

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2015, or fiscal year beginning NOV 1, 2015, and ending OCT 31, 2016

2015

Department of the Treasury
Internal Revenue Service

▶ Do not send to the IRS. Keep for your records.

▶ Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.

Name of exempt organization

Employer identification number

CS FUND

95-3607882

Name and title of officer

**BAILEY MALONE
EXECUTIVE DIRECTOR**

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

1a	Form 990 check here	▶ <input type="checkbox"/>	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	_____
2a	Form 990-EZ check here	▶ <input type="checkbox"/>	b	Total revenue, if any (Form 990-EZ, line 9)	2b	_____
3a	Form 1120-POL check here	▶ <input type="checkbox"/>	b	Total tax (Form 1120-POL, line 22)	3b	_____
4a	Form 990-PF check here	▶ <input checked="" type="checkbox"/>	b	Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	2,545.
5a	Form 8868 check here	▶ <input type="checkbox"/>	b	Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b	_____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2015 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize **MFO EFILING SERVICES CO.** to enter my PIN **48502**
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the organization's tax year 2015 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2015 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ *Paul Valovich* Date ▶ 5/23/17

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

38234048502
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2015 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ *Paul Valovich CPA* Date ▶ 5/2/17

**ERO Must Retain This Form - See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So**

Return of Private Foundation

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

2015

Open to Public Inspection

Form **990-PF**

Department of the Treasury
Internal Revenue Service

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

For calendar year 2015 or tax year beginning **NOV 1, 2015**, and ending **OCT 31, 2016**

Name of foundation CS FUND		A Employer identification number 95-3607882
Number and street (or P.O. box number if mail is not delivered to street address) 469 BOHEMIAN HIGHWAY	Room/suite	B Telephone number (707) 874-2942
City or town, state or province, country, and ZIP or foreign postal code FREESTONE, CA 95472-9579		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 2,892,740.	J Accounting method: <input type="checkbox"/> Cash <input type="checkbox"/> Accrual <input checked="" type="checkbox"/> Other (specify) MODIFIED CASH (Part I, column (d) must be on cash basis.)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	950,000.		N/A	
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	306.	306.		STATEMENT 1
	4 Dividends and interest from securities	24,816.	24,816.		STATEMENT 2
	5a Gross rents	18,200.	18,200.		STATEMENT 3
	b Net rental income or (loss)	18,200.			
	6a Net gain or (loss) from sale of assets not on line 10	95,671.			
	b Gross sales price for all assets on line 6a	493,621.			
	7 Capital gain net income (from Part IV, line 2)		95,671.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income	10,540.	0.		STATEMENT 4	
12 Total. Add lines 1 through 11	1,099,533.	138,993.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees STMT 5	10,051.	0.		10,051.
	b Accounting fees STMT 6	15,300.	0.		15,300.
	c Other professional fees STMT 7	8,350.	6,552.		1,798.
	17 Interest				
	18 Taxes STMT 8	9,777.	2,645.		7,132.
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses STMT 9	-15,997.	2,569.		-18,566.
	24 Total operating and administrative expenses. Add lines 13 through 23	27,481.	11,766.		15,715.
	25 Contributions, gifts, grants paid	20,500.			20,500.
26 Total expenses and disbursements. Add lines 24 and 25	47,981.	11,766.		36,215.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	1,051,552.				
b Net investment income (if negative, enter -0-)		127,227.			
c Adjusted net income (if negative, enter -0-)			N/A		

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.			Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
Assets	1	Cash - non-interest-bearing		218,239.	174,377.	174,377.	
	2	Savings and temporary cash investments		8,332.	593,722.	593,722.	
	3	Accounts receivable	159.				
		Less: allowance for doubtful accounts		110.	159.	159.	
	4	Pledges receivable					
		Less: allowance for doubtful accounts					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other disqualified persons					
	7	Other notes and loans receivable					
		Less: allowance for doubtful accounts					
	8	Inventories for sale or use					
	9	Prepaid expenses and deferred charges					
	10a	Investments - U.S. and state government obligations					
	b	Investments - corporate stock	STMT 12		267,152.	324,012.	471,929.
	c	Investments - corporate bonds	STMT 13		421,672.	589,123.	620,473.
	11	Investments - land, buildings, and equipment: basis	123,000.				
	Less: accumulated depreciation			123,000.	123,000.	211,475.	
12	Investments - mortgage loans						
13	Investments - other	STMT 14		317,503.	487,397.	537,315.	
14	Land, buildings, and equipment: basis	936,807.					
	Less: accumulated depreciation	STMT 15	421,010.	509,922.	515,797.	283,290.	
15	Other assets (describe)						
16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)			1,865,930.	2,807,587.	2,892,740.	
Liabilities	17	Accounts payable and accrued expenses		-89.	32,633.		
	18	Grants payable					
	19	Deferred revenue					
	20	Loans from officers, directors, trustees, and other disqualified persons					
	21	Mortgages and other notes payable					
	22	Other liabilities (describe) ACCRUED PAYROLL			23,681.	0.	
23	Total liabilities (add lines 17 through 22)			23,592.	32,633.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.						
	24	Unrestricted		1,842,338.	2,774,954.		
	25	Temporarily restricted					
	26	Permanently restricted					
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.						
	27	Capital stock, trust principal, or current funds					
	28	Paid-in or capital surplus, or land, bldg., and equipment fund					
29	Retained earnings, accumulated income, endowment, or other funds						
30	Total net assets or fund balances			1,842,338.	2,774,954.		
31	Total liabilities and net assets/fund balances			1,865,930.	2,807,587.		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,842,338.
2	Enter amount from Part I, line 27a	2	1,051,552.
3	Other increases not included in line 2 (itemize) SEE STATEMENT 10	3	144.
4	Add lines 1, 2, and 3	4	2,894,034.
5	Decreases not included in line 2 (itemize) SEE STATEMENT 11	5	119,080.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	2,774,954.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a			
b	SEE ATTACHED STATEMENTS		
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			
	493,621.	397,950.	95,671.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			
b			
c			
d			
e			95,671.

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	2	95,671.
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8	3	N/A

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

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

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

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

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2014	499,437.	1,839,426.	.271518
2013	2,380,921.	2,485,175.	.958050
2012	2,663,675.	2,931,067.	.908773
2011	2,676,190.	3,232,727.	.827843
2010	1,320,895.	3,252,853.	.406073

2	Total of line 1, column (d)	2	3.372257
3	Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.674451
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5	4	2,235,899.
5	Multiply line 4 by line 3	5	1,508,004.
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	1,272.
7	Add lines 5 and 6	7	1,509,276.
8	Enter qualifying distributions from Part XII, line 4	8	42,090.

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

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

Table with 11 rows for excise tax calculations. Includes fields for exempt foundations, tax under section 511, credits/payments, and tax due/overpayment. Total tax due is 3,455.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political campaigns, Form 1120-POL filing, and asset requirements. Includes a state selection field (CA) and a checkbox for Form 990-PF submission to the Attorney General.

Part 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 section 512(b)(13)? If "Yes," attach schedule (see instructions)
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?
14 The books are in care of BAILY MALONE Telephone no. (707) 874-2942
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here
16 At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?

Part VII-B 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.

1a During the year did the foundation (either directly or indirectly):
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?
(6) Agree to pay money or property to a government official?
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?
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 2015?
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):
a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income?
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?
b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?

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

5a During the year did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? Yes No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions) Yes No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Yes No **N/A**
 Organizations relying on a current notice regarding disaster assistance check here

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No **N/A**
 If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
 If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Yes No **N/A**

5b		
6b		X
7b		

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

SEE STATEMENT 17

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 16		159,895.	32,799.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
BAILEY MALONE 469 BOHEMIAN HWY, FREESTONE, CA 95472	DEPUTY DIRECTOR 40.00	127,307.	33,003.	0.
MONICA MOORE 469 BOHEMIAN HWY, FREESTONE, CA 95472	PROGRAM DIRECTOR 40.00	109,999.	28,516.	0.
MELANIE ADCOCK 469 BOHEMIAN HWY, FREESTONE, CA 95472	PROGRAM DIRECTOR 40.00	107,762.	27,936.	0.
ROSE COHEN 469 BOHEMIAN HWY, FREESTONE, CA 95472	GRANT ADMINISTRATOR 32.00	60,756.	16,009.	0.
RAMONA ALLEN 469 BOHEMIAN HWY, FREESTONE, CA 95472	BOOKKEEPER 40.00	51,494.	13,349.	0.
Total number of other employees paid over \$50,000				0

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

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services 0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/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
1 N/A	
2	
All other program-related investments. See instructions.	
3	

Total. Add lines 1 through 3 0.

