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Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0052

Dep	artmen	t of the Treasury	Note.	The foundation may be	Treate able to u	ed as a Priva	te Foundatio s return to sati	n sfy state re	porting requirements	2010
_		endar year 2010,				11/		and endir		10/31,20 11
_	•	ck all that apply		Initial return		Initial return o	f a former pu	blic charit	y	Final return
				Amended return		Addres	s change		Name change	
Na	me of	f foundation		·			-		A Employer iden	tification number
T	HE N	MOLEY FAMILY	FOU	NDATION					77	7-0528059
Νι	mber	and street (or PO b	ox num	ber if mail is not delivered	to street ad	dress)		Room/su	te B Telephone numbe	er (see page 10 of the instructions)
_		BOX 4316						<u> </u>	() -
Cr	y or t	own, state, and ZIP	code						C If exemption appli pending, check he	
									D 1 Foreign organi	zations, check here
_		EL, CA 93921								zations meeting the k here and attach
부		ck type of organiza		X Section 501(c						
		ection 4947(a)(1) no	_	-^		er taxable pri			E If private foundate	on status was terminated
1		market value of al			unting me		asn Acc	rual	under section 507	(b)(1)(A), check here
		ear (from Part II, c ▶ \$	351,		ther (spec	d) must be or	cash basis)			s in a 60-month termination (b)(1)(B), check here
				and Expenses (The		 	, oden zaele /		didei section 307	(d) Disbursements
_	u	total of amounts in	colum	nns (b), (c), and (d)		venue and enses per	(b) Net inve		(c) Adjusted net	for charitable
		may not necessan		al the amounts in of the instructions))		oooks	incom	ie	income	purposes (cash basis only)
	1			ceived (attach schedule)		0.	11 24 /	3 8 3 5	\ , .	(odon basis only)
	2	Charle X If the		ation is not required to	\$.#	2 (2 %)	* ***		# . L	1
	3			prary cash investments		9.		9.		
	4	Dividends and inter	est fro	m securities		3,656.		3,656.		
	5 a	Gross rents								\$ 5°
	b	Net rental income or (I	loss) _				3 <u>\</u>	, 3		. ', , , ,
9		Net gain or (loss) from		fassets not on line 10		37,928.	<u>. 13 d</u>	× 4 %)	3	^*! 1
Revenue	b	Gross sales price for a assets on line 6a	all 	544,872.	v 4° °	*	\$		* * *	
ě	7	Capital gain net inc	ome (f	rom Part IV, line 2)				4,611.	* *	
_	8	Net short-term cap	tal gan	n	* * ?	Caracter (% C)	10 10 10 10 10 10 10 10 10 10 10 10 10 1	/ <u>*</u> * · .		<u> </u>
	9 10 a	Income modification Gross sales less return			*	***	" × ',	*		1
	-	and allowances • • •	• • • }			~				
		Less Cost of goods se		-kkkkk			. 1 3 1 2	. ž. ~		, ,
				ch schedule)			, « " «»	·/· ·		
	11 12	Other income (attact Total, Add lines 1 t				41,593.	5.4	18,276.		<u> </u>
_	13			ectors, trustees, etc		0.			<u>.</u>	
	14			and wages						-
S	15	Pension plans emi		•						
Operating and Administrative Expenses										
ă	b	Accounting fees (at				9,000.	_	4,500.		0. 4,500
èП	С	Other professional	fees (a	attach schedule 2						
aţį	17	Interest SEP								
istr	18			page 14 of the instructions)* *		160.		0.	1	0. 0
ni.	19	1 1 11 4 1	nsche	dule) and depletion .			-			*
Å	20	Occupancy		The Contract of the Contract o						
힏	21	Travel, conferences		meetings	-					
gai	22	Other expenses (et		abadula) ATCH 3	—	240		0.		0. 0
Ĕ	23 24			chedule) ATCH 3		270		· ·		
Ser		Add lines 13 through		ппопапте ехрепоез.		9,400.		4,500.		0. 4,500
ŏ	25	Contributions, gifts		s paid		550,000.				550,000
	26	•		ents Add lines 24 and 25		559,400.		4,500.		0. 554,500
_	27	Subtract line 26 fro						,		•
	а	Excess of revenue over	expens	es and disbursements		-517,807.				
	b	Net investment inc	ome	(if negative, enter -0-)			54	13,776.		
_	c	Adjusted net incor	me (ıf	negative, enter -0-)						

For Paperwork Reduction Act Notice, see page 30 of the instructions. $^{0\text{E}1410\ 1\ 000}$ $TL1920\ 6608$

JSA ** ATCH 2

Form **990-PF** (2010)

