

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

2010

OMB No 1545-0052

		r year 2010, or ta					, and ending			
G C	heck all	l that apply:	Initial ret			nitial return of a fo Address chan	ormer public charity ge] Name c	Final ret	turn
Nar	Name of foundation THE MAUREEN AND STANLEY MOORE							A Employer identification number		
Nun	FAMILY FOUNDATION umber and street (or P O box number if mail is not delivered to street address) Room/suite							<u>4 – 171927</u> phone number	78	
	C/O WILLIAM E. REICHARD 25109 DETROIT R300								40-899-6	6776
City	ity or town, state, and ZIP code WESTLAKE, OH 44145						D 1 Fc	oreign organizati	is pending, check here	
H C	Check type of organization: X Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation								s meeting the 85% test, th computation	
	ır marke	et value of all asse	ts at end of yea	r J Accounti	ng method	: X Cash	Accrual	E If pri unde	vate foundation r section 507(b	status was terminated)(1)(A), check here
	om Par \$	t II, col. (c), line			her (specif	y) ust be on cash t	basis)			n a 60-month termination ()(1)(B), check here
	rt I /	Analysis of Reven The total of amounts recessarily equal the	ue and Expens	es	(a) R	evenue and ses per books	(b) Net investment income	·) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
		ontributions, gifts,				509000.			N/A	(dasir basis drily)
	2 CH	neck 📂 🔲 if the fo	undation is not require							
	3 Int	terest on savings and ish investments	temporary			369.	369			STATEMENT 1
	4 Dı	vidends and intere	est from securit	ies		2736.	2736	•		STATEMENT 2
	5a Gr	oss rents								
	b Ne	et rental income or (lo	ss)			00055				
e	. Gr	et gain or (loss) from s oss sales price for all				89073.				
Revenue	D as	sets on line 6a	<u>_</u>	91010.	ļ 		00000	-		
Re		ipital gain net income	•	2)	ļ		89073	•		-
		et short-term capit come modification						-		
	Gr	nce calge lace return								· · · · · · · · · · · · · · · · · · ·
	_	d allowances ss Cost of goods so	Id	• .						
		oss profit or (loss	•							
		her income	,					1		
		otal. Add lines 1 th	rough 11			601178.	92178			
		empensation of office		es, etc		0.	0			0.
		her employee sala					-			
,		ension plans, emp	loyee benefits							
Ses		gal fees								
ber		counting fees					'			
Ä		her professional f					··· <u></u>	_		
Operating and Administrative Expenses		terest	RECE		-					
stra		xes		TMT -3 –	7)	100.	50	•		50.
ini	19 De	epreciation and de	pietion	6 /nii	<u>5</u>					
P				1				 		
₹ pc	21 Tr 22 Pr	avel, conferences; inting and publica	tunka Cara					-		
gar		her expenses	uois/ODE	14, Q i	⊣			 	<u> </u>	
ğ		ital operating and	adminietrative	ì		-		 		
Ser		penses. Add lines				100.	50			50.
ŏ		ontributions, gifts,	-			75000.	50			75000.
		ital expenses and		S .						7,5000.
		id lines 24 and 25				75100.	50			75050.
		btract line 26 fror		_						
	a Ex	cess of revenue over	expenses and dis	bursements		526078.				
	b Ne	et investment inco	me (if negative, e	inter -0-)			92128			
- 1	c Ad	ljusted net incom	e (if negative, ente	er -0-)					N/A	