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

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
a	Average monthly fair market value of securities	1a	1,111,649.
b	Average of monthly cash balances	1b	607,169.
c	Fair market value of all other assets	1c	551,130.
d	Total (add lines 1a, b, and c)	1d	2,269,948.
e	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	2,269,948.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	34,049.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,235,899.
6	Minimum investment return. Enter 5% of line 5	6	111,795.

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

1	Minimum investment return from Part X, line 6	1	111,795.
2a	Tax on investment income for 2015 from Part VI, line 5	2a	2,545.
b	Income tax for 2015. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	2,545.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	109,250.
4	Recoveries of amounts treated as qualifying distributions	4	144.
5	Add lines 3 and 4	5	109,394.
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	109,394.

Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	36,215.
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	5,875.
3 Amounts set aside for specific charitable projects that satisfy the:			
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	42,090.
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	42,090.

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				109,394.
2 Undistributed income, if any, as of the end of 2015:				
a Enter amount for 2014 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010				
b From 2011				
c From 2012				
d From 2013	1,796,452.			
e From 2014	406,732.			
f Total of lines 3a through e	2,203,184.			
4 Qualifying distributions for 2015 from Part XII, line 4: ▶ \$	42,090.			
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2015 distributable amount				42,090.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)	67,304.			67,304.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	2,135,880.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016				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 2010 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	2,135,880.			
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013	1,729,148.			
d Excess from 2014	406,732.			
e Excess from 2015				

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

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling ▶

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

	Tax year				(e) Total
	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

1 Information Regarding Foundation Managers:

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

MARYANNE MOTT

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

NONE

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

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

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

**BAILEY MALONE, 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 18

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

SEE STATEMENT 18

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
FOOD FOR THOUGHT P.O. BOX 1608 FORESTVILLE, CA 95436	NONE	PC	FREESTONE FUND - GRANT	100.
GRATON DAY LABOR CENTER 2981 BOWEN ST GRATON, CA 95444	NONE	PC	FREESTONE FUND - GRANT	100.
LIVING ROOM PO BOX 14056 SANTA ROSA, CA 95402	NONE	PC	FREESTONE FUND - GRANT	100.
OCCIDENTAL AREA HEALTH CENTER PO BOX 100 OCCIDENTAL, CA 95465	NONE	PC	FREESTONE FUND - GRANT	100.
PARTNERSHIP FOR CIVIL JUSTICE FUND 617 FLORIDA AVE NW WASHINGTON, DC 20001	NONE	PC	PARTNERSHIP FOR CIVIL JUSTICE FUND	20,000.
Total	SEE CONTINUATION SHEET(S)			20,500.
b Approved for future payment				
NONE				
Total				0.

Part XVI-A Analysis of Income-Producing Activities

Table with columns: (a) Business code, (b) Amount, (c) Exclusion code, (d) Amount, (e) Related or exempt function income. Rows include: 1 Program service revenue, 2 Membership dues and assessments, 3 Interest on savings and temporary cash investments, 4 Dividends and interest from securities, 5 Net rental income or (loss) from real estate, 6 Net rental income or (loss) from personal property, 7 Other investment income, 8 Gain or (loss) from sales of assets other than inventory, 9 Net income or (loss) from special events, 10 Gross profit or (loss) from sales of inventory, 11 Other revenue (including FEDERAL EXCISE TAX REFUND), 12 Subtotal, 13 Total.

(See worksheet in line 13 instructions to verify calculations.)

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

Table with 2 columns: 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). Row 11A: FEDERAL EXCISE TAX REFUND.

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code... a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash, (2) Other assets, b Other transactions: (1) Sales of assets to a noncharitable exempt organization, (2) Purchases of assets from a noncharitable exempt organization, (3) Rental of facilities, equipment, or other assets, (4) Reimbursement arrangements, (5) Loans or loan guarantees, (6) Performance of services or membership or fundraising solicitations, c Sharing of facilities, equipment, mailing lists, other assets, or paid employees, d If the answer to any of the above is "Yes," complete the following schedule...

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. Row 1: N/A.

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

b If "Yes," complete the following schedule. Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. Row 1: N/A.

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Signature of officer or trustee, Date 5/23/17, Title EXECUTIVE DIRECTOR. May the IRS discuss this return with the preparer shown below (see instr.)? [X] Yes [] No

Paid Preparer Use Only Print preparer's name PAUL VALACAK, Preparer's signature Paul Valacak CPA, Date 5/19/17, Check self-employed [], PTIN P00118036, Firm's name MFO EFILING SERVICES CO, Firm's EIN 20-1597091, Firm's address 111 E COURT STREET SUITE 3D FLINT, MI 48502-1649, Phone no. (810) 767-0136

CS FUND

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 1000 AIR PRODUCTS&CHEM APD	D	11/03/10	12/17/15
b 200 STANLEY BLACK & DECKER INC SWK	D	10/19/12	12/17/15
c 1450 STANLEY BLACK & DECKER INC SWK	D	06/28/12	12/17/15
d 151.431 VANGUARD 500 INDEX FUND VFIAX	P	07/29/14	09/26/16
e 828.8481 WORLD ASSET MGMT INTERNATIONAL FUND WAMI	P	12/31/11	12/18/15
f 1346.983 VANGUARD EMERGING MKTS STOCK INDEX ADMIR	P	07/29/14	03/10/16
g 4.592 VANGUARD EMERGING MKTS STOCK INDEX ADMIRAL	P	06/23/14	03/10/16
h 18.958 VANGUARD EMERGING MKTS STOCK INDEX ADMIRAL	P	09/23/14	03/10/16
i 22.062 VANGUARD EMERGING MKTS STOCK INDEX ADMIRAL	P	09/20/13	03/10/16
j 14.378 VANGUARD EMERGING MKTS STOCK INDEX ADMIRAL	P	12/19/13	03/10/16
k 8.077 VANGUARD EMERGING MKTS STOCK INDEX ADMIRAL	P	12/19/14	03/10/16
l 8.161 VANGUARD EMERGING MKTS STOCK INDEX ADMIRAL	P	03/24/14	03/10/16
m 320.513 VANGUARD EMERGING MKTS STOCK INDEX ADMIRA	P	02/04/14	03/10/16
n 35.122 VANGUARD EMERGING MKTS STOCK INDEX ADMIRAL	P	06/21/13	03/10/16
o 70.754 VANGUARD EMERGING MKTS STOCK INDEX ADMIRAL	P	07/30/09	03/10/16

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 130,534.		85,584.	44,950.
b 21,674.		14,055.	7,619.
c 157,137.		90,964.	66,173.
d 30,000.		27,548.	2,452.
e 13,019.			13,019.
f 36,800.		50,000.	-13,200.
g 125.		164.	-39.
h 518.		674.	-156.
i 603.		760.	-157.
j 393.		481.	-88.
k 221.		265.	-44.
l 223.		264.	-41.
m 8,756.		10,000.	-1,244.
n 960.		1,093.	-133.
o 1,933.		2,062.	-129.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(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	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			44,950.
b			7,619.
c			66,173.
d			2,452.
e			13,019.
f			-13,200.
g			-39.
h			-156.
i			-157.
j			-88.
k			-44.
l			-41.
m			-1,244.
n			-133.
o			-129.

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 }	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8	3	

523591
04-01-15

CS FUND

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 0.0168 NORTHPOINTE - RESIDUAL CHB008076	P	11/13/09	12/31/15
b 63 SOLARCITY CORPORATION SCTY	P	08/10/07	01/04/16
c 63 SOLARCITY CORPORATION SCTY	P	08/10/07	01/05/16
d 57.01 SOLARCITY CORPORATION SCTY	P	10/28/08	03/14/16
e 8.66 SOLARCITY CORPORATION SCTY	P	08/10/07	03/14/16
f 15.8 SOLARCITY CORPORATION SCTY	P	10/16/09	04/19/16
g 16.12 SOLARCITY CORPORATION SCTY	P	10/28/08	04/19/16
h 16.73 SOLARCITY CORPORATION SCTY	P	10/16/09	04/19/16
i 17.08 SOLARCITY CORPORATION SCTY	P	10/28/08	04/19/16
j 2191.381 STEELPATH MLP SELECT 40 CL I OSPSX	P	07/22/14	03/23/16
k 39.568 STEELPATH MLP SELECT 40 CL I OSPSX	P	08/11/14	03/23/16
l 665.412 STEELPATH MLP SELECT 40 CL I OSPSX	P	10/31/13	03/23/16
m 71.02 STEELPATH MLP SELECT 40 CL I OSPSX	P	11/07/13	03/23/16
n MFO D&D SMID CAP VALUE FUND (JOINT VENTURE)	P		
o MFO D&D SMID CAP VALUE FUND (JOINT VENTURE)	P		

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 17.		117.	-100.
b 3,117.		151.	2,966.
c 3,161.		151.	3,010.
d 1,462.		297.	1,165.
e 222.		21.	201.
f 479.		85.	394.
g 489.		84.	405.
h 500.		91.	409.
i 511.		89.	422.
j 18,736.		27,298.	-8,562.
k 338.		468.	-130.
l 5,689.		6,328.	-639.
m 607.		665.	-58.
n 6,221.		6,459.	-238.
o 523.		411.	112.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(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	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			-100.
b			2,966.
c			3,010.
d			1,165.
e			201.
f			394.
g			405.
h			409.
i			422.
j			-8,562.
k			-130.
l			-639.
m			-58.
n			-238.
o			112.