D.	art II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year		End of	year
		Dalatice Sticets	amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash - non-interest-beari	ng	3,417.		17.	<u>17</u> .
	2	Savings and temporary of	ash investments	8,929.	1,4	65.	1,465.
ı	3	Accounts receivable					
- 1		Less allowance for doub	tful accounts >				
-	•	Less allowance for doub	otful accounts				•
					•		
	6		officers, directors, trustees, and other				
	٠		ich schedule) (see page 15 of the instructions)				
	7	•	eceivable (attach schedule)			1	
	'					-	* * *********************************
			otful accounts				
ţ			e			- 	
Assets	9	· ·	eferred charges				
٧			government obligations (attach schedule)	1,026,985.	3/0 7	51	349,754.
ŀ		•	stock (attach schedule) ATCH 4		349,1	74.	349,734.
	11 C	Investments - land, building:		n hour us an sector	a h Samahar a mamaa		· · · · · · · · · · · · · · · · · · ·
		(attach schedule)	ation				
	12	Investments - mortgage	loans				
1	13		ch schedule)				
	14	Land, buildings, and equipment basis	>				
		Less accumulated deprecia (attach schedule)	ation -				
	15	Other assets (describe	-)				
	16		completed by all filers - see the				
		instructions Also, see pa	age 1, item I)	1,039,331.	351,2	36.	351,236.
\exists	17	Accounts payable and a	ccrued expenses				1
	18						•
Š	19						'
iabilities	20		rs, trustees, and other disqualified persons				1
ab.	21	Mortgages and other no	tes payable (attach schedule)				
Ξ,	22		• -)				1
		·					i di
	23	Total liabilities (add line	es 17 through 22)			0.	1
		Foundations that follows	low SFAS 117, check here				i
			4 through 26 and lines 30 and 31.				
Š	24	Unrestricted					*
alances	25						u.
ala	26			-			
	-	•	not follow SFAS 117,				· ·
Fund B			plete lines 27 through 31.				1
P. F	27	Capital stock, trust princ	,	1,039,331.	351,2	36.	1
S	28		r land, bldg, and equipment fund		·		ı
Net Assets	29	• • •	ilated income, endowment, or other funds	0.		0.	,
As	30		fund balances (see page 17 of the				1
ē	30			1,039,331.	351,2	36.	:
_	31		et assets/fund balances (see page 17				
	"			1,039,331.	351,2	36.	
Ţ.	art I		nanges in Net Assets or Fund		552/2	~~.]	
			balances at beginning of year - Part		must agree with		
•			i on prior year's return)			1	1,039,331.
•						1	-517,807.
2	CHE	er amount from Part I, I	ıne 27a ed ın lıne 2 (ıtemıze) ▶ ATTACH			2	-170,288.
					· · · · · · · · · · · · · · · · · · ·	3	*****
		lines 1, 2, and 3	be a Colorest A MM A CI			4	351,236.
5	Dec	reases not included in	line 2 (itemize) ▶ ATTACH	IMENT 6		5	251 226
6	I ota	i net assets or fund ba	lances at end of year (line 4 minus line	е э) - Рап II, column (b), I	ine 30	6	351, 236

(a) List an	d describe the kind(s) of property sold (e brick warehouse; or common stock, 200 s	g , real estate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
la SEE PART IV SCHE	DULE				
b_					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a	· · · · · · · · · · · · · · · · · · ·				
b					
С					
d					
е					
	showing gain in column (h) and owned by	v the foundation on 12/31/69	//\	Councy (Col. (h) or	
(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		Gains (Col. (h) g (k), but not less t Losses (from co	than -0-) or
a					
b					-
c					
d					
е					
2 Capital gain net income or		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		544,823.
	•		-		344,023.
	or (loss) as defined in sections 1222 line 8, column (c) (see pages 13 and				
If (loss), enter -U- in Part I,	Under Section 4940(e) for Redu		3		
	private foundations subject to the se				
	the section 4942 tax on the distribute not qualify under section 4940(e) Do		period?		Yes X No
	ount in each column for each year, se		e makıng	anv entries	· - ,
(a)	(b)	(c)		(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
2009	506,488.	1,116,410.	 	<u>, , , , , , , , , , , , , , , , , , , </u>	0.453676
2008	639,568.	704,420.	1		0.907936
2007	690,696.	1,892,326.			0.364998
2006	558,088.	2,840,352.			0.196486
2005	441,344.	2,646,659.		· · · · · · · · · · · · · · · · · · ·	0.166755
					-
2 Total of line 1, column (d)		2		2.089851
3 Average distribution ratio	for the 5-year base peпod - divide th				
	dation has been in existence if less t		3		0.417970
•					
4 Enter the net value of no	ncharitable-use assets for 2010 from	Part X, line 5	4		468,151.
5 Multiply line 4 by line 3			5		<u>195,673.</u>
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		5,438.
] _]		000 1
7 Add lines 5 and 6			7		201,111.
6 Paka mushkum - di kiri k	and from Dark VIII. be a 4				554,500.
8 Enter qualifying distributi	ons from Part XII, line 4		8		224.2011
it title o is equal to or i	ons from Part XII, line 4	in Part VI, line 1b, and complete	that part	using a 1% ta	x rate See th

Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV . . .

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) of each state as required by General Instruction G?If "No," attach explanation Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page

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

8a Enter the states to which the foundation reports or with which it is registered (see page 19 of the

instructions)

CA,

	_		_
Form	990	-PF	(2010

9

Χ

Χ

names and addresses .

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 2010?