Page 2

Part II Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of y	rear ear
column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing			
2 Savings and temporary cash investments	130821.	249836.	249836.
3 Accounts receivable ►			
Less; allowance for doubtful accounts			
4 Pledges receivable ►			
Less: allowance for doubtful accounts			
5 Grants receivable			
6 Receivables due from officers, directors, trustees, and other			••••
disqualified persons			
7 Other notes and loans receivable			
Less: allowance for doubtful accounts			
8 Inventories for sale or use			
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 4	101937.	0.	0.
c Investments - corporate bonds	1013371		<u> </u>
11 Investments - land, buildings, and equipment basis			
Less accumulated depreciation	·		
12 Investments - mortgage loans			
13 Investments - other STMT 5	0.	E00000	509000.
	<u> </u>	509000.	509000.
Less accumulated depreciation			
15 Other assets (describe ►)			
	020750	550006	750006
16 Total assets (to be completed by all filers)	232758.	758836.	758836.
17 Accounts payable and accrued expenses			
18 Grants payable			
2 19 Deferred revenue	-		
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable		· · · ·	
21 Mortgages and other notes payable			
22 Other liabilities (describe >)			
23 Total liabilities (add lines 17 through 22)	0.	0.	
Foundations that follow SFAS 117, check here			
and complete lines 24 through 26 and lines 30 and 31.			
24 Unrestricted			
25 Temporarily restricted			
26 Permanently restricted			
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31.			
24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Foundations that do not follow SFAS 117, check here 28 and complete lines 27 through 31. 29 Capital stock, trust principal, or current funds 29 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	232758.	758836.	
28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
29 Retained earnings, accumulated income, endowment, or other funds	0.	0.	
30 Total net assets or fund balances	232758.	758836.	
•		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
31 Total liabilities and net assets/fund balances	232758.	758836.	
		7300301	
Part III Analysis of Changes in Net Assets or Fund B	alances		
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)	00		222750
		1	<u>232758.</u>
		2	<u>526078.</u>
		3	<u> </u>
Add lines 1, 2, and 3		4	758836.
Decreases not included in line 2 (itemize)	-lucia (h.) lucia (h.)	5	<u> </u>
Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	758836. Form 990-PF (2010)

Form 990-PF (2010)

FAMILY FOUNDATION

84-1719278

Page 3

(a) List and descr 2-story brick wa	be the kind(s) of property sold (e. rehouse; or common stock, 200 st	g., real estate, ns. MLC Co.)		(b) How acquire P - Purchase D - Donation	d (c	Date acquired mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a QUALCOMM-3,600	SHS			D	_	ARIOUS	08/30/10
b CHARLES SCHWAB	-4,200 SHS			D		ARIOUS	08/30/10
_c							
<u>d</u>							
e				· · · · · · · · · · · · · · · · · · ·			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale		((h) Gain or (loss e) plus (f) minus	
a 137346.	<u> </u>	1	5996				77380
ь 53664.	· · · · · · · · · · · · · · · · · · ·		4197	1.			11693.
C							
d							
e Complete and to contact the		<u> </u>					
Complete only for assets snowin	g gain in column (h) and owned by			_		uns (Col. (h) gain	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		xcess of col. (I)	1	Col. (K)	, but not less that osses (from col. (n -0- <i>) </i>
· · ·	45 01 12/3 1/0 3	UVEI	col. (j), if any				
<u>a</u>		+					77380.
<u>b</u>		 					11693.
C		-			-		- .
d		+					
e		<u> </u>	·				
Constal ages not income as (not on	ortal loss) { If gain, also enter-(r in Part I, line	7]			00073
2 Capital gain net income or (net ca	pital loss) (lf (loss), enter -()- in Part I, line	: 7	f 2			89073.
3 Net short-term capital gain or (los		nd (6):					
If gain, also enter in Part I, line 8,	column (c).			\downarrow		37/3	
Part V Qualification U	nder Section 4940(e) for	r Dodugod	Toy on Not	J 3	Incor	<u>N/A</u>	
If section 4940(d)(2) applies, leave the Was the foundation liable for the sect If "Yes," the foundation does not qual Enter the appropriate amount in e	ion 4942 tax on the distributable ar	omplete this pa	art.				Yes X No
(a)		uctions before	making any entries				(d)
Base periód years	(b) Adjusted qualifying dis	stributions	Net value of non	(c) icharitable-use a	ssets	Distrib	(d) oution ratio
Calendar year (or tax year beginnir	19 1117	18421.	Hot value of flori	4010		(col. (b) div	ided by col. (c))
2009 2008		25406.		5310			.295299
2007		38808.		4255			.236162 .326199
2006		0.		2462			.000000
2005				2402			.000000
2000			<u> </u>		-		
2 Total of line 1, column (d)						2	.857660
3 Average distribution ratio for the 5	i-vear base period - divide the total	on line 2 by 5.	or by the number of	of years			.037000
the foundation has been in exister		oo 2 2 , 0,	or by the number t	5. you.o		3	.214415
					F		
4 Enter the net value of noncharitab	le-use assets for 2010 from Part X,	line 5			-	4	328638.
5 Multiply line 4 by line 3						5	70465.
6 Enter 1% of net investment incom	a /19/, of Part I, line 27h)					C	921.
	5 (176 OF F 47 CT, IIII 6 27 U)				-	6	
7 Add lines 5 and 6					}	7	71386.
B Enter qualifying distributions from						8	75050.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	e 1b, and comp	olete that part using	a 1% tax rate.			