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 }	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8	3	

CS FUND

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a CROSSLINK VENTURES V FROM SCH K-1	P		
b CROSSLINK VENTURES V FROM SCH K-1	P		
c DRAPER FISHER JURVETSON GROWTH FUND FROM SCHEDULE	P		
d WAM INTERNATIONAL EQUITY COMMON TR FUND	P		
e WAM INTERNATIONAL EQUITY COMMON TR FUND	P		
f WAM INTERNATIONAL EQUITY COMMON TR FUND	P		
g WAM INTERNATIONAL EQUITY COMMON TR FUND	P		
h MFO EQUITY FUND (JOINT VENTURE)	P		
i MFO EQUITY FUND (JOINT VENTURE)	P		
j MFO WESTFIELD FUND A (JOINT VENTURE)	P		
k MFO WESTFIELD FUND A (JOINT VENTURE)	P		
l MFO TOWLE FUND (JOINT VENTURE)	P		
m MFO TOWLE FUND (JOINT VENTURE)	P		
n WAM INTL EQUITY FUND - RECOVERY OF DISTRIBUTIONS	P		
o MFO EQUITY FUND - RECOVERY OF DISTRIBUTIONS IN EX	P		

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 35.			35.
b		7,530.	-7,530.
c 384.			384.
d 202.		227.	-25.
e 7,512.		7,049.	463.
f		345.	-345.
g 151.			151.
h 3,574.		3,984.	-410.
i 8,193.		6,017.	2,176.
j 6,341.		7,847.	-1,506.
k 10,222.		5,535.	4,687.
l 1,470.		3,354.	-1,884.
m 7,479.		5,060.	2,419.
n		5,897.	-5,897.
o		3,294.	-3,294.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(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	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			35.
b			-7,530.
c			384.
d			-25.
e			463.
f			-345.
g			151.
h			-410.
i			2,176.
j			-1,506.
k			4,687.
l			-1,884.
m			2,419.
n			-5,897.
o			-3,294.

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 }	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8	3	

CS FUND

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a MFO TOWLE FUND - RECOVERY OF DISTRIBUTIONS IN EXC	P		
b MFO WESTFIELD FUND A - RECOVERY OF DISTRIBUTIONS	P		
c TWC-VISA INC/TRAILPAY DOUBLE REPORTED	P		
d TWC-VISA INC/TRAILPAY DOUBLE REPORTED	P		
e CAPITAL GAINS DIVIDENDS			
f			
g			
h			
i			
j			
k			
l			
m			
n			
o			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a		10,583.	-10,583.
b		3,195.	-3,195.
c 1,401.		1,401.	0.
d 3.		3.	0.
e 1,686.			1,686.
f			
g			
h			
i			
j			
k			
l			
m			
n			
o			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(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	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			-10,583.
b			-3,195.
c			0.
d			0.
e			1,686.
f			
g			
h			
i			
j			
k			
l			
m			
n			
o			

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 }	2	95,671.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8	3	N/A

523591
04-01-15

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
TWIN HILLS FIREFIGHTERS 4500 HESSEL ROAD SEBASTOPOL, CA 95472	NONE	PC	FREESTONE FUND - GRANT	100.
Total from continuation sheets				100.

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

2015

Name of the organization

CS FUND

Employer identification number

95-3607882

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

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

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 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.

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

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 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) (2015)

Name of organization CS FUND	Employer identification number 95-3607882
--	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MARYANNE MOTT 469 BOHEMIAN HWY FREESTONE, CA 95472	\$ 130,905.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	MARYANNE MOTT 469 BOHEMIAN HWY FREESTONE, CA 95472	\$ 178,777.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	MARYANNE MOTT 469 BOHEMIAN HWY FREESTONE, CA 95472	\$ 270,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	MARYANNE MOTT 469 BOHEMIAN HWY FREESTONE, CA 95472	\$ 370,318.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization CS FUND	Employer identification number 95-3607882
--	---

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	700 SHS BLACKSTONE INC _____ _____ _____	\$ 130,905.	12/15/15
2	3100 SHS STANLEY BLACK & DECKER INC _____ _____ _____	\$ 178,777.	12/15/15
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____

Name of organization CS FUND	Employer identification number 95-3607882
--	---

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

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

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
BLACKROCK TREASURY SIF - I/O	6.	6.	
BLACKROCK TREASURY SIF -FLINT	52.	52.	
EXCHANGE BANK	1.	1.	
MERRILL LYNCH GOVERNMENT FUND	96.	96.	
MERRILL LYNCH TREASURY FUND	134.	134.	
VANGUARD	17.	17.	
TOTAL TO PART I, LINE 3	306.	306.	

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
DRAPER FISHER JURVETSON GROWTH FUND FROM SCHEDULE MFO ALTERNATE	17.	0.	17.	17.	
ASSET MUTUAL FUNDS MFO CORPORATE BOND MUTUAL FUNDS	2,765.	561.	2,204.	2,204.	
MFO D&D SMID CAP VALUE FUND JOINT VENTURE)	5,206.	111.	5,095.	5,095.	
MFO EQUITY FUND (JOINT VENTURE)	368.	1.	367.	367.	
MFO FOREIGN EQUITY FUNDS	1,530.	0.	1,530.	1,530.	
MFO STOCK MUTUAL FUNDS	5,384.	732.	4,652.	4,652.	
MFO TOWLE FUND (JOINT VENTURE)	8,861.	0.	8,861.	8,861.	
MFO WESTFIELD FUND A (JOINT VENTURE)	193.	2.	191.	191.	
TOBIAS WHITE & CO NOMINEE	148.	6.	142.	142.	
WAM INTERNATIONAL EQUITY COMMON TR FUND	1,793.	273.	1,520.	1,520.	
TO PART I, LINE 4	237.	0.	237.	237.	
	26,502.	1,686.	24,816.	24,816.	

FORM 990-PF	RENTAL INCOME	STATEMENT	3
KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME	
PASTURE RENT	1	200.	
489 BOHEMIAN HWY	2	18,000.	
TOTAL TO FORM 990-PF, PART I, LINE 5A		18,200.	

FORM 990-PF	OTHER INCOME	STATEMENT	4
DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
FEDERAL EXCISE TAX REFUND	10,540.	0.	
TOTAL TO FORM 990-PF, PART I, LINE 11	10,540.	0.	

FORM 990-PF	LEGAL FEES	STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
LEGAL	10,051.	0.	(D) CHARITABLE PURPOSES 10,051.
TO FM 990-PF, PG 1, LN 16A	10,051.	0.	10,051.

FORM 990-PF	ACCOUNTING FEES	STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
BOOKKEEPING & ACCOUNTING	13,300.	0.	(D) CHARITABLE PURPOSES 13,300.
ACCOUNTING MANAGEMENT FEE	2,000.	0.	2,000.
TO FORM 990-PF, PG 1, LN 16B	15,300.	0.	15,300.

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEE	6,000.	6,000.		0.
APPRAISAL FEES FOR INVESTMENT ASSET	552.	552.		0.
APPRAISAL FEES FOR CHARITABLE USE ASSET	1,798.	0.		1,798.
TO FORM 990-PF, PG 1, LN 16C	8,350.	6,552.		1,798.

FORM 990-PF	TAXES			STATEMENT 8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
REAL ESTATE TAXES	9,381.	2,249.		7,132.
FOREIGN TAX WITHHELD	395.	395.		0.
MFO TOWLE FUND (JOINT VENTURE) FOREIGN TAXES WITHHELD	1.	1.		0.
TO FORM 990-PF, PG 1, LN 18	9,777.	2,645.		7,132.