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orm 9	990-PF (2010)		77-052	8059	Pa	age 6
art	t VII-B Statements Regarding Activities t	or Which Form 47	20 May Be Requir	ed (continued)		
5a	During the year did the foundation pay or incur any amou	int to				
-	(1) Carry on propaganda, or otherwise attempt to influe		945(e))?	Yes X No	,	4
	(2) Influence the outcome of any specific public election	- ·				4
	directly or indirectly, any voter registration drive?	(000 00000), 0, 10	, out,	Yes X No	,	1
	(3) Provide a grant to an individual for travel, study, or o	that cimilar numocas?		H ** H ***		·
				ies	'	-
	(4) Provide a grant to an organization other than a charge			T vaa V va	_	, j
	section 509(a)(1), (2), or (3), or section 4940(d)(2)?			Yes X No	'	į
	(5) Provide for any purpose other than religious, charita	-				į
	purposes, or for the prevention of cruelty to children				•	
b	If any answer is "Yes" to 5a(1)-(5), did any of the tra				~ ~	į,
	Regulations section 53 4945 or in a current notice regi	arding disaster assistanc	e (see page 22 of the i	nstructions)?	5b	
	Organizations relying on a current notice regarding disas	iter assistance check hei	re	▶∟₫		i
С	If the answer is "Yes" to question 5a(4), does the foundation	tion claim exemption froi	m the tax		-	
	because it maintained expenditure responsibility for the	grant?		. Yes No	,	1
	If "Yes," attach the statement required by Regulations se	ection 53 4945-5(d)				
6 a	Did the foundation, during the year, receive any funds, d	rectly or indirectly, to pa	y premiums			Î
	on a personal benefit contract?			Yes X No	,	1
b	Did the foundation, during the year, pay premiums, direct	tly or indirectly, on a per	sonal benefit contract?		6b	
	If "Yes" to 6b, file Form 8870					
7 a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax she	elter transaction?	Yes X No	,	1
b	If "Yes," did the foundation receive any proceeds or have	e any net income attribut	able to the transaction?	· — —	7b	
Par	t VIII Information About Officers, Directo	ors, Trustees, Four	ndation Managers	, Highly Paid Emp	loyees,	
4	and Contractors List all officers, directors, trustees, foundation m		•			
1		(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense accour	nt
	(a) Name and address	hours per week devoted to position	(If not paid, enter	employee benefit plans and deferred compensation	other allowances	
			<u> </u>	and deterred dempendential		
ΤА	TACHMENT 7		0.	0.		0
· - -						
2	Compensation of five highest-paid employees (o	ther than these inclu	dad on line 1 cas n	ago 23 of the instruc		
	If none, enter "NONE."	thei than those inclu-	ueu on mie 1 - see p	age 25 of the motion	,00115).	
		(b) Title, and average		(d) Contributions to	(e) Expense accoun	nt.
(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	other allowances	
	· · · · · · · · · · · · · · · · · · ·	devoted to position	 	compensation		
	NONE					
- -						
						
ota	al number of other employees paid over \$50,000	<u> </u>			 •	
					Form 990-PF (2010)

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Part VIII Information About Officers, Directors, Trustees, Foundation and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (see p	page 23 of the instructions). If n	one, 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		NONE
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year include relevant statis organizations and other beneficianes served, conferences convened, research papers produced, etc	tical information such as the number of	Expenses
1 N/A		-
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see page 24 of the	e instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1	and 2	Amount
1 NONE		
2		
All other program-related investments See page 24 of the instructions		
3 NONE		
Total, Add lines 1 through 3		

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	gn foundatioi	ns,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	458,398.
b	Average of monthly cash balances	1b	16,882.
C		1c	0.
d	Total (add lines 1a, b, and c)	1d	475,280.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	475,280.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	7,129.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	468,151.
6	Minimum investment return. Enter 5% of line 5	6	23,408.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private foundations and certain foreign organizations check here ▶ ☐ and do not complete this p	e operating	
1	Minimum investment return from Part X, line 6	1	23,408.
2 a			
b	Income tax for 2010 (This does not include the tax from Part VI) 2b	7	
С	Add lines 2a and 2b	7 2c	5,438.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	17,970.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	5	17,970.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	17,970.
Pa	Qualifying Distributions(see page 25 of the 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	554,500.
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	0.
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	0.
b			0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	554,500.
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 (see page 26 of the instructions)	5	5,438.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	549,062.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years	alculating whe	ther the foundation

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Pa	rt XIII Undistributed Income (see page	26 of the instruction	ns)		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2010 from Part XI,	Corpus_	Years prior to 2009	2009	2010
	line 7				17,970.
2	Undistributed income, if any, as of the end of 2010				
	Enter amount for 2009 only			0.	, I
	Total for prior years 20 08 ,20 07 ,20 06		0.		
3	Excess distributions carryover, if any, to 2010				
	216 222				
b	426 574				
-	606 000				,
С.	612 211				1
d	460 601				
		2,423,197.			
	Total of lines 3a through e	2,423,197.			
4	Qualifying distributions for 2010 from Part XII,		`		
	line 4 ▶ \$554,500.				
а	Applied to 2009, but not more than line 2a			0.	<u></u>
b	Applied to undistributed income of prior years (Election				1
	required - see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election				
	required - see page 26 of the instructions)				
d	Applied to 2010 distributable amount				17,970.
е	Remaining amount distributed out of corpus	536,530.			
5	Excess distributions carryover applied to 2010 .				
	(If an amount appears in column (d), the same amount must be shown in column (a))	*	,		
6	Enter the net total of each column as				
_	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,959,727.			
h	Prior years' undistributed income Subtract				
_	line 4b from line 2b		0.		
С	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	, and the second second			
а	Subtract line 6c from line 6b Taxable				
_	amount - see page 27 of the instructions		0.		
e	Undistributed income for 2009 Subtract line				
	4a from line 2a Taxable amount - see page 27 of the instructions	*		0.	
		,			
f	Undistributed income for 2010 Subtract lines 4d and 5 from line 1. This amount must be			*	
	distributed in 2011				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section		i		
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)				
8	Excess distributions carryover from 2005 not				
	applied on line 5 or line 7 (see page 27 of the	316,323.			
9	instructions)				
7	Subtract lines 7 and 8 from line 6a	2,643,404.			
40	*****	_,			
	Analysis of line 9 Excess from 2006 426,574.				
b	606 200	1		•	
	612 311	†	1		
C		-			
d	Excess from 2009	1			
-		i	1		