THE MAUREEN AND STANLEY MOORE Form 990-PF (2010) FAMILY FOUNDATION 84-1719278 Page 4 Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions 1a Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔛 and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) b Domestic foundations that meet the section 4940(e) requirements in Part V, check here \(\bigvee \text{X} \) and enter 1% 921. 1 of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Add lines 1 and 2 3 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-921. 5 Credits/Payments: 755 a 2010 estimated tax payments and 2009 overpayment credited to 2010 b Exempt foreign organizations - tax withheld at source 6b 500 c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 64 7 Total credits and payments. Add lines 6a through 6d 1255. 8 Enter any penalty for underpayment of estimated tax. Check here 1 If Form 2220 is attached 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 334. 334 . Refunded 11 Enter the amount of line 10 to be: Credited to 2011 estimated tax Ο. Part VII-A | Statements Regarding Activities No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in Yes any political campaign? X 1a b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b X If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? X 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. > \$_ 0 • (2) On foundation managers. ► \$ 0. e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 0. 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? X 2 If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? X 4a b If "Yes," has it filed a tax return on Form 990-T for this year? N/A 4b 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? Х 5 If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? X 6 7 Did the foundation have at least \$5,000 in assets at any time during the year? X 7

Form **990-PF** (2010)

8b

10

X

X

If "Yes," complete Part II, col. (c), and Part XV

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

of each state as required by General Instruction G? If "No," attach explanation

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

Form **990-PF** (2010)

Х

3Ь

4a

Yes X No

N/A

during the year?

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

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

Form 4720, to determine if the foundation had excess business holdings in 2010.)

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

b if "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

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

Form 990-PF (2010) FAMILY FOUNDATION			84-17192	<u> 178</u>	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	nued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es 🗶 No 📗		
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indi	rectly,			1
any voter registration drive?		Y	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	37	Y	es X No		1
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		[Y	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	or educational nurnoses, or				1
the prevention of cruelty to children or animals?	, 0. 00000		es X No	ŀ	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the excentions described		63 (22) 140	ŀ	
section 53.4945 or in a current notice regarding disaster assistance (see instru		iii negulations	N/A	5b	
	•		N/A	30	+-
Organizations relying on a current notice regarding disaster assistance check to					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		. —	I		1
expenditure responsibility for the grant?		1/A Y	es L No		1
If "Yes," attach the statement required by Regulations section 53 494	, ,			ļ.	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				1
a personal benefit contract?		Yo	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		_	6b	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Y(es 🗶 No 📙		
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7b	
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	anagers, Highly	y		
Paid Employees, and Contractors					
1 List all officers, directors, trustees, foundation managers and their	compensation.	· · · · · ·	·		
(=) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Exp	pense
(a) Name and address	to position	enter -0-)	and deferred compensation	allowa	ances
STANLEY A. MOORE	TRUSTEE				
2416 VIA ANITA]				
PALOS VERDES, CA 90274	2.00	0.	0.		0.
MAUREEN M. MOORE	TRUSTEE		_		
2416 VIA ANITA					
PALOS VERDES, CA 90274	2.00	0.	0.		0.
WILLIAM E. REICHARD	TRUSTEE		<u>.</u>	 	
25109 DETROIT ROAD, SUITE 300	TRODILL				
WESTLAKE, OH 44145	2.00	0.	0.		0.
MDDIDIME, OH 44145	2.00	 	<u> </u>		
	-				
	-	1			
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1). If none	enter "NONE "		<u> </u>	
	(b) Title, and average	CINCI NONE.	(d) Contributions to	(e) Ex	nense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	(e) Ext	t, other
NONE	devoted to position		compensation	allowa	inces
NONE					
				<u> </u>	
	1			1	
				<u> </u>	
		ļ. <u></u> .		<u></u>	
	ļ				
				1	

