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998-PF

Return of Private Foundation

OMB No 1545-0052

		nt of the Treasury				Tre	947(a)(1) None eated as a Priv	ate Foundati	on			୬ ⋒ 1 1
Int	emai Re	venue Service	Note	. The foundation	on may l	oe able	to use a copy of	this return to s	satisfy state		rting requirements	<u>4</u> 0
F	or cal	lendar year 2011	or ta	x year begin	ning	,	11	/01 , 2011	, and end	ing		10/31, 2012
	Name	of foundation									A Employer identifie	cation number
_	THE	MOLEY FAMIL	Y FO	DUNDATION							77-052805	9
	Numb	er and street (or P () box	number if mail is	not delive	red to st	reet address)		Room/su	ute	B Telephone number	er (see instructions)
											() –
_	P.O.	BOX 4316										
	City o	r town, state, and Z	IP coc	le								<u> </u>
											 C If exemption application pending, check here 	tion is
_	CAR	MEL, CA 9392	1									
G	Che	ck all that apply		Initial retur	n		Initial return	of a former p	oublic cha	rity	D 1. Foreign organizat	ions, check here
				Final return	1	L	Amended re	turn			2 Foreign organizat	
_				Address ch			Name chang				85% test, check h computation •	
H	_Che	ck type of organi	zation	· X Section	on 501(c)(3) e	exempt private f	oundation			E If private foundation	status was terminated
Ţ	ş	ection 4947(a)(1) r	onexe				Other taxable pr)(1)(A), check here .
l	Faır	market value of a	all ass	ets at end	J Acco	untıng	method X C	ash [Acc	crual		F If the foundation is	in a 60-month termination
		ear (from Part II, c			_		pecify)				under section 507(b)	(1)(B), check here
				935.	<u> </u>	colum	n (d) must be or	cash basis)				
G	art l	Analysis of Rev	enue/	and Expens	es (The	(a)	Revenue and	(b) Net invi	estment	١,	e) Adjusted not	(d) Disbursements
		total of amounts in may not necessar					xpenses per	incon		'	c) Adjusted net income	for charitable purposes
_		column (a) (see in:					books					(cash basis only)
	1	Contributions, gifts, gran	ts, etc , i	received (attach sch	edule) .		454,875.	ATCH 1		<u> </u>	w	
	2	Check ▶ ☐ if the	e tound sh Sch	dation is not requ	red to							
-	3	interest on savings as	nd tem	porary cash inves	tments		12.		12.			
ļ	4	Dividends and inte	rest fr	om securities			9,233.		9,233.			
	5 a	Gross rents										
	b	Net rental income or	(ioss) _									
e		Net gain or (loss) fro					-88,435.					-
enne	0	Gross sales price for a assets on line 6a	3II 	421	<u>,512.</u>							
Ş۱	7	Capital gain net in	come	(from Part IV, li	ne 2) .	—		42	1,292.		<u>-</u>	
-	8	Net short-term cap	_							<u> </u>		
	9	Income modification					·····			ļ		
	10 a	Gross sales less return and allowances • •					-					<u> </u>
		Less Cost of goods se	-					n.ar 1	-972.	*2097%	r	
		Gross profit or (los						<u></u>				<u></u>
		Other income (atta					375,685.	4.2	0 527	-		
_	12_	Total, Add lines 1				*1	3/3,683.		0,537.	-		
		Compensation of office		2,00	etc	,				-		
ŝ	14	Other employee sa				701				\vdash		
Expenses	15	Pension plans, em			سسس		1					
ã		Legal fees (attach				1			6,000.			6,000
	D	Accounting fees (a	attach	schedule)	.,5 <i>01</i> 5	<u> </u>	12,000.	-	0,000.			0,000
⋛		Other professional		J -								
ï	17	Interest	:: }		* i i.	}	35.		-			
Ë	18						33.					
and Administrative	19	Depreciation (attac		***			·····	 		 		
Ĭ	20	Occupancy				ļ			<u> </u>	-		
Ĕ	21	Travel, conference							- -	1		
٠, ق	22	Printing and public					144.			<u> </u>		
Ę	23	Other expenses (a					111.	-				
perating	24	Total operating as					12,179.		6,000.			6,000
င္ပ	2.5	Add lines 13 throu	-				410,000.		3,000.			410,000
	25	Contributions, gifts		•			422,179.		6,000.	-		
_	26	Total expenses and dist			and 25		766,113.		0,000.	\vdash		410,000
	27	Subtract line 26 fr	om IIN	E 12		ł	-46 494	1				

b Net investment income (If negative, enter -0-)

424,537.