Pai	rt XIV Private Oper	ating Foundations (see page 27 of the	instructions and Part	VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has if foundation, and the ruling i	•		it is a private opera	ting	
b	Check box to indicate whe		<u>-</u>	described in section	4942(j)	(3) or 4942(j)(5)
_		Tax year	<u>, , , , , , , , , , , , , , , , , , , </u>	Pnor 3 years		10,120,(0)
2 a	Enter the lesser of the ad-	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
	or the minimum investment	(u) 2010	(B) 2003	(0) 2000	(d) 2007	
	return from Part X for each					
	year listed					
b	85% of line 2a	<u>.</u>				
С	Qualifying distributions from Part					
	XII line 4 for each year listed					
đ	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					
а	"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 invest-					
	ment 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)					
	port from an exempt					
	organization (4) Gross investment income					
Рa		ary Information <i>(C</i>	omplete this part	only if the found:	ation had \$5,000	or more in assets
	at any time of	during the year - se	e page 28 of the in			
1	Information Regarding	•				
а	List any managers of before the close of any	tax year (but only if the	ney have contributed in			ed by the foundation
		MOLEY & RICHARD				
b	List any managers of ownership of a partner					large portion of the
	N/A	0	0''' 1			
2	Information Regarding	•		·		
	Check here ► X if t unsolicited requests t organizations under ot	for funds If the foun	dation makes gifts, g	rants, etc (see page	able organizations a 28 of the instruction	nd does not accept ns) to individuals or
а	The name, address, an	nd telephone number of	the person to whom a	pplications should be a	ddressed	
b	The form in which appl	ications should be subi	mitted and information	and materials they sho	uld include	
С	Any submission deadlii	nes	· · · · · · · · · · · · · · · · · · ·			
d	Any restrictions or li factors	mitations on awards	, such as by geogra	phical areas, charitai	ole fields, kınds of	institutions, or other

Form 990-PF (2010)			77-0528059	Page 11
Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	ng the Year or App	roved for F	uture Payment	_
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	A
Name and address (home or business)	any foundation manager	recipient	Purpose of grant or contribution	Amount
a Paid during the year	or decommend	<u> </u>		
a raid during the year				
ATTACHMENT 8				
ATTACHMENT				
		1		
		j		
		1		
			ļ	
		1		
			!	
	1	1		
Total	<u> </u>		> 22	550,000.
Total	<u> </u>	· · · · · · · · · · · · · · · · · · ·	▶ 3a	330,000.
b Approved for future payment				
	1	1		
	<u> </u>			
Total			▶ 3b	

nter gross a			Vities			
•	imounts unless otherwise indicated		ted business income	Excluded by	section 512, 513, or 514	(e) Related or exempt function income
		(a) Business code	(b) Amount	(c) Exclusion code	(d) (Amount	(See page 28 of the instructions)
-	service revenue					the instructions)
						
				- 		
						
				- 		
f						
-	and contracts from government agencies		· - · -	+		
	ship dues and assessments			14	9.	
	savings and temporary cash investments			01	3,656.	
	s and interest from securities	-		+	5,030.	
			. <u>-</u>	-	· `	
	financed property			 		
	ebt-financed property			-		
	income or (loss) from personal property					
	vestment income			10	37,928.	
-	oss) from sales of assets other than inventory			18	37,920.	
	me or (loss) from special events		<u>-</u> -			
	ofit or (loss) from sales of inventory					
	venue a					
ь						
c				_		
d						
e					11 500	
12 Subtotal	Add columns (b), (d), and (e)				41,593.	
			•			41 500
I3 Total. Ad See worksh Part XVI-		venty calcula to the Ac	tions) complishment of I	Exempt Pur	poses	
I3 Total. Ad See worksh	eet in line 13 instructions on page 29 to	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to the
3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to the
I3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to th
3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to th
3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to th
3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to th
3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to th
I3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to the
3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to th
3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to th
3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to th
3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to th
3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to th
3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to th
3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to the
3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to the
3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to the
I3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to the
3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to the
3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to the
I3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to the
I3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to the
I3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to the
I3 Total. Ad See worksh Part XVI- Line No.	eet in line 13 instructions on page 29 to Relationship of Activities Explain below how each activit accomplishment of the foundation	verify calcula to the Ac y for which	tions) complishment of I n income is reported	Exempt Pur	poses e) of Part XVI-A contribu	uted importantly to the