Total number of other employees paid over \$50,000

Form 990-PF (2010) FAMILY FOUNDATION	0.4	1719278 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundary Paid Employees, and Contractors (continued)		1/192/6 Tage/
3 Five highest-paid independent contractors for professional services. If none, enter	r "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		<u>▶</u> 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis number of organizations and other beneficiaries served, conferences convened, research papers pro	tical information such as the duced, etc.	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest 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 <u>N/A</u>		

Form **990-PF** (2010)

All other program-related investments. See instructions.

Total. Add lines 1 through 3

Page 8

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	ee 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	147179.
	Average of monthly cash balances	1b	186464.
	Fair market value of all other assets	1c	2001010
d	Total (add lines 1a, b, and c)	1d	333643.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 .		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	333643.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5005.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	328638.
6_	Minimum investment return. Enter 5% of line 5	6	16432.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	-
1	Minimum investment return from Part X, line 6	1	16432.
2a	Tax on investment income for 2010 from Part VI, line 5		·····
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	921.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	15511.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	15511.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7_</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	15511.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	75050.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	75050.
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	921.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	74129.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years.	ualifies for th	ne section

Form **990-PF** (2010)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,			2003	
line 7				15511.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only		·· ····	0.	
b Total for prior years:				
3 Excess distributions carryover, if any, to 2010:		0.		
1 1				
a From 2005				
b From 2006			į	
c From 2007 105562. d From 2008 98945.				
e From 2009 98426.	202022			
f Total of lines 3a through e	302933.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ► \$ 75050.				
a Applied to 2009, 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.			15511
d Applied to 2010 distributable amount	50520			15511.
e Remaining amount distributed out of corpus	59539.			
Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:			Ì	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	362472.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b				
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				 -
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	0.	-		-
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	362472.			
10 Analysis of line 9:				
a Excess from 2006		İ		
b Excess from 2007 105562.		İ		
c Excess from 2008 98945.				
d Excess from 2009 98426.	ļ			
e Excess from 2010 59539.				
				Form 990-PF (2010)

