CHASED
	COST OTHER		DEPR	EC.		PENSE SALE	GROSS SALES PRICE
	14	,473.		0.		0.	27,397.

DESCRIPTION		ATE JIRED	DATE SOLD		THOD UIRED
MFO TOWLE FUND (JOINT VENTURE)				PUR	CHASED
	COST OR OTHER BASIS	DEPREC		PENSE SALE	GROSS SALES PRICE
	5,607.		0.	0.	5,459.
DESCRIPTION		ATE JIRED	DATE SOLD		THOD UIRED
MFO TOWLE FUND (JOINT VENTURE)				PUR	CHASED
	COST OR OTHER BASIS	DEPREC		PENSE SALE	GROSS SALES PRICE
	12,040.		0.	0.	20,385.
DESCRIPTION		ATE JIRED	DATE SOLD		THOD UIRED
WAM INTERNATIONAL EQUITY COMMON FUND	TR			PUR	CHASED
	COST OR OTHER BASIS	DEPREC		PENSE SALE	GROSS SALES PRICE
	198.		0.	0.	186.
DESCRIPTION		ATE JIRED	DATE SOLD		THOD UIRED
WAM INTERNATIONAL EQUITY COMMON FUND	TR			PUR	CHASED
	COST OR OTHER BASIS	DEPREC		PENSE SALE	GROSS SALES PRICE
	31.		0.	0.	33.
DESCRIPTION		ATE JIRED	DATE SOLD		THOD UIRED
WAM INTERNATIONAL EQUITY COMMON FUND	TR			PUR	CHASED
	COST OR OTHER BASIS	DEPREC		PENSE SALE	GROSS SALES PRICE
	0.		0.	0.	30.

DESCRIPTION		DA' ACQU		DAT:		THOD UIRED	
DRAPER FISHER JURVETSON GROWTH F FROM SCHEDULE K-1	UND				 PUR	CHASED	
	COST OTHER B		DEPRE	c.	PENSE SALE	GRO SALES	
		0.		0.	0.		451.
DESCRIPTION		DA'		DAT		THOD UIRED	
CROSSLINK VENTURES V FROM SCH K-	1				 PUR	CHASED	
	COST OTHER B		DEPRE	c.	PENSE SALE	GRO SALES	
	2,	569.		0.	0.		0.
DESCRIPTION		DA'		DAT		THOD UIRED	
MFO D&D SMID CAP VALUE FUND (JOI: VENTURE)	NT				PUR	CHASED	
	COST (		DEPRE	c.	PENSE SALE	GRO SALES	
	2,	212.		0.	 0.		2,058.
DESCRIPTION		DA'		DAT		THOD UIRED	
MFO EQUITY FUND - RECOVERY OF DISTRIBUTIONS IN EXCESS OF BASIS					 PUR	CHASED	
	COST OTHER B		DEPRE	c.	PENSE SALE	GRO SALES	
	86,	817.		0.	 0.		0.
DESCRIPTION		DA'		DAT:		THOD UIRED	
WAM INTL EQUITY FUND - RECOVERY DISTRIBUTIONS IN EXCESS OF BASIS			-		 PUR	CHASED	
	COST (		DEPRE	c.	PENSE SALE	GRO SALES	

DESCRIPTION

METHOD

ACQUIRED

MFO TOWLE FUND - RECOVERY OF DISTRIBUTIONS IN EXCESS OF BASIS				PUR	CHASED	
	COST OR OTHER BASIS	DEPREC.		PENSE SALE	GRO SALES	OSS PRICE
	8,248.		0.	0.		0.
DESCRIPTION	DA ACQU		DATE SOLD		THOD UIRED	
MFO WESTFIELD FUND A - RECOVERY DISTRIBUTIONS IN EXCESS OF BASIS				PUR	CHASED	
	COST OR OTHER BASIS	DEPREC.		PENSE SALE	GRO SALES	OSS PRICE
	7,192.		0.	0.		0.
DESCRIPTION	DA ACQU		DATE SOLD		THOD UIRED	
TWC-YAHOO TUMBLER PJT TITAN DOUB	LE			PUR	CHASED	
	COST OR OTHER BASIS	DEPREC.		PENSE SALE		OSS PRICE
	357.		0.	0.		357.
TOTAL ON FORM 199, PG 2, LINE 6	788,617.		0.	0.	846	5,253.
FORM 199	OTHER INCOME			S	TATEME	NT 4
DESCRIPTION					AMOUI	ΝT
CAPITAL GAINS DIVIDENDS						598.
TOTAL TO FORM 199, PART II, LINE	. 7					598.