Part X	VII	Exempt Orga	Regarding Tra	insters 10	and Irans	sactions	and Re	eiations	nips with	Nonc	narıı	able
1 Dic	d the	organization directly		gage in any	of the follow	ing with	any other	organizati	on described		Yes	No
		n 501(c) of the Co										
	ganızat			, ,	., .							
a Tra	ansfers	from the reporting fou	ndation to a noncha	ritable exempt	organization of							
(1)	Cash									1a(1)		X
		rassets								1a(2)		Х
b Ot	her tra	nsactions								_		
(1)	Sales	of assets to a noncha	ırıtable exempt orgaı	nization						1b(1)	ļ	X
(2)	Purc	nases of assets from a	noncharitable exem	pt organization	١					1b(2)	<u> </u>	X
		al of facilities, equipme								1b(3)	ļ	X
		bursement arrangeme										X
(5)	Loan	s or loan guarantees					· · · · ·			1b(5)	ļ	X
(6)	Perfo	rmance of services or	membership or fund	raising solicita	tions					1b(6)		X
	_	of facilities, equipment,	•							1c		X
		inswer to any of t		•	-				•			
		the goods, other										
	- 1	any transaction or										
(a) Line	no	(b) Amount involved	(c) Name of none	cnaritable exemp	ot organization		escription of ti	ransters, tran	sactions, and sha	nng arra	ngemen	ts
	\dashv	N/A				N/A						—
	-+-					+						—
						+						
		_				-		· · · · · · · · · · · · · · · · · · ·				
						+	•		•			
						1						
	+											
	-	•										
	+					-						
	<u> </u>											
												—
	_											
			1									
2a Is	the	foundation directly	or indirectly affili	ated with o	or related to.	one or r	more tax-e	exempt or	anizations			
		d in section 501(c) of	•	•	·				•	\square	es 🗆	√ No.
		complete the following				•	<i>.</i>			·		
		(a) Name of organization		(b) Ty _l	pe of organization			(c) Des	cription of relation	ship		
								-				
										•		
			•									
				_					•			
	Under	penalties of perjury, I d	eclare that I have exa	mined this retui	rn, including acco	mpanying so	chedules and	statements,	and to the best	of my I	cnowled	ge and
Sign	Deller,	it is true, correct, and cor	mplete Declaration of	preparer (otner t	nan taxpayer or no	luciany) is ba	sec on all int ·	ormation of v	wnich preparer na	isany kr Ma	lawleag	•
Here	_	144	mining			91 111	12		ice frese	den	<i>K</i>	
	Sig	nature of officer or trustee	e /		Da	te (Title				
		Print/Type preparer's	name	Preparer's s	signature		Date	<u> </u>		PTIN		
Paid				1 12.	- 0	_	navn	5/2012	Check if			
Prepa	ror		<u>-</u>	Thehe.	Sn's		33,0		self-employed			2
-			RICEWATERHOU:					Firm	s EIN ▶13-4	0083	24	
Use C	אוחי	Firm's address ▶ 48		OULEVARD,	STE 1800							
		SP	AN JOSE, CA		<u></u>	9	5110-27	09 Phor				
										Form 99	0-PF	(2010)

THE MOLEY FAMILY FOUNDATION
FORM 990-PF - PART IV
OATER AND LOSSES FOR TAX ON INV

Kınd of Pı	roperty	INS AND L	Desc	ription		P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		PUBLICLY TR	ADED SECURI	TIES			VARIOUS	VARIOUS
544,872.		49.					544,823.	
TAL GAIN (L	OSS)				. 		544,823.	
						l		
								!
						$\ $		
						$\ \ $		
						$\ $		

万瓦瓦S
ACCOUNTING
ı
Н
PART
990PF.
FORM

CHARITABLE <u>PURPOSES</u>	4,500.	4,500.
ADJUSTED NET INCOME		•0
NET INVESTMENT INCOME	4,500.	4,500.
REVENUE AND EXPENSES PER BOOKS	.000,6	6,000.
		TOTALS
DESCRIPTION	PWC TAX PREP FEES	

FORM 990PF, PART I - TAXES

CHARITABLE <u>PURPOSES</u>	0.	0
ADJUSTED NET INCOME	.0	0
NET INVESTMENT INCOME	.0	•0
REVENUE AND EXPENSES PER BOOKS	160.	160.
		TOTALS
DESCRIPTION	FRANCHISE TAX BOARD	

EXPENSES	
OTHER	
Н	
PART	
990PF,	
FORM	

CHARITABLE PURPOSES 0.	0.
ADJUSTED NET INCOME	0
NET INVESTMENT INCOME 0.	0.
REVENUE AND EXPENSES PER BOOKS 240.	240.
	TOTALS
DESCRIPTION BANK CHARGES	

4	
LULI	
THU Z	
₽₩∇	

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION

CISCO SYSTEMS, INC.

ENDING BOOK VALUE

ENDING FMV

349,754.

349,754.

TOTALS

349,754.

349,754.

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

CY CHANGE IN UNREALIZED GAIN OR LOSS

-170,288.

TOTAL

-170,288.