FORM 990-PF	OTHER EXPENSES			STATEMENT 9
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCESS REIMBURSEMENT SEE STATEMENT 18	-19,056.	0.		-19,056.
BANK CHARGES & CREDIT CARD FEES	330.	0.		330.
STATE FILING FEES	160.	0.		160.
ADR FEES	3.	3.		0.
CROSSLINK VENTURES V INVESTMENT INT. EXP. FROM SCH K-1	21.	21.		0.
CROSSLINK VENTURES V PORTFOLIO DEDUCTIONS FROM SCH K-1	450.	450.		0.

DRAPER FISHER JURVETSON GROWTH FUND PORTFOLIO DEDUCTIONS FROM SCHEDULE K-1	1,706.	1,706.	0.
DRAPER FISHER JURVETSON GROWTH FUND NON-DEDUCTIBLE EXP FROM SCHEDULE K-1	3.	3.	0.
MFO D&D SMID CAP VALUE FUND PORTFOLIO DEDUCTIONS (JOINT VENTURE)	85.	85.	0.
MFO EQUITY FUND PORTFOLIO DEDUCTIONS (JOINT VENTURE)	3.	3.	0.
MFO TOWLE FUND PORTFOLIO DEDUCTIONS (JOINT VENTURE)	145.	145.	0.
MFO WESTFIELD FUND A PORTFOLIO DEDUCTIONS (JOINT VENTURE)	133.	133.	0.
WAM INTERNATIONAL EQUITY COMMON TR FUND	20.	20.	0.
TO FORM 990-PF, PG 1, LN 23	-15,997.	2,569.	-18,566.

FORM 990-PF OTHER INCREASES IN NET ASSETS OR FUND BALANCES STATEMENT 10

DESCRIPTION	AMOUNT
PRIOR YEAR GRANT RECOVERED IN CURRENT YEAR	144.
TOTAL TO FORM 990-PF, PART III, LINE 3	144.

FORM 990-PF OTHER DECREASES IN NET ASSETS OR FUND BALANCES STATEMENT 11

DESCRIPTION	AMOUNT
EXCESS OF FMV OVER DONOR'S BASIS OF SECURITIES RECEIVED	119,080.
TOTAL TO FORM 990-PF, PART III, LINE 5	119,080.

FORM 990-PF	CORPORATE STOCK	STATEMENT 12
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
3942.206 TEMPLETON INSTITUTIONAL FOREIGN EQUITY	89,170.	74,468.
457.569 VANGUARD ADMIRAL EUROPEAN STOCK INDEX FUND	32,071.	26,928.
5626.026 VANGUARD ADMIRAL EMERGING MARKETS STOCK INDEX FUND	62,582.	65,993.
11115.537 DREYFUS TOTAL EMERGING MARKETS CL I	119,728.	127,384.
19595.1 MFO - D&D SMID CAP VALUE	19,658.	21,133.
12712.148 MFO EQUITY FUND	0.	95,947.
5956.5373998 MFO TOWLE FUND	0.	38,655.
275.7897667 MFO - WESTFIELD FUND A	0.	20,254.
.0 MFO NORTHPOINTE FUND A -RESIDUAL VALUATION: FMV	0.	0.
65 TWITTER INC	803.	1,167.
TOTAL TO FORM 990-PF, PART II, LINE 10B	324,012.	471,929.

FORM 990-PF	CORPORATE BONDS	STATEMENT 13
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
6904.143 VANGUARD SHORT-TERM INVESTMENT GRADE BOND	74,036.	74,289.
7047.522 VANGUARD HIGH-YIELD CORP - INVESTOR VALUATION: FMV	41,926.	41,298.
1694.597 VANGUARD INDEX FDS 500	306,405.	333,073.
3059.895 VANGUARD INDEX FDS SMCP INDEX	166,756.	171,813.
TOTAL TO FORM 990-PF, PART II, LINE 10C	589,123.	620,473.

FORM 990-PF	OTHER INVESTMENTS	STATEMENT 14	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
4357.348 BLACKROCK FLOATING RATE INC PORTFOLIO CL	FMV	44,961.	44,271.
699.499 VANGUARD ADMIRAL REIT INDEX FUND	FMV	68,885.	81,121.
0.00 STEELPATH MLP FUNDS SELECT 40 CL A	FMV	0.	0.

CS FUND		95-3607882		
1387.302	TEMPLETON GLOBAL BOND FD	FMV	17,835.	16,037.
85000	CROSSLINK VENTURES V	FMV	14,412.	16,443.
80000	DRAPER FISHER JURVETSON	FMV		
	GROWTH FUND		34,786.	63,195.
8470.267	GOLDMAN SACHS MLP ENERGY -	FMV		
	INS		58,368.	65,729.
3968	BALTER LONG/SHORT EQUITY	FMV		
	INSTITUTIONAL FUND		40,000.	41,151.
6438	CATALYST HEDGED FUTURES	FMV		
	STRATEGY FUND CL I		72,000.	78,421.
6785	OTTER CREEK LONG/SHORT	FMV		
	OPPORTUNITY FUND		82,000.	83,592.
3500.00	PERSHING SQUARE HOLDINGS	FMV		
	USD PAR ORDINARY		54,150.	47,355.
TOTAL TO FORM 990-PF, PART II, LINE 13			487,397.	537,315.

FORM 990-PF DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 15

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
469 BOHEMIAN HWY	271,304.	271,304.	0.
IMPROVEMENTS - 469 BOHEMIAN			
HWY	81,701.	73,588.	8,113.
EQUIPMENT	46,984.	28,472.	18,512.
COMPUTER EQUIPMENT	24,290.	17,817.	6,473.
FURNITURE & FIXTURES	28,753.	28,159.	594.
FURNITURE & FIXTURES	1,670.	1,670.	0.
BUILDING	408,404.	0.	408,404.
SOLAR PANELS	26,609.	0.	26,609.
LANDSCAPING	23,062.	0.	23,062.
FURNITURE & FIXTURES	18,155.	0.	18,155.
TOTAL TO FM 990-PF, PART II, LN 14	930,932.	421,010.	509,922.

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS STATEMENT 16
 TRUSTEES AND FOUNDATION MANAGERS

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
SEE ALSO FEDERAL STMTS 16 & 17 FOR COMPENSATION EXPLANATION AND RECONCILIATION FREESTONE, CA 95472	OR CA-199 STMT 7 0.00		0.	0.
MARYANNE MOTT 469 BOHEMIAN HWY FREESTONE, CA 95472	TRUSTEE 4.00		0.	0.
MICHAEL WARSH 469 BOHEMIAN HWY FREESTONE, CA 95472	TRUSTEE 2.00	3,375.	0.	0.
CORINNE MEADOWS-EFRAM 469 BOHEMIAN HWY FREESTONE, CA 95472	VICE-PRESIDENT/TRUSTEE 3.00	11,625.	0.	0.
MARISE MEYNET STEWART 469 BOHEMIAN HWY FREESTONE, CA 95472	PRESIDENT/TRUSTEE 3.00	11,625.	0.	0.
TERESA ROBINSON 469 BOHEMIAN HWY FREESTONE, CA 95472	SECRETARY/TRUSTEE 2.00	3,375.	0.	0.
KAU'I KELIPIO 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	126,520.	32,799.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		159,895.	32,799.	0.

FORM 990-PF

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

STATEMENT 17

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	\$126,520
BOARD TRUSTEES	33,375
	<u>\$159,895</u>

GENERAL EXPLANATION

STATEMENT 18

FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

FORM 990PF, PAGE 1, PART I, COLUMN A - ADJUSTMENT OF OFFICER/TRUSTEE COMP

EXPLANATION:

THIS FOUNDATION SHARES FACILITIES AND PERSONNEL WITH ANOTHER PRIVATE FOUNDATION (WARSH MOTT LEGACY - FEDERAL IDENTIFICATION NUMBER 68-0049658). 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	159,895
REIMBURSEMENT FROM FOUNDATION SHARING EXPENSES	-159,895
	<u>0,000</u>

NET TO PART I, LINE 13, COLUMN A

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

TOTAL COMPENSATION OF OTHER EMPLOYEES	468,590
REIMBURSEMENT FROM FOUNDATION SHARING	-468,590
	<u>0,000</u>

NET TO PART I, LINE 14, COLUMN A

GENERAL EXPLANATION

STATEMENT 19

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:

BAILEY MALONE
 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

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 AS 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 INITIATE SUPPORT FOR PROJECTS THAT FALL OUTSIDE OF THE ESTABLISHED GUIDELINES.