	XIV Private Operating F	FOUNDATION	-11	U.A	84-17	19278 Page 10
				II-A, question 9)	N/A	
	the foundation has received a ruling of					
	undation, and the ruling is effective for	•	•	. ▶ ∟	1010()(0)	140(1)(5)
	neck box to indicate whether the found		ng toundation described		4942(j)(3) or 49	(42(j)(5)
	nter the lesser of the adjusted net	Tax year (a) 2010	(b) 2009	Prior 3 years	(d) 2007	(a) Total
	come from Part I or the minimum	(a) 2010	(B) 2009	(c) 2008	(0) 2007	(e) Total
	vestment return from Part X for					
	ch year listed					
_	5% of line 2a					
-	ualifying distributions from Part XII,					
lın	e 4 for each year listed		 -		 	
d Ar	nounts included in line 2c not					
us	sed directly for active conduct of					
ex	empt activities					
e Qı	ualifying distributions made directly					
fo	r active conduct of exempt activities.					
	ubtract line 2d from line 2c					
	omplete 3a, b, or c for the ternative test relied upon:					
	ssets" alternative test - enter:					
) Value of all assets				<u></u>	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
ь ' Е	ndowment* alternative test - enter					
2/	3 of minimum investment return					
	lown in Part X, line 6 for each year ted					
	upport" alternative test - enter:					
) Total support other than gross					
ζ,	investment income (interest,					
	dividends, rents, payments on					
	securities loans (section					
(0	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 Part) Gross investment income XV Supplementary Info	rmation (Comple	to this part only	if the foundation	had \$5 000 or me	oro in cocoto
Part	at any time during t			ir the foundation	nad \$5,000 or me	ore in assets
			instructions.,			
	formation Regarding Foundatio	_	M 00/ - 6/1 - 1 - 1		for a following to the other	
	st any managers of the foundation who ar (but only if they have contributed m			itributions received by the	foundation before the clos	se of any tax
	,	1010 (11411 \$0,000). (000 3	(u)(2).)			
NONI		400/				
b Li	st any managers of the foundation wh her entity) of which the foundation has	O OWN 10% OF MORE OF IT	ie stock of a corporation	(or an equally large portion	on of the ownership of a pa	artnership or
		sa 1076 or greater intere	o			
NONI						
	formation Regarding Contributi					
	neck here 🕨 🗶 If the foundation o					
	e foundation makes gifts, grants, etc.	i			ompiete items 2a, b, c, and	ı a.
- a Th	ne name, address, and telephone num	ber of the person to who	m applications should be	e addressed:		
				<u> </u>		
b Th	ne form in which applications should b	e submitted and informa	tion and materials they s	should include:		
	nu nuhmingung dandlinger	····		·		
C A	ny submission deadlines:					
d Ar	ny restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields	, kinds of institutions, or	other factors:	

Form 990-PF (2010) **FAMILY F**(

023611 12-07-10

FAMILY FOUNDATION

84-1719278 Page 11

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to any foundation manager or substantial contributor Amount Name and address (home or business) a Paid during the year SEE STATEMENT 6 75000. Total **▶** 3a b Approved for future payment NONE Total **▶** 3b 0. Part XVI-A Analysis of Income-Producing Activities

		ea business income	LACIU	ded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a	_				
b	_				
C					
d	_		1.		
e	1				
f					
g Fees and contracts from government agencies	_				
2 Membership dues and assessments			-		
3 Interest on savings and temporary cash					
			1 1 4	3.50	
investments			14		
4 Dividends and interest from securities			14	2736.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			1		
8 Gain or (loss) from sales of assets other					
than inventory			18	89073.	
9 Net income or (loss) from special events			+	05075.	
O Gross profit or (loss) from sales of inventory			+		
1 Other revenue:	<u> </u>		+		
a	_				
b					
C	_				
d					
e					
2 Subtotal. Add columns (b), (d), and (e)		0		92178.	
				13	92178.
3 Total. Add line 12, columns (b), (d), and (e)					
	l				
See worksheet in line 13 instructions to verify calculations.		omplishment of F	yemn	t Purnoses	
See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities	to the Acc				
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Acc	ın column (e) of Part XVI-			olishment of
See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities	to the Acc	ın column (e) of Part XVI-			olishment of
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Acc	ın column (e) of Part XVI-			olishment of
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Acc	ın column (e) of Part XVI-			olishment of
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Acc	ın column (e) of Part XVI-			olishment of
See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Acc	ın column (e) of Part XVI-			olishment of
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Acc	ın column (e) of Part XVI-			olishment of
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Acc	ın column (e) of Part XVI-			olishment of
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Acc	ın column (e) of Part XVI-			olishment of
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Acc	ın column (e) of Part XVI-			olishment of
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Acc	ın column (e) of Part XVI-			olishment of
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Acc	ın column (e) of Part XVI-			olishment of
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Acc	ın column (e) of Part XVI-			olishment of
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Acc	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Acc	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Acc	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Acc	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Acc	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Acc	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Acc	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	to the Acc	ın column (e) of Part XVI-			plishment of
Line No. Explain below how each activity for which in	to the Acc	ın column (e) of Part XVI-			plishment of