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

CHAR. CONTIB MADE IN PY, WITHDRAWN IN CY

TOTAL

THE MOLEY FAMILY FOUNDATION

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

EXPENSE ACCT AND OTHER ALLOWANCES	Ö	.0	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	.0	.0	0.
COMPENSATION	.0	.0	0.
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT 1.00	VICE PRESIDENT/TREASURER 1.00	GRAND TOTALS
NAME AND ADDRESS	ELIZABETH MOLEY P.O. BOX 4316 CARMEL, CA 93921	RICHARD MOLEY P.O. BOX 4316 CARMEL, CA 93921	

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 8

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION
HOLY LAND CHRISTIAN ECUMENICAL FOUNDATION	NONE	GENERAL USE
6935 WISCONSIN AVENUE, SUITE 214	501 (C) (3)	
BETHESDA, MD 20815		
BETHLEHEM UNIVERSITY	NONE	GENERAL USE
P O BOX 692	501(C)(3)	
LINCROFT, NJ 07738		
PALO ALTO PARTNERS IN EDUCATION	NONE	GENERAL USE
P O BOX 1557	501(C)(3)	
PALO ALTO, CA 94302		
LATIN PATRIARCHATE OF JERUSALEM	NONE	GENERAL USE
P O. BOX 14152 91143	501(C)(3)	
JERUSALEM		
TODART		

390,000.

AMOUNT

ATTACHMENT 8

10,000

50,000

100,000.

JERUSALEM ISRAEL 550,000

TOTAL CONTRIBUTIONS PAID

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service Name of estate or trust **Capital Gains and Losses**

► Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

Employer identification number

2010

	THE MOLEY FAMILY FOUNDATION				77-05280	59	
	: Form 5227 filers need to complete onlyPa						
Par	t I Short-Term Capital Gains and Lo	sses - Assets	Held One Y	ear or Less			
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other i		(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a							(1)
-					-		
		ļ.					<u> </u>
			•			•	
b	Enter the short-term gain or (loss), if any, fro	m Schedule D-1	, line 1b			1b	
	C , , , , , ,		• • •				
2	Short-term capital gain or (loss) from Forms	4684, 6252, 678	31, and 8824		· • • • • • • • • • • • • • • • • • • •	2	
3	Net short-term gain or (loss) from partnershi	ps. S corporatio	ns. and other e	states or trusts		3	
4	Short-term capital loss carryover Enter the			•			
_	Carryover Worksheet		· · · · · · <u>· · · · · · · · · · · · · </u>			4	()
5	Net short-term gain or (loss). Combine line column (3) on the back	•	` '			5	
Par	t II Long-Term Capital Gains and Losses						<u>,</u>
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other (see instruction		(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a							
		 					
-							
b	Enter the long-term gain or (loss), if any, fro	m Schedule D-1	, line 6b			6b	544,823.
7	Long-term capital gain or (loss) from Forms	2439, 4684, 625	52, 6781, and 8	824		7	
8	Net long-term gain or (loss) from partnership	os, S corporation	s, and other es	states or trusts		8	
9	Capital gain distributions					9	
10	Gain from Form 4797, Part I					10	
11	Long-term capital loss carryover Enter the a	amount, if any, fr	om line 14 of th	ne 2009 Capital Loss			,
42	Carryover Worksheet Net long-term gain or (loss). Combine line			o to the total and an in-		11)
12	column (3) on the back	•	. ,		'	12	544,823.
For	Paperwork Reduction Act Notice, see the Instruct	ions for Form 104	1.	<u> </u>			D (Form 1041) 2010

, Sched	ule D (Form 1041) 2010				Page 2
Par	· · · · · · · · · · · · · · · · · · ·		(1) Beneficiaries'	(2) Estate's	(2) Total
	Caution: Read the instructions before completing this p	oart.	(see instr)	or trust's	(3) Total
13	Net short-term gain or (loss)	13	_		
14	Net long-term gain or (loss):				
а	Total for year	14a		<u> </u>	544,823.
	Unrecaptured section 1250 gain (see line 18 of the wrksht)				
	28% rate gain				544.000
	Total net gain or (loss). Combine lines 13 and 14a	15		1	544,823.
to Pa	: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form It V, and do not complete Part IV If line 15, column (3), is a net loss, complete P				
	IV Capital Loss Limitation		<u>.</u>		
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F				,
a Noto	The loss on line 15, column (3) or b \$3,000	i		lino 34) is a loss on	mploto the Capitali ass
Carry	roveMorksheeton page 7 of the instructions to figure your capital loss carryove	9r	18 22 (UI FUIII 990-1,	1111 0 54), IS a 1088, CO	mpiele the Capitalicuss
Par	t V Tax Computation Using Maximum Capital Gains Rate	es			
there Caut Caut Bo Forn of Fo	n 1041 filers. Complete this part only if both lines 14a and 15 in column is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more ion: Skip this part and complete the worksheet on page 8 of the instruct ther line 14b, col (2) or line 14c, col (2) is more than zero, or oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero in 990-T trusts. Complete this part only if both lines 14a and 15 are prim 990-T, and Form 990-T, line 34, is more than zero Skip this part ine 14b, col (2) or line 14c, col (2) is more than zero	e than tions if re gail	zero ns, or qualified divi	dends are included	I in income in Part I
			47		
17 18	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34) Enter the smaller of line 14a or 15 in column (2)	•	17		
10	but not less than zero			٠ ا	
19	Enter the estate's or trust's qualified dividends			, i	
13	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T) . 19				
20	Add lines 18 and 19 20			2.	
21	If the estate or trust is filing Form 4952, enter the		-	3, , \$	
	amount from line 4g, otherwise, enter -0-				
22	Subtract line 21 from line 20 If zero or less, enter -0-		22		
23	Subtract line 22 from line 17 If zero or less, enter -0-		23		
24	Enter the smaller of the amount on line 17 or \$2,300		24		
25	Is the amount on line 23 equal to or more than the amount on line 24?				
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box.				
	No. Enter the amount from line 23		25		
26	Subtract line 25 from line 24		26		
27	Are the amounts on lines 22 and 26 the same?				
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or lin	ne 22	27		
	5 to # a constant from the 80 (files 00 a black costs 0)				
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
~~	Outhorn A line 20 forms line 27		20		
29	Subtract line 28 from line 27		29		
30 31	Multiply line 29 by 15% (15)				
31	Figure the tax on the amount on line 23 Use the 2010 Tax Ra (see the Schedule Ginstructions in the instructions for Form 1041)			1 1	
	(See the confedure official actions in the manufactions for Form 1041)			· · · · · · 3! 	
32	Add lines 30 and 31			32	
33	Figure the tax on the amount on line 17 Use the 2010 Tax Ra			· · · · · · 	
	(see the Schedule Ginstructions in the instructions for Form 1041)				
3.4	Tay on all tayable income. Enter the smaller of line 32 or line 33				