DATE

ACQUIRED

DATE

SOLD

FORM 199 CASH CONTRIBUTIONS, GIFTS, GAND SIMILAR AMOUNTS PAIR		STATEMENT 5
ACTIVITY CLASSIFICATION: GENERAL SUPPORT		
DONEES NAME AND ADDRESS	RELATIONSHIP	AMOUNT
CENTER FOR CONSTITUTIONAL RIGHTS 666 BROADWAY - NEW YORK, NY 10012	NONE	115,000.
ORGANIZATIONAL STATUS: PUBLIC CHARITY		
DONEES NAME AND ADDRESS	RELATIONSHIP	AMOUNT
COUNCIL ON AGING 730 BENNETT VALLEY ROAD - SANTA ROSA, CA 95404	NONE	72.
ORGANIZATIONAL STATUS: PUBLIC CHARITY		
DONEES NAME AND ADDRESS	RELATIONSHIP	AMOUNT
FOOD FOR THOUGHT P.O. BOX 1608 - FORESTVILLE, CA 95436	NONE	72.
ORGANIZATIONAL STATUS: PUBLIC CHARITY		
DONEES NAME AND ADDRESS	RELATIONSHIP	AMOUNT
GOVERNMENT ACCOUNTABILITY PROJECT 1612 K ST., NW - WASHINGTON, DC 20006	NONE	75,000.
ORGANIZATIONAL STATUS: PUBLIC CHARITY		
DONEES NAME AND ADDRESS	RELATIONSHIP	TRUOMA
GRATON DAY LABOR CENTER 2981 BOWEN ST - GRATON, CA 95444	NONE	72.
ORGANIZATIONAL STATUS: PUBLIC CHARITY		

DONEES NAME AND ADDRESS	RELATIONSHIP	AMOUNT
LIVING ROOM PO BOX 14056 - SANTA ROSA, CA 95402	NONE	72.
ORGANIZATIONAL STATUS: PUBLIC CHARITY		
DONEES NAME AND ADDRESS	RELATIONSHIP	AMOUNT
OCCIDENTAL AREA HEALTH CENTER PO BOX 100 - OCCIDENTAL, CA 95465	NONE	72.
ORGANIZATIONAL STATUS: PUBLIC CHARITY		
DONEES NAME AND ADDRESS	RELATIONSHIP	AMOUNT
PARTNERSHIP FOR CIVIL JUSTICE FUND 617 FLORIDA AVE NW - WASHINGTON, DC 20001	NONE	20,000.
ORGANIZATIONAL STATUS: PUBLIC CHARITY		
DONEES NAME AND ADDRESS	RELATIONSHIP	AMOUNT
REBUILDING TOGETHER SEBASTOPOL P.O. BOX 21 - SEBASTOPOL, CA 95473	NONE	72.
ORGANIZATIONAL STATUS: PUBLIC CHARITY		
DONEES NAME AND ADDRESS	RELATIONSHIP	AMOUNT
TWIN HILLS FIREFIGHTERS 4500 HESSEL ROAD - SEBASTOPOL, CA 95472	NONE	72.

ORGANIZATIONAL STATUS: PUBLIC CHARITY

TOTAL FOR THIS ACTIVITY

210,504.

ACTIVITY CLASSIFICATION: ENVIRONMENTAL, WILDLIFE AND AGRICULTURE

DONEES NAME AND ADDRESS RELATIONSHIP **AMOUNT** AS YOU SOW 40,000. NONE

1611 TELEGRAPH AVENUE, SUITE 1450 - OAKLAND, CA

ORGANIZATIONAL STATUS: PUBLIC CHARITY

DONEES NAME AND ADDRESS RELATIONSHIP **AMOUNT** COMING CLEAN, INC. NONE 15,000.