THE MAUREEN AND STANLEY MOORE Form 990-PF (2010) FAMILY FOUNDATION 84-1719278 Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash X 1a(1) (2) Other assets 1a(2) X **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization X 1b(1) X (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets X 1b(3) (4) Reimbursement arrangements 1b(4) Х (5) Loans or loan guarantees Х 1b(5) (6) Performance of services or membership or fundraising solicitations X 1b(6) Sharing of facilities, equipment, mailing lists, other assets, or paid employees X 1c d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described ☐ Yes X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A 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,

Signature of officer or trustee Date Title Print/Type preparer's name Preparer's signature Date Check PTIN 8.5.11 self- employed P00188085

d on all information of which preparer has any knowledge

Paid Preparer Use Only

WILLIAM E. REICHARI REICHARD, /LPA Firm's name ► WILLIAM E.

and complete Declaration of preparer (other than taxpayer or fiduciar

Firm's address ► 25109 DETROIT ROAD, SUITE 300 WESTLAKE, OH 44145

440 899-6776 Form **990-PF** (2010)

Firm's EIN

Phone no.

Sign Here

Schedule B (Form 990, 990-EZ,

or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2010

Name of the organization

THE MAUREEN AND STANLEY MOORE FAMILY FOUNDATION

Employer identification number

84-1719278

Organization type (check one):						
Filers of	:	Section:				
Form 99	0 or 990-EZ	501(c)() (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 99	0-PF	X 501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt chantable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
	nly a section 501(c)(covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions.				
		filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one ete Parts I and II.				
Special	Rules					
	509(a)(1) and 170(b)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II				
	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III					
	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to 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 of \$5,000 or more during the year.					
but it mu	st answer "No" on	at is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify ig 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) (2010)

Name of organization
THE MAUREEN AND STANLEY MOORE
FAMILY FOUNDATION

Employer identification number

84-1719278

Part I	Contributors	(see instructions)
--------	--------------	--------------------

-aiti	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	STANLEY & MAUREEN MOORE 2416 VIA ANITA PALOS VERDES, CA 90274	\$509000 .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II of there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

of Part II

Name of organization

THE MAUREEN AND STANLEY MOORE FAMILY FOUNDATION

84-1719278

Employer identification number

Part II Noncash Property (see instructions)

	(eramona,		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2010) Name of organization **Employer identification number** THE MAUREEN AND STANLEY MOORE FAMILY FOUNDATION 84-1719278 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once See instructions) > \$ (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held

(e) Transfer of gift

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

Transferee's name, address, and ZIP + 4

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

Relationship of transferor to transferee

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS	STATEMENT	1
SOURCE	AMOUNT	
BANK OF AMERICA XX0600 MERRILL LYNCH XX161		09. 60.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	3	69.

FORM 990-PF DIVIDEN	DS AND	INTERE	ST FROM	SECURITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT	•
MERRILL LYNCH XX161 NATL FINANCIAL SVC	•		684. 2052.	0.	68 205	34. 52.
TOTAL TO FM 990-PF, PART I,	LN 4		2736.	0.	273	86.

FORM 990-PF	TAX	ES	S	TATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
2009 OHIO TAXES	100.	50.		50.
TO FORM 990-PF, PG 1, LN 18	100.	50.		50.

FORM 990-PF CORPO	RATE STOCK	STATEMENT	4
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE	
CHARLES SCHWAB NEW-4200 SHS QUALCOMM-3600 SHS	0.		0.
TOTAL TO FORM 990-PF, PART II, LINE 1	0в 0.		0.

FORM 990-PF OTHER	INVESTMENTS		STATEMENT 5	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
UNCASHED CHECK RECEIVED BY FDN	COST	509000.	509000.	
TOTAL TO FORM 990-PF, PART II, LINE 1	3	509000.	509000.	