Schedule D (Form 1041) 2010

G, line 1a (or Form 990-T, line 36) .

Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side. Employer identification.					
THE MOLEY FAMILY FOUNDATION				77-052805	59
Part II Long-Term Capital Gains and	d Losses - Asse	ts Held More Th	an One Year		
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
6a PUBLICLY TRADED SECURITIES	VARIOUS	VARIOUS	544,872.	49.	544,823.
	-				
					-
					
6b Total. Combine the amounts in column	n (f) Enter hara an	d on Schedule D. II	no 6h	1	544,823

FEDERAL FOOTNOTES

FORM 990-PF,	PART	ΙI	-	CAPITAL	STOCK,	TRUST	PRINCIPAL,	OR	CURRENT
FUNDS									

DESCRIPTION	BOOK VALUE
PRINCIPAL	\$ 454,388
UNREALIZED GAINS	\$ (103,152)

TL1920 6608 276805-7942-

Application for Extension of Time To File an Exempt Organization Return

Form **8868** (Rev. January 2012)

OMB No. 1545-1709

Internal Revenue							
• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box							
		Additional (Not Automatic) 3-Mon					
		uniespou have already been grant					
a corporation 8868 to requ Return for T instructions). Part I Aut	required uest an extransfers A For more comatic 3-	You can electronically file Form 8 to file Form 990-T), or an additional tension of time to file any of the fassociated With Certain Personal details on the electronic filing of the Month Extension of Time. Only	al (not auto forms listed Benefit C is form, vis ly submit d	omatic) 3-month extend in Part I or Part II we contracts, which must it www.irs.gov/efile and original (no copies ne	sion of time. You can th the exception of F be sent to the IRS d click on e-file for Cha eeded).	electronically Form 8870, I S in paper to anties & Nonp	file Form nformation ormat (see
		file Form 990-T and requesting an					. —
Part I only							▶∟
All other corp	orations (ır.	cluding 1120-C filers), partnerships	REMICs,	and trusts must use For	m 7004 to request an o	extension of t	ime
to file income			*		Enter filer's identify		
Type or	Name of ex	tempt organization or other filer, see inst	ructions.	ļ	Employer identific	ation number (EIN) or
Type or							
print	-	LEY FAMILY FOUNDATION			X 77-05280	59	
File by the due date for	Number, st	reet, and room or suite no. If a P.O box,	see instruct	ions.	Social security nu	mber (SSN)	
filing your	P.O. B	OX 4316					
return. See	City, town	or post office, state, and ZIP code For a	foreign addr	ess, see instructions.			
instructions	CARMEL	, CA 93921					
Enter the Re	turn code fo	or the return that this application is fo	or (file a se	parate application for ea	ach return)		. 04
Application			Return	Application			Return
ls For			Code	Is For			Code
Form 990			01	Form 990-T (corporation	on)		07
Form 990-BL			02	Form 1041-A			
			01	Form 4720			
Form 990-E2						10	
Form 990-PF		\ 400(-\ 44\)	04	Form 5227			
) or 408(a) trust)	05	Form 6069			11
Form 990-1	Form 990-T (trust other than above) 06 Form 8870 12						
The books	s are in the	care of ▶ RICHARD & ELIZA	ABETH MO	DLEY			
Telephon	e No. ►		ı	FAX No ►			
If the orga	anization de	es not have an office or place of b	 usiness in t	he United States, check	this box		▶□
If this is for	or a Group	Return, enter the organization's fou	r digit Grou	p Exemption Number (C			IS IS
for the whole	aroup, ch	neck this box	f it is for par	rt of the group, check th	is box	and att	ach
		d EINs of all members the extension		• ,,		_	
		natic 3-month (6 months for a corpo		ired to file Form 990-T)	extension of time		
until		06/15 , 20 12 , to file the e				ove. The exte	ension is
	omanizatio	on's return for:					
№	. •	/ear 20 or					
		eginning 11/9	n1 20 1	and ending	10/31	, 20 <u>11</u> .	
	Lax year b		<u>01.</u> , 20 <u>11</u>		10/31	_, 20 _11	
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 Form 990-BL, 990-PF, 990-T, 1990-T, 1990-PF, 990-T, 1990-PF, 990-PF, 990-T, 1990-PF, 990-T, 1990-PF, 990-T, 1990-PF, 990-PF, 990-T, 1990-PF, 990-PF, 990-PF, 990-T, 1990-PF, 990-PF, 990-PF, 990-PF, 990-PF, 990-PF, 990-PF, 990-T, 1990-PF, 990-PF, 990							
b If this application is for Form 990-PF, 990-T, 4720, or Salas Carry Structure Carry Structur							
estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ NONE							
c Balance due. Subtract line 3b from line 3a. Include your payment w April 10 programme of the programme of the subtract line 3b from line 3a. Include your payment with April 10 programme of the programme of the subtract line 3b from line 3a. Include your payment with April 10 programme of the programme of the subtract line 3b from line 3a. Include your payment with April 10 programme of the pr							
(Electronic Federal Tax Payment System) See instructions. 3c \$ NONE							
Caution. If you are going to make an electronic fund withdrawal							
payment in	structions			EAAAA	<i></i>		
For Privacy	Act and Pap	erwork Reduction Act Notice, see Instr	uctions.	· ルサ 4		Form 8868	(Rev 1-2012)