41 OAKVIEW TERRACE - BOSTON, MA 02130

ORGANIZATIONAL STATUS: PUBLIC CHARITY

DONEES NAME AND ADDRESS RELATIONSHIP AMOUNT

FRIENDS OF THE EARTH NONE 70,000.

1100 15TH ST NW 11TH FLOOR - WASHINGTON , DC 20005

ORGANIZATIONAL STATUS: PUBLIC CHARITY

TOTAL FOR THIS

125,000. ACTIVITY

ACTIVITY CLASSIFICATION: PUBLIC AWARENESS

DONEES NAME AND ADDRESS RELATIONSHIP AMOUNT

SYRACUSE UNIVERSITY NONE 15,000.

OFFICE OF SPONSORED PROGRAMS, BROWN HALL -

SYRACUSE, NY 13244

ORGANIZATIONAL STATUS: PUBLIC CHARITY

TOTAL FOR THIS

15,000. ACTIVITY

TOTAL INCLUDED ON FORM 199, PART II, LINE 9

350,504.

FORM 199 COMPENSATION OF OFFICERS	, DIRECTORS AND TRUSTEES	STATEMENT 6
NAME AND ADDRESS	TITLE AND AVERAGE HRS WORKED/WK	COMPENSATION
SEE ALSO FEDERAL STMTS 16 & 17 FOR COMPENSATION EXPLANATION AND RECONCILIATION FREESTONE, CA 95472	OR CA-199 STMT 7 0.00	0.
MARYANNE MOTT 469 BOHEMIAN HWY FREESTONE, CA 95472	TRUSTEE 4.00	0.
MICHAEL WARSH 469 BOHEMIAN HWY FREESTONE, CA 95472	TRUSTEE 2.00	3,375.
CORINNE MEADOWS-EFRAM 469 BOHEMIAN HWY FREESTONE, CA 95472	VICE-PRESIDENT/TRUSTEE 3.00	9,685.
MARISE MEYNET STEWART 469 BOHEMIAN HWY FREESTONE, CA 95472	PRESIDENT/TRUSTEE 3.00	9,625.

CS FUND		95-3607882
TERESA ROBINSON 469 BOHEMIAN HWY FREESTONE, CA 95472	SECRETARY/TRUSTEE 2.00	3,375.
KAU'I KELIIPIO 469 BOHEMIAN HWY FREESTONE, CA 95472	TREASURER/TRUSTEE 2.00	3,375.
ROXANNE TURNAGE 469 BOHEMIAN HWY FREESTONE, CA 95472	EXECUTIVE DIRECTOR 20.00	134,537.
TOTAL TO FORM 199, PART II,	LINE 11	163,972.
FORM 199	OTHER EXPENSES	STATEMENT 7
DESCRIPTION		AMOUNT
PENSION PLANS, EMPLOYEE BEN LEGAL FEES ACCOUNTING FEES OTHER PROFESSIONAL FEES TRAVEL, CONFERENCES, AND ME PRINTING AND PUBLICATIONS OFFICE SUPPLIES INSURANCE TELEPHONE & COMMUNICATIONS POSTAGE & DELIVERY DUES & MEMBERSHIPS BANK CHARGES ANNUAL CREDIT CARD CHARGES STATE FILING FEES ASSETS ACQUIRED IN FURTHERS COMPUTER SUPPLIES & EXPENSE FUNDERS OUTREACH CROSSLINK VENTURES V INVEST CROSSLINK VENTURES V PORTFO DRAPER FISHER JURVETSON GRO FROM SCHEDULE K-1	FOUNDATION: 18,465 25,559 NEFITS EETINGS ING CHARITABLE PURPOSE	0. 0. 0. 0. 144,024. 16,397. 6,852. 17,135. 19,119. 17,698. 681. 2,189. 1,836. 78. -73. 802. 86. 69. 297. 1,068. -1,434. 185. 17. 807. 1,787.
MFO D&D SMID CAP VALUE FUNI VENTURE) MFO TOWLE FUND PORTFOLIO DE	PORTFOLIO DEDUCTIONS (JOINT EDUCTIONS (JOINT VENTURE) DLIO DEDUCTIONS (JOINT VENTURE)	6. 525. 391.