2015 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No.	Description	Date Acquired	Method	Life	Conv	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		16	271,304.				271,304.	271,304.		0.	271,304.
2	IMPROVEMENTS - 469 BOHEMIAN HWY	11/23/94	SL	10.00		16	81,701.				81,701.	73,588.		0.	73,588.
3	EQUIPMENT	VARIOUS	SL	5.00		16	46,984.				46,984.	28,472.		0.	28,472.
4	COMPUTER EQUIPMENT	VARIOUS	SL	5.00		16	24,290.				24,290.	17,817.		0.	17,817.
5	FURNITURE & FIXTURES	VARIOUS	SL	5.00		16	28,753.				28,753.	28,159.		0.	28,159.
6	FURNITURE & FIXTURES	03/15/91	SL	5.00		16	1,670.				1,670.	1,670.		0.	1,670.
7	BUILDING	09/01/09	SL	25.00		16	408,404.				408,404.			0.	
8	SOLAR PANELS	09/01/09	SL	7.00		16	26,609.				26,609.			0.	
9	LANDSCAPING	09/01/09	SL	15.00		16	23,062.				23,062.			0.	
10	FURNITURE & FIXTURES	09/01/09	SL	7.00		16	18,155.				18,155.			0.	
	* TOTAL 990-PF PG 1 DEPR						930,932.				930,932.	421,010.		0.	421,010.

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

	Enter filer's identifying number	
Type or print	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
	CS FUND	95-3607882
	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN)
	469 BOHEMIAN HIGHWAY	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	FREESTONE, CA 95472-9579	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

BAILY MALONE

- The books are in the care of ▶ **469 BOHEMIAN HIGHWAY - FREESTONE, CA 95472**
Telephone No. ▶ **(707) 874-2942** Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **JUNE 15, 2017**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning **NOV 1, 2015**, and ending **OCT 31, 2016**.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	2,562.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	6,000.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

TAXABLE YEAR
2015

California e-file Return Authorization for Exempt Organizations

FORM
8453-EO

Exempt Organization name CS FUND	Identifying number 95-3607882
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Part I Electronic Return Information (whole dollars only)

1 Total gross receipts (Form 199, line 4)	1	<u>1,497,483.00</u>
2 Total gross income (Form 199, line 8)	2	<u>1,099,533.00</u>
3 Total expenses and disbursements (Form 199, line 9)	3	<u>47,981.00</u>

Part II Settle Your Account Electronically for Taxable Year 2015

4 Electronic funds withdrawal 4a Amount 4b Withdrawal date (mm/dd/yyyy)

Part III Banking Information (Have you verified the exempt organization's banking information?)

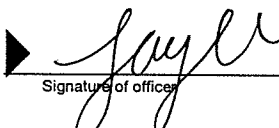
5 Routing number _____

6 Account number _____ 7 Type of account: Checking 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 electronic funds withdrawal for the amount listed on line 4a.

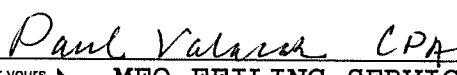
Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization's 2015 California electronic return. To the best of my knowledge and belief, the exempt organization's return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization's fee liability, the exempt organization will remain liable for the fee liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. If the processing of the exempt organization's return or refund is delayed, I authorize the FTB to disclose to the ERO or intermediate service provider the reason(s) for the delay.

Sign Here  5/23/17 **EXECUTIVE DIRECTOR**

Signature of officer Date Title

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, 2015 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 the exempt organization 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 Must Sign	ERO's signature 	Date <u>5/19/17</u>	Check if also paid preparer <input checked="" type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's PTIN <u>378-68-1951</u>
	Firm's name (or yours if self-employed) and address MFO EFILING SERVICES CO. 111 E. COURT STREET SUITE 3D FLINT, MI	FEIN 20-1597091	ZIP code 48502		

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 Preparer Must Sign	Paid preparer's signature 	Date	Check if self-employed <input type="checkbox"/>	Paid preparer's PTIN <u>P00118036</u>
	Firm's name (or yours if self-employed) and address MFO EFILING SERVICES CO. 111 E COURT STREET SUITE 3D FLINT, MI	FEIN 20-1597091	ZIP code 48502-1649	

2015

California Exempt Organization Annual Information Return

199

Calendar Year 2015 or fiscal year beginning (mm/dd/yyyy) 11/01/2015, and ending (mm/dd/yyyy) 10/31/2016

Corporation/Organization name CS FUND <small>Additional information. See instructions.</small>	California corporation number 1017528
Street address (suite or room) 469 BOHEMIAN HIGHWAY	PMB no.
City FREESTONE	State CA
Foreign country name	Foreign province/state/county
	Foreign postal code
	FEIN 95-3607882
	ZIP code 95472-9579

<p>A First Return <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>B Amended Return <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>C IRC Section 4947(a)(1) trust <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>D Final Information Return? <input type="checkbox"/> Dissolved <input type="checkbox"/> Surrendered (Withdrawn) <input type="checkbox"/> Merged/Reorganized Enter date: (mm/dd/yyyy) _____</p> <p>E Check accounting method: (1) <input type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input checked="" type="checkbox"/> Other</p> <p>F Federal return filed? (1) <input type="checkbox"/> 990T (2) <input checked="" type="checkbox"/> 990-PF (3) <input type="checkbox"/> Sch H (990) (4) <input type="checkbox"/> Other 990 series</p> <p>G Is this a group filing? See instructions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>H Is this organization in a group exemption <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," what is the parent's name? _____</p> <p>I Did the organization have any changes to its guidelines not reported to the FTB? See instructions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>J If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>K Is the organization exempt under R&TC Section 23701g? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," enter the gross receipts from nonmember sources \$ _____</p> <p>L If organization is exempt under R&TC Section 23701d and meets the filing fee exception, check box. No filing fee is required. <input type="checkbox"/></p> <p>M Is the organization a Limited Liability Company? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>N Did the organization file Form 100 or Form 109 to report taxable income? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>O Is the organization under audit by the IRS or has the IRS audited in a prior year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>P Is a federal Form 1023/1024 pending? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date filed with IRS _____</p>
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Part I Complete Part I unless not required to file this form. See General Instructions B and C.

Receipts and Revenues	1 Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	547,483.00
	2 Gross dues and assessments from members and affiliates	2	00
	3 Gross contributions, gifts, grants, and similar amounts received <small>Total gross receipts for filing requirement test. Add line 1 through line 3.</small>	3	950,000.00
	4 This line must be completed. If the result is less than \$50,000, see General Instruction B	4	1,497,483.00
	5 Cost of goods sold	5	00
	6 Cost or other basis, and sales expenses of assets sold	6	397,950.00
	7 Total costs. Add line 5 and line 6	7	397,950.00
	8 Total gross income. Subtract line 7 from line 4	8	1,099,533.00
Expenses	9 Total expenses and disbursements. From Side 2, Part II, line 18	9	47,981.00
	10 Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	1,051,552.00
Filing Fee	11 Total payments	11	00
	12 Use tax. See General Instruction K	12	00
	13 Payment balance. If line 11 is more than line 12, subtract line 12 from line 11	13	00
	14 Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12	14	00
	15 Filing fee \$10 or \$25. See General Instruction F	15	10.00
	16 Penalties and Interest. See General Instruction J	16	00
	17 Balance due. Add line 12, line 15, and line 16. Then subtract line 11 from the result	17	10.00

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer	Title EXECUTIVE DIRE	Date 5/23/17	Telephone 707-874-2942
Paid Preparer's Use Only	Preparer's signature	Date 5/9/17	Check if self-employed <input type="checkbox"/>	PTIN P00118036
	Firm's name (or yours, if self-employed) and address MFO EFILING SERVICES CO 111 E COURT STREET SUITE 3D FLINT, MI 48502-1649			FEIN 20-1597091
				Telephone (810) 767-0136

May the FTB discuss this return with the preparer shown above? See instructions Yes 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.