M	Yh.	•
,	Pa	na 2

Form 8868 (Re	ev. 1-2012)				_	Page 2	
 If you are 	e filing for an Additional (Not Automatic) 3-Mo	nth Extens	ion, complete only Part II	and check th	is box	. ▶ X	
Note. Only	complete Part II if you have already been grante	ed an auton	natic 3-month extension on a	a previously fi	iled Form 8868.		
-	e filing for an Automatic 3-Month Extension, c			•			
Part II	Additional (Not Automatic) 3-Month Ex			inal (no cop	ies needed).		
					tifying number, see in	structions	
	Name of exempt organization or other filer, see ins	tructions.			r identification number		
Type						, ,	
Type or	MUD WOLDY DAVIEW DOWNSERTON			X 77-0528059			
print	THE MOLEY FAMILY FOUNDATION		ecunty number (SSN)				
File by the		and room or suite no. If a P.O. box, see instructions.					
due date for filing your	P.O. BOX 4316						
return See	City, town or post office, state, and ZIP code. For a	a toteign add	ress, see instructions.				
instructions.	CARMEL, CA 93921						
Enter the R	eturn code for the return that this application is t	for (file a se		return) .		0 4	
Application	1	Return	Application			Return	
Is For		Code	is For			Code	
Form 990		01	THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS	的一种有别的	"这一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个	《对解解 》	
Form 990-E	BL	02	Form 1041-A			08	
Form 990-E	Z	01	Form 4720			09	
Form 990-F		04	Form 5227			10	
	(sec. 401(a) or 408(a) trust)	05	Form 6069			11	
	(trust other than above)	06	Form 8870	• • • • • • • • • • • • • • • • • • • •		12	
	not complete Part II if you were not already gra			on a previo	usly filed Form 886		
	ks are in the care of ▶ RICHARD & ELIZ.						
	ne No. ▶		FAX No. ▶				
•	ganization does not have an office or place of b	<u> </u>		hov	•	\blacksquare	
	-					in .	
	for a Group Return, enter the organization's fou le group, check this box ▶						
			nt of the group, check this bo	×	P and alla	CII a	
	names and EINs of all members the extension			0 (15 00	10		
•	est an additional 3-month extension of time unti			<u>9/15</u> , 20		0 1 1	
	alendar year, or other tax year beginnir		11/0120 10 an		10/31,2	0 <u>11 </u>	
	tax year entered in line 5 is for less than 12 mor	ntns, cneck	reason: Initial ref	rum Fi	nal return		
	Change in accounting period						
	in detail why you need the extension						
ADDI	TIONAL TIME IS NEEDED TO GATHER	THE IN	FORMATION NECESSARY	Y TO			
PREF	PARE A COMPLETE AND ACCURATE TAX	RETURN					
8a If this	s application is for Form 990-BL, 990-PF, 9	90-T, 4720), or 6069, enter the tent	tative tax, le			
nonre	efundable credits. See instructions.				8a \$ NO	ONE	
b If the	is application is for Form 990-PF, 990-T,	4720, o	r 6069, enter any refun	dable credit	s and		
estim	ated tax payments made. Include any pr	rior year o	overpayment allowed as	a credit an	id any 🔀		
amou	unt paid previously with Form 8868.				8b \$ NO	ONE	
c Balaı	nce Due. Subtract line 8b from line 8a. Include	your paym	nent with this form, if requir	ed, by using	EFTPS		
(Elec	tronic Federal Tax Payment System). See instru	ıctions.			8c \$ NO	ONE	
	Signature and Verifica		st be completed for P	art II only.			
Under nenetti	es of penjury, I declare that I have examined this form,		<u>-</u>	_		and belief	
	ect, and complete, and that am authorized to prepay this is					,	
			_		1.	/.	
Signature	and Il	-	Pitte ▶		Date > 1/2	//2-	
					Form 8868 (Rev 1-2012)	

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JUN 1/4/2012

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