FORM 990-PF

STATEMENT

PAID DURING THE YEAR				
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT	
BLUE AND WHITE SCHOLARSHIP FOUNDATION P.O. BOX 415 VILLANOVA, PA 19085	NONE SCHOLARSHIPS	PUBLIC CHARITY	10000.	
DOCTORS WITHOUT BORDERS 333 7TH AVE, SECOND FLOOR NEW YORK, NY 10001	NONE GENERAL PURPOSE	PUBLIC CHARITY	1000.	
ENVIRONMENTAL TRAVELING COMPANIONS (ETC) FORT MASON CENTER BLDG C SAN FRANCISCO, CA 94123	NONE GENERAL PURPOSE	PUBLIC CHARITY	500.	
LITTLE COMPANY OF MARY COMMUNITY HEALTH FOUNDATION 4101 TORRANCE BLVD. TORRANCE, CA 90503	NONE CARDIOLOGY	PUBLIC CHARITY	35000.	
LOS ANGELES COUNTY MUSEUM OF ART 5905 WILSHIRE BLVD LOS ANGELES, CA 90036		PUBLIC CHARITY	1000.	
LOS ANGELES PHILHARMONIC ASSOCIATION 151 SOUTH GRAND AVE LOS ANGELES, CA 90012	NONE YOUTH EDUCATION PROGRAMS	PUBLIC CHARITY	5500.	
LUNADA BAY PTA 520 PASEO LUNADO PALOS VERDES ESTATE, CA 90274	NONE GENERAL PURPOSE	PUBLIC CHARITY	2000.	
QUINCY UNIVERSITY 1800 COLEGE AVE. QUINCY, IL 62301-2699	NONE GENERAL PURPOSE	PUBLIC CHARITY	1000.	

GRANTS AND CONTRIBUTIONS

THE MAUREEN AND STANLEY MOORE F	FAMILY FOU		84-1719278
PALOS VERDES POLICE OFFICERS FOUNDATION 340 PALOS VERDES DR. WEST PALOS VERDES, CA 90274	GENERAL PURPOSE	PUBLIC CHARITY	500.
PENINSULA FRIENDS OF THE LIBRARY 701 SILVER SPUR RD ROLLING HILLS EST, CA 90274		PUBLIC CHARITY	1000.
SANCTUARY FOR FAMILIES P.O. BOX 1406 WALL STREET STATION NEW YORK, NY 10268	NONE PROTECTION AGAINST DOMESTIC VIOLENCE	PUBLIC CHARITY	2000.
ST. LAWRENCE MARTYR 1950 S. PROSPECT AVE REDONDO BEACH, CA 90277	NONE GENERAL PURPOSE	PUBLIC CHARITY	1000.
ST. IGNATIUS HIGH SCHOOL 1911 WEST 30TH ST. CLEVELAND, OH 44113	NONE GENERAL PURPOSE	PUBLIC CHARITY	2000.
JESUITS 7303 WEST 7 MILE RD DETROIT, MI 48221-2121	NONE HAITI RELIEF	PUBLIC CHARITY	1000.
RICHSTONE FAMILY CENTER 13620 CORDARY AVE. HAWTHORNE, CA 90520	NONE GENERAL PURPOSE	PUBLIC CHARITY	1000.
FRIENDS OF THE HIGHLINE 529 WEST 20 ST #8W NEW YORK, NY 10011	NONE GENERAL PURPOSE	PUBLIC CHARITY	1000.
FRIENDS OF THE POOR CLARE'S 19000 LAKE RD. #209 ROCKY RIVER, OH 44116	NONE GENERAL PURPOSE	PUBLIC CHARITY	1000.
AMERICARES 88 HAMILTON AVE. STAMFORD, CT 06902	NONE GENERAL PURPOSE	PUBLIC CHARITY	1000.

- THE MAUREEN AND STANLEY MOORE F	AMILY FOU		84-1719278
ST. THOMAS SCHOOL HERITAGE FUNDS 2632 W. 15TH ST. LOS ANGELES, CA 90006	NONE GENERAL PURPOSE	PUBLIC CHARITY	1000.
MUSEUM OF LATIM AMERICAN ART 628 ALAMITOS LONG BEACH, CA 90802-1513	NONE GENERAL PURPOSE	PUBLIC CHARITY	1000.
COMPTON JUNIOR POSSE 453 W. CALDWELL ST. COMPTON, CA 90220	NONE GENERAL PURPOSE	PUBLIC CHARITY	500.
INTERNAIONAL PARTNERS IN MISSION (IPM) 3091 MAYFIELD RD. #320 CLEVELAND HEIGHTSQ, OH 44118	NONE GENERAL PURPOSE	PUBLIC CHARITY	5000.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		75000.