528951 11-25-15

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions	•	1	00	
	2	Interest	•	2	306.00	
	3	Dividends	•	3	24,816.00	
	4	Gross rents	•	4	18,200.00	
	5	Gross royalties	•	5	00	
	6	Gross amount received from sale of assets (See Instructions)	STATEMENT 3 •	6	491,935.00	
	7	Other income	SEE STATEMENT 4 •	7	12,226.00	
	8	Total gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1		8	547,483.00	
	9	Contributions, gifts, grants, and similar amounts paid	STATEMENT 5 •	9	20,500.00	
	10	Disbursements to or for members	•	10	00	
	11	Compensation of officers, directors, and trustees	SEE STATEMENT 6 •	11	159,895.00	
	12	Other salaries and wages	•	12	00	
	Expenses and Disbursements	13	Interest	•	13	00
		14	Taxes	•	14	9,777.00
		15	Rents	•	15	00
		16	Depreciation and depletion (See instructions)	•	16	0.00
		17	Other Expenses and Disbursements	SEE STATEMENT 7 •	17	-142,191.00
		18	Total expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9		18	47,981.00

Schedule L Balance Sheets	Beginning of taxable year		End of taxable year	
	(a)	(b)	(c)	(d)
Assets				
1 Cash		226,571.		768,099.
2 Net accounts receivable		110.		159.
3 Net notes receivable				
4 Inventories				
5 Federal and state government obligations				
6 Investments in other bonds STMT 8		421,672.		589,123.
7 Investments in stock STMT 9		267,152.		324,012.
8 Mortgage loans				
9 Other investments STMT 10		317,503.		487,397.
10 a Depreciable assets	930,932.		936,807.	
b Less accumulated depreciation	(421,010.)	509,922.	(421,010.)	515,797.
11 Land		123,000.		123,000.
12 Other assets				
13 Total assets		1,865,930.		2,807,587.
Liabilities and net worth				
14 Accounts payable		-89.		32,633.
15 Contributions, gifts, or grants payable				
16 Bonds and notes payable				
17 Mortgages payable				
18 Other liabilities STMT 11		23,681.		
19 Capital stock or principal fund				
20 Paid-in or capital surplus. Attach reconciliation				
21 Retained earnings or income fund		1,842,338.		2,774,954.
22 Total liabilities and net worth		1,865,930.		2,807,587.

Schedule M-1 Reconciliation of income per books with income per return

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000.

1 Net income per books	• 1,075,820.	7 Income recorded on books this year not included in this return.	•
2 Federal income tax	•	8 Deductions in this return not charged against book income this year STMT 12	• 24,268.
3 Excess of capital losses over capital gains	•	9 Total. Add line 7 and line 8	24,268.
4 Income not recorded on books this year	•	10 Net income per return.	
5 Expenses recorded on books this year not deducted in this return	•	Subtract line 9 from line 6	1,051,552.
6 Total. Add line 1 through line 5	1,075,820.		

FORM 199

CASH CONTRIBUTIONS
INCLUDED ON PART I, LINE 3

STATEMENT 1

<u>CONTRIBUTOR'S NAME</u>	<u>CONTRIBUTOR'S ADDRESS</u>	<u>DATE OF GIFT</u>	<u>AMOUNT</u>
MARYANNE MOTT	469 BOHEMIAN HWY FREESTONE, CA 95472	12/30/15	270,000.
MARYANNE MOTT	469 BOHEMIAN HWY FREESTONE, CA 95472	01/04/16	370,318.
TOTAL INCLUDED ON LINE 3			<u>640,318.</u>

FORM 199

NONCASH CONTRIBUTIONS
INCLUDED ON PART I, LINE 3

STATEMENT 2

<u>CONTRIBUTOR'S NAME</u>	<u>CONTRIBUTOR'S ADDRESS</u>		
MARYANNE MOTT	469 BOHEMIAN HWY FREESTONE, CA 95472		
<u>PROPERTY DESCRIPTION</u>	<u>DATE OF GIFT</u>	<u>TOTAL AMOUNT</u>	<u>FMV OF GIFT</u>
700 SHS BLACKSTONE INC	12/15/15	130,905.	130,905.

<u>CONTRIBUTOR'S NAME</u>	<u>CONTRIBUTOR'S ADDRESS</u>		
MARYANNE MOTT	469 BOHEMIAN HWY FREESTONE, CA 95472		
<u>PROPERTY DESCRIPTION</u>	<u>DATE OF GIFT</u>	<u>TOTAL AMOUNT</u>	<u>FMV OF GIFT</u>
3100 SHS STANLEY BLACK & DECKER INC	12/15/15	178,777.	178,777.

TOTAL INCLUDED ON LINE 3

309,682.

FORM 199 GROSS AMOUNT FROM SALE OF INVESTMENT PROPERTY STATEMENT 3

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	
1000 AIR PRODUCTS&CHEM APD	11/03/10	12/17/15	DONATED	
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
	85,584.	0.	0.	130,534.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	
200 STANLEY BLACK & DECKER INC SWK	10/19/12	12/17/15	DONATED	
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
	14,055.	0.	0.	21,674.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	
1450 STANLEY BLACK & DECKER INC SWK	06/28/12	12/17/15	DONATED	
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
	90,964.	0.	0.	157,137.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	
151.431 VANGUARD 500 INDEX FUND VFIAX	07/29/14	09/26/16	PURCHASED	
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
	27,548.	0.	0.	30,000.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	
828.8481 WORLD ASSET MGMT INTERNATIONAL FUND WAMIF	12/31/11	12/18/15	PURCHASED	
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
	0.	0.	0.	13,019.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	
1346.983 VANGUARD EMERGING MKTS STOCK INDEX ADMIRAL SHRS VEMAX	07/29/14	03/10/16	PURCHASED	
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
	50,000.	0.	0.	36,800.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	
4.592 VANGUARD EMERGING MKTS STOCK INDEX ADMIRAL SHRS VEMAX	06/23/14	03/10/16	PURCHASED	
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
	164.	0.	0.	125.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	
18.958 VANGUARD EMERGING MKTS STOCK INDEX ADMIRAL SHRS VEMAX	09/23/14	03/10/16	PURCHASED	
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
	674.	0.	0.	518.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	
22.062 VANGUARD EMERGING MKTS STOCK INDEX ADMIRAL SHRS VEMAX	09/20/13	03/10/16	PURCHASED	
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
	760.	0.	0.	603.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	
14.378 VANGUARD EMERGING MKTS STOCK INDEX ADMIRAL SHRS VEMAX	12/19/13	03/10/16	PURCHASED	
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
	481.	0.	0.	393.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	
8.077 VANGUARD EMERGING MKTS STOCK INDEX ADMIRAL SHRS VEMAX	12/19/14	03/10/16	PURCHASED	
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
	265.	0.	0.	221.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	
8.161 VANGUARD EMERGING MKTS STOCK INDEX ADMIRAL SHRS VEMAX	03/24/14	03/10/16	PURCHASED	
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
	264.	0.	0.	223.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	
320.513 VANGUARD EMERGING MKTS STOCK INDEX ADMIRAL SHRS VEMAX	02/04/14	03/10/16	PURCHASED	
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
	10,000.	0.	0.	8,756.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	
35.122 VANGUARD EMERGING MKTS STOCK INDEX ADMIRAL SHRS VEMAX	06/21/13	03/10/16	PURCHASED	
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
	1,093.	0.	0.	960.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	
70.754 VANGUARD EMERGING MKTS STOCK INDEX ADMIRAL SHRS VEMAX	07/30/09	03/10/16	PURCHASED	
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE	GROSS SALES PRICE
	2,062.	0.	0.	1,933.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
0.0168 NORTHPOINTE - RESIDUAL CHB008076	11/13/09	12/31/15	PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	117.	0.	0.	17.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
63 SOLARCITY CORPORATION SCTY	08/10/07	01/04/16	PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	151.	0.	0.	3,117.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
63 SOLARCITY CORPORATION SCTY	08/10/07	01/05/16	PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	151.	0.	0.	3,161.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
57.01 SOLARCITY CORPORATION SCTY	10/28/08	03/14/16	PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	297.	0.	0.	1,462.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
8.66 SOLARCITY CORPORATION SCTY	08/10/07	03/14/16	PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	21.	0.	0.	222.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
15.8 SOLARCITY CORPORATION SCTY	10/16/09	04/19/16	PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	85.	0.	0.	479.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
16.12 SOLARCITY CORPORATION SCTY	10/28/08	04/19/16	PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	84.	0.	0.	489.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
16.73 SOLARCITY CORPORATION SCTY	10/16/09	04/19/16	PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	91.	0.	0.	500.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
17.08 SOLARCITY CORPORATION SCTY	10/28/08	04/19/16	PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	89.	0.	0.	511.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
2191.381 STEELPATH MLP SELECT 40 CL I OSPSX	07/22/14	03/23/16	PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	27,298.	0.	0.	18,736.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
39.568 STEELPATH MLP SELECT 40 CL I OSPSX	08/11/14	03/23/16	PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	468.	0.	0.	338.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
665.412 STEELPATH MLP SELECT 40 CL I OSPSX	10/31/13	03/23/16	PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	6,328.	0.	0.	5,689.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
71.02 STEELPATH MLP SELECT 40 CL I OSPSX	11/07/13	03/23/16	PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	665.	0.	0.	607.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
MFO D&D SMID CAP VALUE FUND (JOINT VENTURE)			PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	6,459.	0.	0.	6,221.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
MFO D&D SMID CAP VALUE FUND (JOINT VENTURE)			PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	411.	0.	0.	523.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
CROSSLINK VENTURES V FROM SCH K-1			PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	0.	0.	0.	35.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
CROSSLINK VENTURES V FROM SCH K-1			PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	7,530.	0.	0.	0.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
DRAPER FISHER JURVETSON GROWTH FUND FROM SCHEDULE K-1			PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	0.	0.	0.	384.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
WAM INTERNATIONAL EQUITY COMMON TR FUND			PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	227.	0.	0.	202.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
WAM INTERNATIONAL EQUITY COMMON TR FUND			PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	7,049.	0.	0.	7,512.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
WAM INTERNATIONAL EQUITY COMMON TR FUND			PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	345.	0.	0.	0.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
WAM INTERNATIONAL EQUITY COMMON TR FUND			PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	0.	0.	0.	151.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
MFO EQUITY FUND (JOINT VENTURE)			PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	3,984.	0.	0.	3,574.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
MFO EQUITY FUND (JOINT VENTURE)			PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	6,017.	0.	0.	8,193.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
MFO WESTFIELD FUND A (JOINT VENTURE)			PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	7,847.	0.	0.	6,341.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
MFO WESTFIELD FUND A (JOINT VENTURE)			PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	5,535.	0.	0.	10,222.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
MFO TOWLE FUND (JOINT VENTURE)			PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	3,354.	0.	0.	1,470.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
MFO TOWLE FUND (JOINT VENTURE)			PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	5,060.	0.	0.	7,479.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
WAM INTL EQUITY FUND - RECOVERY OF DISTRIBUTIONS IN EXCESS OF BASIS			PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	5,897.	0.	0.	0.