WAM INTERNATIONAL EQUITY COMMON TR FUND
TOTAL TO FORM 199, PART II, LINE 17

-57,443.

57.

FORM 199 INVESTMENTS IN OTHER BO	ONDS	STATEMENT 8		
DESCRIPTION	BEG. OF YEAR	END OF YEAR		
5032.242 VANGUARD ADMIRAL SHORT-TERM INVESTMENT GRADE BOND 5296.209 VANGUARD ADMIRAL HIGH-YIELD CORP.  VALUATION: FMV 1176.086 VANGUARD INDEX FDS 500 ADMIRAL 2237.075 VANGUARD INDEX FDS SMCP INDEX TOTAL TO FORM 199, SCHEDULE L, LINE 6	83,545. 9,164. 437,111. 120,000. 649,820.	31,926. 213,954. 121,756.		
FORM 199 INVESTMENTS IN STOCK		STATEMENT 9		
DESCRIPTION	BEG. OF YEAR	END OF YEAR		
3942.206 TEMPLETON INSTITUTIONAL FOREIGN EQUITY 372.751 VANGUARD ADMIRAL EUROPEAN STOCK INDEX	79,170.	89,170.		
FUND 1849.6 VANGUARD ADMIRAL EMERGING MARKETS STOCK	23,951.	27,071.		
		·		
INDEX FUND 5241.2530 DREYFUS TOTAL EMERGING MARKETS CL I 828.8481 WAM INTERNATIONAL EQUITY COMMON TRUST	65,498. 64,728.	65,763. 64,728.		
INDEX FUND 5241.2530 DREYFUS TOTAL EMERGING MARKETS CL I 828.8481 WAM INTERNATIONAL EQUITY COMMON TRUST FND 12712.148 MFO EQUITY FUND	64,728. 0. 0.	65,763. 64,728. 0. 0.		
INDEX FUND 5241.2530 DREYFUS TOTAL EMERGING MARKETS CL I 828.8481 WAM INTERNATIONAL EQUITY COMMON TRUST FND 12712.148 MFO EQUITY FUND 19595.1 MFO - D&D SMID CAP VALUE 3731.401 MFO TOWLE FUND 275.7897667 MFO WESTFIELD FUND A	64,728.	65,763. 64,728.		
INDEX FUND 5241.2530 DREYFUS TOTAL EMERGING MARKETS CL I 828.8481 WAM INTERNATIONAL EQUITY COMMON TRUST FND 12712.148 MFO EQUITY FUND 19595.1 MFO - D&D SMID CAP VALUE 3731.401 MFO TOWLE FUND	0. 0. 19,595. 0.	65,763. 64,728. 0. 0. 19,500.		

FORM 199	OTHER INVESTMENTS		STATEMENT 10
DESCRIPTION		BEG. OF YEAR	END OF YEAR
3329.599 BLACKROCK FLOATING RATCL 351.506 VANGUARD ADMIRAL REIT IN 1967.381 STEELPATH MLP FUNDS SEE 1387.302 TEMPLETON GLOBAL BOND 85000 CROSSLINK VENTURES V 80000 DRAPER FISHER JURVETSON OF 3968 BALTER LONG/SHORT EQUITY IN 1968 CATALYST HEDGED FUTURES STEER STEER STEER STEER STEER LONG/SHORT OPEN TOTAL TO FORM 199, SCHEDULE L,	INDEX FUND ELECT 40 CL A FD GROWTH FUND INSTITUTIONAL FUND FRATEGY FUND CL I PORTUNITY FUND	57,322. 33,418. 37,902. 57,428. 23,500. 54,686. 0. 0.	34,961. 29,565. 35,807. 18,200. 22,378. 51,592. 40,000. 45,000. 40,000.
FORM 199	OTHER LIABILITIES		STATEMENT 11
DESCRIPTION		BEG. OF YEAR	END OF YEAR
ACCRUED PAYROLL		0.	23,681.
TOTAL TO FORM 199, SCHEDULE L,	LINE 18	0.	23,681.