Form **8868**

(Rev. January 2011) Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

OMB No. 1545-1709

 $\triangleright \mathbf{x}$

Form 8868 (Rev 1-2011)

• if you	are tiling for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of this	i torm).		
Do not	complete Part II unless you have already been granted a	an automa	tic 3-month extension on a previously fi	led Form 8868		
Electro	nic filing (e-file). You can electronically file Form 8868 if y	you need a	a 3-month automatic extension of time t	o file (6 months	for a corporation	
require	d to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically file F	orm 8868 to red	uest an extension	
of time	to file any of the forms listed in Part I or Part II with the ex-	ception of	Form 8870, Information Return for Tran	nsfers Associate	d With Certain	
	al Benefit Contracts, which must be sent to the IRS in pap	•				
	w irs.gov/efile and click on e-file for Charities & Nonprofits		, · · · · · · · · · · · · · · · ·			
Part			bmit original (no copies needed)			
	pration required to file Form 990-T and requesting an autor			nplete		
Part I o	· -				▶ □	
	···, r corporations (including 1120-C filers), partnerships, REM	IICs and to	nists must use Form 7004 to request a	a extension of tir	ne	
	acome tax returns	iroo, arra a	addo made add r dim r dd r to request ar	r exterioror or th		
Туре о	or Name of exempt organization Employer identific					
print	THE MAUREEN AND STANLEY MOORE			Employer Identification flumber		
princ	FAMILY FOUNDATION			84-1719278		
File by th	he Number stand and account to Ka D O have a standard				04 1/132/0	
due date filing you	ring your turn See C/O WILLIAM E. REICHARD 25109 DETROIT RD., NO. 300					
return Se						
Instructions City, town or post office, state, and ZIP code For a foreign address, see instructions WESTLAKE, OH 44145						
	WESTLAKE, OH 44145			 -		
Cotor +I	Enter the Return code for the return that this application is for (file a separate application for each return)					
Enter the Return code for the return that this application is for (file a separate application for each return)					1014	
	Allera	D.4	A			
Application		Return	Application		Return	
Is For		Code	Is For	Code		
Form 990		01	Form 990-T (corporation)	07		
Form 990-BL		02	Form 1041-A			
Form 990-EZ		_03	Form 4720	09		
Form 990-PF		04	Form 5227	10		
Form 990-T (sec. 401(a) or 408(a) trust)		05	Form 6069			
Form 9	90-T (trust other than above)	06	Form 8870		12	
	WILLIAM E. REI					
	books are in the care of \triangleright 25109 DETROIT 1	ROAD,		E, OH 44	1145	
	phone No. ► <u>440-899-6776</u>		FAX No. >		- —	
	e organization does not have an office or place of busines			•	▶ ∟_	
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						
_	AUGUST 15, 2011 , to file the exempt organization return for the organization named above. The extension					
	is for the organization's return for:					
•	▶ X calendar year 2010 or					
tax year beginning , and ending						
2 1	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 11	3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any					
<u>n</u>	nonrefundable credits. See instructions. 3a \$				1255.	
b II	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and					
	stimated tax payments made Include any prior year overp	oayment a	llowed as a credit.	3b \$	755.	
c E	Balance due. Subtract line 3b from line 3a Include your payment with this form, if required,					
	y using EFTPS (Electronic Federal Tax Payment System)	-	•	3c_\$	500.	
Cautio	n. If you are going to make an electronic fund withdrawal	with this Fo	orm 8868, see Form 8453-EO and Form	8879-EO for pa	yment instructions	

LHA For Paperwork Reduction Act Notice, see Instructions.