<u>DESCRIPTION</u>	<u>DATE ACQUIRED</u>	<u>DATE SOLD</u>	<u>METHOD ACQUIRED</u>	
MFO EQUITY FUND - RECOVERY OF DISTRIBUTIONS IN EXCESS OF BASIS			PURCHASED	
	<u>COST OR OTHER BASIS</u>	<u>DEPREC.</u>	<u>EXPENSE OF SALE</u>	<u>GROSS SALES PRICE</u>
	3,294.	0.	0.	0.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED
MFO TOWLE FUND - RECOVERY OF DISTRIBUTIONS IN EXCESS OF BASIS			PURCHASED
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE
	GROSS SALES PRICE		
	10,583.	0.	0.
			0.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED
MFO WESTFIELD FUND A - RECOVERY OF DISTRIBUTIONS IN EXCESS OF BASIS			PURCHASED
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE
	GROSS SALES PRICE		
	3,195.	0.	0.
			0.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED
TWC-VISA INC/TRAILPAY DOUBLE REPORTED			PURCHASED
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE
	GROSS SALES PRICE		
	1,401.	0.	0.
			1,401.

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED
TWC-VISA INC/TRAILPAY DOUBLE REPORTED			PURCHASED
	COST OR OTHER BASIS	DEPREC.	EXPENSE OF SALE
	GROSS SALES PRICE		
	3.	0.	0.
			3.

TOTAL ON FORM 199, PG 2, LINE 6	397,950.	0.	0.	491,935.
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FORM 199	OTHER INCOME	STATEMENT	4
<u>DESCRIPTION</u>		<u>AMOUNT</u>	
CAPITAL GAINS DIVIDENDS		1,686.	
FEDERAL EXCISE TAX REFUND		10,540.	
TOTAL TO FORM 199, PART II, LINE 7		12,226.	

FORM 199 CASH CONTRIBUTIONS, GIFTS, GRANTS STATEMENT 5
AND SIMILAR AMOUNTS PAID

ACTIVITY CLASSIFICATION: GENERAL SUPPORT

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
FOOD FOR THOUGHT P.O. BOX 1608 - FORESTVILLE, CA 95436	NONE	100.

ORGANIZATIONAL STATUS: PUBLIC CHARITY

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
GRATON DAY LABOR CENTER 2981 BOWEN ST - GRATON, CA 95444	NONE	100.

ORGANIZATIONAL STATUS: PUBLIC CHARITY

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
LIVING ROOM PO BOX 14056 - SANTA ROSA, CA 95402	NONE	100.

ORGANIZATIONAL STATUS: PUBLIC CHARITY

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
OCCIDENTAL AREA HEALTH CENTER PO BOX 100 - OCCIDENTAL, CA 95465	NONE	100.

ORGANIZATIONAL STATUS: PUBLIC CHARITY

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
PARTNERSHIP FOR CIVIL JUSTICE FUND 617 FLORIDA AVE NW - WASHINGTON, DC 20001	NONE	20,000.

ORGANIZATIONAL STATUS: PUBLIC CHARITY

<u>DONEES NAME AND ADDRESS</u>	<u>RELATIONSHIP</u>	<u>AMOUNT</u>
TWIN HILLS FIREFIGHTERS 4500 HESSEL ROAD - SEBASTOPOL, CA 95472	NONE	100.

ORGANIZATIONAL STATUS: PUBLIC CHARITY

TOTAL FOR THIS
ACTIVITY 20,500.

TOTAL INCLUDED ON FORM 199, PART II, LINE 9 20,500.

FORM 199 COMPENSATION OF OFFICERS, DIRECTORS AND TRUSTEES STATEMENT 6

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HRS WORKED/WK</u>	<u>COMPENSATION</u>
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	11,625.
MARISE MEYNET STEWART 469 BOHEMIAN HWY FREESTONE, CA 95472	PRESIDENT/TRUSTEE 3.00	11,625.

CS FUND		95-3607882
TERESA ROBINSON 469 BOHEMIAN HWY FREESTONE, CA 95472	SECRETARY/TRUSTEE 2.00	3,375.
KAU'I KELIPIO 469 BOHEMIAN HWY FREESTONE, CA 95472	TREASURER/TRUSTEE 2.00	3,375.
ROXANNE TURNAGE 469 BOHEMIAN HWY FREESTONE, CA 95472	EXECUTIVE DIRECTOR 20.00	126,520.
TOTAL TO FORM 199, PART II, LINE 11		159,895.

FORM 199	OTHER EXPENSES	STATEMENT	7
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DESCRIPTION	AMOUNT
PART II, LINE 11 HAS BEEN REDUCED BY THE FOLLOWING REIMBURSEMENT FROM ANOTHER FOUNDATION:	0.
EXECUTIVE DIRECTOR \$ 126,520	0.
BOARD TRUSTEES 33,375	0.
	-159,895.
LEGAL FEES	10,051.
ACCOUNTING FEES	15,300.
OTHER PROFESSIONAL FEES	8,350.
EXCESS REIMBURSEMENT SEE STATEMENT 18	-19,056.
BANK CHARGES & CREDIT CARD FEES	330.
STATE FILING FEES	160.
ADR FEES	3.
CROSSLINK VENTURES V INVESTMENT INT. EXP. FROM SCH K-1	21.
CROSSLINK VENTURES V PORTFOLIO DEDUCTIONS FROM SCH K-1	450.
DRAPER FISHER JURVETSON GROWTH FUND PORTFOLIO DEDUCTIONS FROM SCHEDULE K-1	1,706.
DRAPER FISHER JURVETSON GROWTH FUND NON-DEDUCTIBLE EXP FROM SCHEDULE K-1	3.
MFO D&D SMID CAP VALUE FUND PORTFOLIO DEDUCTIONS (JOINT VENTURE)	85.
MFO EQUITY FUND PORTFOLIO DEDUCTIONS (JOINT VENTURE)	3.
MFO TOWLE FUND PORTFOLIO DEDUCTIONS (JOINT VENTURE)	145.
MFO WESTFIELD FUND A PORTFOLIO DEDUCTIONS (JOINT VENTURE)	133.
WAM INTERNATIONAL EQUITY COMMON TR FUND	20.
TOTAL TO FORM 199, PART II, LINE 17	-142,191.

FORM 199	INVESTMENTS IN OTHER BONDS	STATEMENT	8
DESCRIPTION	BEG. OF YEAR	END OF YEAR	
6904.143 VANGUARD SHORT-TERM INVESTMENT GRADE BOND	54,036.	74,036.	
7047.522 VANGUARD HIGH-YIELD CORP - INVESTOR VALUATION: FMV	31,926.	41,926.	
1694.597 VANGUARD INDEX FDS 500	213,954.	306,405.	
3059.895 VANGUARD INDEX FDS SMCP INDEX	121,756.	166,756.	
TOTAL TO FORM 199, SCHEDULE L, LINE 6	421,672.	589,123.	