TAXABLE YEAR

## **Corporation Depreciation and Amortization**

CALIFORNIA FOR
3885

FORM 199 95-3607882 Attach to Form 100 or Form 100W. Corporation name California corporation number 1017528 CS FUND Part I Election To Expense Certain Property Under IRC Section 179 1 Maximum deduction under IRC Section 179 for California \$25,000 2 Total cost of IRC Section 179 property placed in service 2 3 Threshold cost of IRC Section 179 property before reduction in limitation 3 \$200,000 4 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-5 Dollar limitation for taxable year. Subtract line 4 from line 1. If zero or less, enter -0-(a) Description of property (b) Cost (business use only) 6 7 Listed property (elected IRC Section 179 cost) 8 Total elected cost of IRC Section 179 property. Add amounts in column (c), line 6 and line 7 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from prior taxable years 10 11 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 12 IRC Section 179 expense deduction. Add line 9 and line 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2015. Add line 9 and line 10, less line 12 Part II Depreciation and Election of Additional First Year Expense Deduction Under R&TC Section 24356 (f) Life or (c) (g) Depreciation (h) Date acquired Description property Depreciation allowed or Cost or Additional Depreciation for this year (mm/dd/yyyy) other basis rate first year depreciation allowable in earlier years SEE STATEMENT 12 930,932. 445,278. 15 Add the amounts in column (g) and column (h). The total of column (h) may not exceed \$2,000. 0. See instructions for line 14, column (h) Part III Summary 16 Total: If the corporation is electing: IRC Section 179 expense, add the amount on line 12 and line 15, column (g); or Additional first year depreciation under R&TC Section 24356, add the amounts on line 15, columns (g) and (h), or Depreciation (if no election is made), enter the amount from line 15, column (g) 17 17 Total depreciation claimed for federal purposes from federal Form 4562, line 22 18 Depreciation adjustment. If line 17 is greater than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 17 is less than line 16, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.) Part IV Amortization (g) Amortization (e) R&TC (a) Description of property (b) (d) (c) Date acquired Cost or Amortization allowed or Period or section (mm/dd/yyyy) other basis allowable in earlier years percentage for this year see instructions 20 Total. Add the amounts in column (g) 20 21 Total amortization claimed for federal purposes from federal Form 4562, line 44 21 22 Amortization adjustment. If line 21 is greater than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 21 is less than line 20, enter the difference here and on Form 100 or Form 100W, Side 1, line 12

CA 3885	DI	EPRECIATION	STATEMENT 12			
	E IN COST OF	COST OR PRIOR BASIS DEPR		LIFE	DEPRE- CIATION	BONUS
1 469 BOHEMIAN HW	 'Y					
10/ 2 IMPROVEMENTS -	31/85 271,30	•	SL	15.00	0.	
	23/94 81,70		SL	10.00	0.	
3 EQUIPMENT	•				•	
VAR 4 COMPUTER EQUIPM	IOUS 46,98	34. 28,472.	SL	5.00	0.	
VAR	IOUS 24,29	90. 17,817.	SL	5.00	0.	
5 FURNITURE & FIX	TURES IOUS 28,7!	53. 28,159.	CT	5.00	0.	
6 FURNITURE & FIX	-	20,139.	рп	5.00	0.	
-	15/91 1,6	70. 1,670.	SL	5.00	0.	
7 BUILDING 09/	01/09 408,40	16,336.	SL	25.00	16,336.	
8 SOLAR PANELS	, , , , ,	•			•	
09/ 9 LANDSCAPING	01/09 26,60	9. 3,801.	SL	7.00	3,801.	
	01/09 23,00	52. 1,537.	SL	15.00	1,537.	
	TURES	. 2 504	QT.	7 00	2 504	
09/	01/09 18,1!	55. 2,594.	ъГ	7.00	2,594.	
TOTAL DEPR TO FORM 38	930,93	32. 445,278.			24,268.	