FORM 199	INVESTMENTS IN STOCK	STATEMENT	9
DESCRIPTION	BEG. OF YEAR	END OF YEAR	
3942.206 TEMPLETON INSTITUTIONAL FOREIGN EQUITY	89,170.	89,170.	
457.569 VANGUARD ADMIRAL EUROPEAN STOCK INDEX FUND	27,071.	32,071.	
5626.026 VANGUARD ADMIRAL EMERGING MARKETS STOCK INDEX FUND	65,763.	62,582.	
11115.537 DREYFUS TOTAL EMERGING MARKETS CL I	64,728.	119,728.	
19595.1 MFO - D&D SMID CAP VALUE	19,500.	19,658.	
12712.148 MFO EQUITY FUND	0.	0.	
5956.5373998 MFO TOWLE FUND	0.	0.	
275.7897667 MFO - WESTFIELD FUND A	0.	0.	
.0 MFO NORTHPOINTE FUND A -RESIDUAL VALUATION: FMV	117.	0.	
65 TWITTER INC	803.	803.	
TOTAL TO FORM 199, SCHEDULE L, LINE 7	267,152.	324,012.	

FORM 199	OTHER INVESTMENTS	STATEMENT	10
DESCRIPTION	BEG. OF YEAR	END OF YEAR	
4357.348 BLACKROCK FLOATING RATE INC PORTFOLIO CL	34,961.	44,961.	
699.499 VANGUARD ADMIRAL REIT INDEX FUND	29,565.	68,885.	
0.00 STEELPATH MLP FUNDS SELECT 40 CL A	35,807.	0.	
1387.302 TEMPLETON GLOBAL BOND FD	18,200.	17,835.	
85000 CROSSLINK VENTURES V	22,378.	14,412.	
80000 DRAPER FISHER JURVETSON GROWTH FUND	51,592.	34,786.	
8470.267 GOLDMAN SACHS MLP ENERGY - INS	0.	58,368.	
3968 BALTER LONG/SHORT EQUITY INSTITUTIONAL FUND	40,000.	40,000.	

CS FUND		95-3607882
6438 CATALYST HEDGED FUTURES STRATEGY FUND CL I	45,000.	72,000.
6785 OTTER CREEK LONG/SHORT OPPORTUNITY FUND	40,000.	82,000.
3500.00 PERSHING SQUARE HOLDINGS USD PAR ORDINARY	0.	54,150.
TOTAL TO FORM 199, SCHEDULE L, LINE 9	317,503.	487,397.

FORM 199	OTHER LIABILITIES	STATEMENT 11
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DESCRIPTION	BEG. OF YEAR	END OF YEAR
ACCRUED PAYROLL	23,681.	0.
TOTAL TO FORM 199, SCHEDULE L, LINE 18	23,681.	0.

FORM 199	DEDUCTIONS IN THIS RETURN NOT CHARGED AGAINST BOOK INCOME THIS YEAR	STATEMENT 12
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DESCRIPTION	AMOUNT
DEPRECIATION	24,268.
TOTAL TO FORM 199, SCHEDULE M-1, LINE 8	24,268.

Corporation Depreciation and Amortization

Attach to Form 100 or Form 100W.

FORM 199

FEIN 95-3607882

Corporation name

California corporation number

CS FUND

1017528

Part I Election To Expense Certain Property Under IRC Section 179

Table with 5 rows for election details and 13 rows for property description and cost calculations.

Part II Depreciation and Election of Additional First Year Depreciation Deduction Under R&TC Section 24356

Table with 8 columns: (a) Description property, (b) Date acquired, (c) Cost or other basis, (d) Depreciation allowed or allowable in earlier years, (e) Depreciation Method, (f) Life or rate, (g) Depreciation for this year, (h) Additional first year depreciation.

Part III Summary

Summary table with 3 rows for total expense, depreciation claimed, and depreciation adjustment.

Part IV Amortization

Table with 7 columns: (a) Description of property, (b) Date acquired, (c) Cost or other basis, (d) Amortization allowed or allowable in earlier years, (e) R&TC section, (f) Period or percentage, (g) Amortization for this year.

CA 3885		DEPRECIATION				STATEMENT 13	
ASSET NO./ DESCRIPTION	DATE IN SERVICE	COST OR BASIS	PRIOR DEPR	METHOD	LIFE	DEPRE- CIATION	BONUS
1	469 BOHEMIAN HWY 10/31/85	271,304.	271,304.	SL	15.00	0.	
2	IMPROVEMENTS - 469 BOHEMIAN HWY 11/23/94	81,701.	73,588.	SL	10.00	0.	
3	EQUIPMENT VARIOUS	46,984.	28,472.	SL	5.00	0.	
4	COMPUTER EQUIPMENT VARIOUS	24,290.	17,817.	SL	5.00	0.	
5	FURNITURE & FIXTURES VARIOUS	28,753.	28,159.	SL	5.00	0.	
6	FURNITURE & FIXTURES 03/15/91	1,670.	1,670.	SL	5.00	0.	
7	BUILDING 09/01/09	408,404.	32,672.	SL	25.00	16,336.	
8	SOLAR PANELS 09/01/09	26,609.	7,602.	SL	7.00	3,801.	
9	LANDSCAPING 09/01/09	23,062.	3,074.	SL	15.00	1,537.	
10	FURNITURE & FIXTURES 09/01/09	18,155.	5,188.	SL	7.00	2,594.	
TOTAL DEPR TO FORM 3885		930,932.	469,546.			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 "2015 FTB 3586" on the check or money order. Detach voucher below. Enclose, but **do not** staple, payment with voucher and mail to:
**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 corporations - File and Pay by March 15, 2016.
Calendar year exempt organizations - File and Pay by May 16, 2016
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.
Due to the Emancipation Day holiday on April 16, 2016, tax returns filed and payments mailed or submitted on April 18, 2016, will be considered timely.

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.

539035
12-09-15

--- DETACH HERE ----- IF NO PAYMENT IS DUE, DO NOT MAIL THIS VOUCHER ----- DETACH HERE ---

CAUTION: You may be required to pay electronically, see instructions.

TAXABLE YEAR **2015** **Payment Voucher for Corporations and Exempt Organizations e-filed Returns**

CALIFORNIA FORM
3586 (e-file)

0000000 CSFU 95-3607882 1017528 15 FORM 3
TYB 11-01-2015 TYE 10-31-2016
CS FUND

469 BOHEMIAN HIGHWAY
FREESTONE CA 95472-9579

(707) 874-2942

Amount of Payment 10.

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 <u>44168</u> CS FUND <small>Name of Organization</small> <u>469 BOHEMIAN HIGHWAY</u> <small>Address (Number and Street)</small> <u>FREESTONE, CA 95472-9579</u> <small>City or Town, State and ZIP Code</small>	Check if: <input type="checkbox"/> Change of address <input type="checkbox"/> Amended report Corporate or Organization No. <u>1017528</u> Federal Employer I.D. No. <u>95-3607882</u>
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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 Revenue	Fee
Less than \$25,000	0	Between \$100,001 and \$250,000	\$50	Between \$1,000,001 and \$10 million	\$150
Between \$25,000 and \$100,000	\$25	Between \$250,001 and \$1 million	\$75	Between \$10,000,001 and \$50 million	\$225
				Greater than \$50 million	\$300

PART A - ACTIVITIES

For your most recent full accounting period (beginning 11/01/2015 ending 10/31/2016) list:
 Gross annual revenue \$ 1,099,533. Total assets \$ 2,892,740.

PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: If you answer "yes" to any of the questions below, you must attach a separate sheet providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.

	Yes	No
1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest?		X
2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?		X
3. During this reporting period, did non-program expenditures exceed 50% of gross revenues?		X
4. During this reporting period, were any organization funds used to pay any penalty, fine or judgment? If you filed a Form 4720 with the Internal Revenue Service, attach a copy.		X
5. During this reporting period, were the services of a commercial fundraiser or fundraising counsel for charitable purposes used? If "yes," provide an attachment listing the name, address, and telephone number of the service provider.		X
6. During this reporting period, did the organization receive any governmental funding? If so, provide an attachment listing the name of the agency, mailing address, contact person, and telephone number.		X
7. During this reporting period, did the organization hold a raffle for charitable purposes? If "yes," provide an attachment indicating the number of raffles and the date(s) they occurred.		X
8. Does the organization conduct a vehicle donation program? If "yes," provide an attachment indicating whether the program is operated by the charity or whether the organization contracts with a commercial fundraiser for charitable purposes.		X
9. Did your organization have prepared an audited financial statement in accordance with generally accepted accounting principles for this reporting period?	X	

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.

BAILEY MALONE

EXECUTIVE DIRECTOR

Signature of authorized officer

Printed Name

Title

Date