### Voucher at bottom of page.

#### DO NOT MAIL A PAPER COPY OF THE CORPORATE OR EXEMPT ORGANIZATION TAX RETURN WITH THE PAYMENT VOUCHER.

If the amount of payment is zero, do not mail this voucher.

WHERE TO FILE:

Using black or blue ink, make check or money order payable to the "Franchise Tax Board." Write the corporation number or FEIN and "2014 FTB 3586" on the check or money order. Detach voucher below. Enclose, but do not staple, payment with voucher and

FRANCHISE TAX BOARD PO BOX 942857 **SACRAMENTO CA 94257-0531** 

Make all checks or money orders payable in U.S. dollars and drawn against a U.S. financial institution.

WHEN TO FILE: Fiscal Year - See instructions.

Calendar Year - File and Pay by March 16, 2015.

When the due date falls on a weekend or holiday, the deadline to file and pay without penalty is extended to the next business day.

**ONLINE SERVICES:** Corporations can make payments online with Web Pay for Businesses. After a one-time online registration, corporations can make an immediate payment or schedule payments up to a year in advance. Go to ftb.ca.gov for more information.

439035 12-04-14

\_ DETACH HERE \_ \_ \_ \_ IF NO PAYMENT IS DUE OR PAID ELECTRONICALLY, DO NOT MAIL THIS VOUCHER \_ \_ \_ \_ DETACH HERE \_ \_ \_

**CAUTION:** You may be required to pay electronically, see instructions. TAXABLE YEAR Payment Voucher for Corps and

**Exempt Orgs e-filed Returns** 

CALIFORNIA FORM

3586 (e-file)

1017528 CSFU 95-3607882

00000000000

14

FORM 3

TYB 11-01-2014 TYE10-31-2015

CS FUND

2014

469 BOHEMIAN HIGHWAY

95472-9579 FREESTONE CA

(707) 874-2942

Total Payment Amt

10.

6181146

FTB 3586 2014

Date Accepted

TAXABLE YEAR **2014** 

## California e-file Return Authorization for Exempt Organizations

FORM **8453-FO** 

Exempt Organizations	0.00 20
Exempt Organization name	Identifying number
CS FUND	95-3607882
Part I Electronic Return Information (whole dollars only)	
1 Total gross receipts (Form 199, line 4)	1_1,851,714.00
2 Total gross income (Form 199, line 8)	2 1,063,097.00
3 Total expenses and disbursements (Form 199, line 9)	3 547,906.00
Part II Settle Your Account Electronically for Taxable Year 2014	
4 Electronic funds withdrawal 4a Amount 4b Withdrawal date (mm	n/dd/yyyy)
Part III Banking Information (Have you verified the exempt organization's banking information?)	
5 Routing number	
71 —	ecking Savings
Part IV Declaration of Officer	
I authorize the exempt organization's account to be settled as designated in Part II. If I check Part II, Box 4, I authorize an electron line 4a.	onic funds withdrawal for the amount listed
Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines California electronic return. To the best of my knowledge and belief, the exempt organization's return is true, correct, and comple a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization will remain liable for the fee liability and all applicable interest and penalties. I authorize the exempt organization ret statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. If the processing of the exempt delayed, I authorize the FTB to disclose to the ERO or intermediate service provider, the reason(s) for the delay.	s of the exempt organization's 2014 ' lete. If the exempt organization is filing organization's fee liability, the exempt urn and accompanying schedules and
Sign Here Signature of Officer Date EXECUTIVE DIRECT	POR

#### Part V Declaration of Electronic Return Originator (ERO) and Paid Preparer.

I declare that I have reviewed the above exempt organization's return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the exempt organization's return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return.) I have obtained the organization officer's signature on form FTB 8453-EO before transmitting this return to the FTB; I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2014 e-file Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for **four** years from the due date of the return or **four** years from the date of the return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

ERO	ERO's- signature			also paid	if self- employed	378-68-1951	
Must	Firm's name (or yours if self-employed)	MFO EFILING SERVICES CO	•		FEIN	20-1597091	
Sign	and address	111 E. COURT STREET SUIT	re 3D				
		FLINT, MI			ZIP	Code <b>4</b> 8 5 0 <b>2</b>	
Index papalties of pariury. I declare that I have examined the choice organization's return and accompanying schedules and statements, and to the best of my knowledge.							

Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

Paid	Paid .					Date	Check	1	Paid preparer's PTIN
Preparer	preparer's signature						if self- employed	]	P00118036
Must	Firm's name (or yours if self-employed)		MFO EFILING	SERVICES				FEIN	20-1597091
Sign	and address		111 E COURT	STREET S	UITE	3D			
FLINT, MI					ZIP (	Code $48502 - 1649$			
	•			•					•

For Privacy Notice, get FTB 1131 ENG/SP.

FTB 8453-EO 2014

MAIL TO: Registry of Charitable Trusts P.O. Box 903447 Sacramento, CA 94203-4470 Telephone: (916) 445-2021

WEB SITE ADDRESS:

http://ag.ca.gov/charities/

## ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA

Sections 12586 and 12587, California Government Code 11 Cal. Code Regs. sections 301-307, 311 and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties as defined in Government Code section 12586.1. IRS extensions will be honored.

State Charity Registration Number: CT 44168	_	Check if:						
	Cha	Change of address						
CS FUND Name of Organization		Amended report						
469 BOHEMIAN HIGHWAY Address (Number and Street)	Corporate	or Organization No.	1017528					
FREESTONE , CA 95472-9579 City or Town, State and ZIP Code	Federal Ei	mployer I.D. No.	95-3607882					
ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311 and 312)  Make Check Payable to Attorney General's Registry of Charitable Trusts								
Gross Annual Revenue Fee Gross Annual Revenue	Fee	Gross Annual R	levenue_	Fee				
Less than \$25,000 0 Between \$100,001 and \$250 Between \$25,000 and \$100,000 \$25 Between \$250,001 and \$1 m		1	0,001 and \$10 million 00,001 and \$50 million 60 million	\$150 \$225 \$300				
PART A - ACTIVITIES		•						
For your most recent full accounting period (beginning $\frac{11/01}{}$ Gross annual revenue \$ $\frac{1,063,097}{}$ Total assets		ling <u>10/31/</u> 907,851.	2015_) list:					
PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERI	OD OF THIS RE	EPORT						
Note: If you answer "yes" to any of the questions below, you must attack and details for each "yes" response. Please review RRF-1 instruct			xplanation					
During this reporting period, were there any contracts, loans, leases or ot			the organization	Yes	No			
and any officer, director or trustee thereof either directly or with an entity any financial interest?			•		х			
2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?								
3. During this reporting period, did non-program expenditures exceed 50%	of gross revenue	es?			Х			
<ol> <li>During this reporting period, were any organization funds used to pay any with the Internal Revenue Service, attach a copy.</li> </ol>	penalty, fine or	judgment? If you f	iled a Form 4720		х			
5. During this reporting period, were the services of a commercial fundraiser If "yes," provide an attachment listing the name, address, and telephone			ole purposes used?		х			
<ol><li>During this reporting period, did the organization receive any government name of the agency, mailing address, contact person, and telephone num</li></ol>	•	, provide an attach	ment listing the		Х			
<ol> <li>During this reporting period, did the organization hold a raffle for charitab the number of raffles and the date(s) they occurred.</li> </ol>	le purposes? If '	"yes," provide an a	ttachment indicating		х			
8. Does the organization conduct a vehicle donation program? If "yes," provoperated by the charity or whether the organization contracts with a com-		-			Х			
9. Did your organization have prepared an audited financial statement in accordance with generally accepted accounting principles for this reporting period?								
Organization's area code and telephone number $(707)$ $874-2942$								
Organization's e-mail address INQUIRIES@CSFUND.ORG								
I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, it is true, correct and complete.								
ROXANNE TURNAGE		EXECUTIVE						
Signature of authorized officer Printed Name	Ti	tle	Date					