Page 2

D.	art II	Rajance Sheete	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	En	d of year	
		- Dalance Sheets	amounts only (See instructions)	(a) Book Value	(b) Book Value		aır Market Value
-	1 ्	Cash non-interest-bear	ing	17.	7,838		7,838
1	2		cash investments	1,465.	2,222	1.	2,222
	3	Accounts receivable					
		Less allowance for dou	btful accounts ▶				
	4			_			
١		Less allowance for dou	ibtful accounts ▶				
Ì	5						
1	6		officers, directors, trustees, and other				
	•		tach schedule) (see instructions)				
ł	7		receivable (attach schedule)				
İ	•		abtful accounts ▶			Ì	
	8		se				
SSets	9		deferred charges				
SS	-		*			+	
٩	IV a	Investments - U.S. and star	te government obligations (attach schedule) e stock (attach schedule) ATCH . 5	349.754	374,875	+	374,875
1	0	investments - corporate	stock (attach schedule) Alichi 5	345/104.	3/1/0/3	'`	3,1,0,
	11 6	Investments - land, building	e bonds (attach schedule),				
	42		loans				
	12 13 14	Investments - other (att Land, buildings, and	ach schedule)				
	4.5	Less accumulated depreca (attach schedule)	ation				
	15		>)			+	
ļ	16	•	completed by all filers - see the page 1, item I)	351,236.	384,935	_	384,93
┥	4-			331,230.	304,93	'- 	304,33
ı	17		accrued expenses			\dashv	
_	18					\dashv	
	19					-	
Liabilities	20		ors, trustees, and other disqualified persons			\dashv	
힐	21		otes payable (attach schedule)			4	
	22	Other liabilities (describ	e ▶)			-	
		T-4-1 (!-b:!!4! /-dd !	47 Absorvats 20)				
	23		es 17 through 22)			-4	
S		and complete lines	llow SFAS 117, check here ▶ 24 through 26 and lines 30 and 31.				
ances	24					\dashv	
	25					\dashv	
	26	•				\dashv	
or Fund			not follow SFAS 117, nplete lines 27 through 31.				
	27	Capital stock, trust prin	ncipal, or current funds	351,236.	384,93	2.	
ets	28		or land, bldg, and equipment fund			_	
155	29		nulated income, endowment, or other funds				
Net Assets	30		d balances (see instructions)	351,236.	384,93	<u>5.</u>	
ž	31		I net assets/fund balances (see				
				351,236.	384,93	5.	
			anges in Net Assets or Fund				
1			palances at beginning of year - Part				
	end-	-of-year figure reporte	d on prior year's return)	<i></i>	<u>L</u>	1	351,23
2	Ente	er amount from Part I,	line 27a			2	-46,49
3	Othe	er increases not includ	ded in line 2 (itemize) ▶ ATTACH	MENT 6		3	80,19
4	Add	lines 1, 2, and 3				4	384,93
		reases not included ir	ı line 2 (itemize) ▶			5	
6	Tota	al net assets or fund b	alances at end of year (line 4 minus	line 5) - Part II, column (b	o), line 30	ò	384,93

_		
Pan	•	
r oy	Ċ.	•

(e) Gross sales price (f) (e) Gross sales price (f) (i) F M V as of 12/31/69 (ii) F M V as of 12/31/69 Capital gain net income or (net can be short-term capital gain or (loss if gain, also enter in Part I, line Part I, line 8	(j) Adjusted basis as of 12/31/69 pital loss) { If	(k) Excess of col (i) over col (j), if any gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7 222(5) and (6):	} 2	(h) Gain or (le (e) plus (f) min	us (g) gain minus than -0-) or
(e) Gross sales price (f) Complete only for assets showing (i) F M V as of 12/31/69 Capital gain net income or (net ca	(or allowable) I gain in column (h) and owne (j) Adjusted basis as of 12/31/69 pital loss) If If If If If If If If If I	plus expense of sale ad by the foundation on 12/31/69 (k) Excess of col (i) over col (j), if any gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7 222(5) and (6):	} 2	(e) plus (f) min	gain minus than -0-) or ol (h))
(e) Gross sales price (f) Complete only for assets showing (i) F M V as of 12/31/69 Capital gain net income or (net ca	(or allowable) I gain in column (h) and owne (j) Adjusted basis as of 12/31/69 pital loss) If If If If If If If If If I	plus expense of sale ad by the foundation on 12/31/69 (k) Excess of col (i) over col (j), if any gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7 222(5) and (6):	} 2	(e) plus (f) min	gain minus than -0-) or ol (h))
(e) Gross sales price (f) Complete only for assets showing (i) F M V as of 12/31/69 Capital gain net income or (net ca	(or allowable) I gain in column (h) and owne (j) Adjusted basis as of 12/31/69 pital loss) If If If If If If If If If I	plus expense of sale ad by the foundation on 12/31/69 (k) Excess of col (i) over col (j), if any gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7 222(5) and (6):	} 2	(e) plus (f) min	gain minus than -0-) or ol (h))
(e) Gross sales price (f) Complete only for assets showing (i) F M V as of 12/31/69 Capital gain net income or (net ca Net short-term capital gain or (los If gain, also enter in Part I, line	(or allowable) I gain in column (h) and owne (j) Adjusted basis as of 12/31/69 pital loss) If If If If If If If If If I	plus expense of sale ad by the foundation on 12/31/69 (k) Excess of col (i) over col (j), if any gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7 222(5) and (6):	} 2	(e) plus (f) min	gain minus than -0-) or ol (h))
Complete only for assets showing (i) F M V as of 12/31/69 Capital gain net income or (net ca Net short-term capital gain or (los If gain, also enter in Part I, line	(or allowable) I gain in column (h) and owne (j) Adjusted basis as of 12/31/69 pital loss) If If If If If If If If If I	plus expense of sale ad by the foundation on 12/31/69 (k) Excess of col (i) over col (j), if any gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7 222(5) and (6):	} 2	(e) plus (f) min	gain minus than -0-) or ol (h))
Complete only for assets showing (i) F M V as of 12/31/69 Capital gain net income or (net ca Net short-term capital gain or (los If gain, also enter in Part I, line	(j) Adjusted basis as of 12/31/69 pital loss) { If	(k) Excess of col (i) over col (j), if any gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7 222(5) and (6):	} 2	(k), but not less	than -0-) or ol (h))
Complete only for assets showing (i) F M V as of 12/31/69 Capital gain net income or (net ca	(j) Adjusted basis as of 12/31/69 pital loss) { If	(k) Excess of col (i) over col (j), if any gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7 222(5) and (6):	} 2	(k), but not less	than -0-) or ol (h))
Complete only for assets showing (i) F M V as of 12/31/69 Capital gain net income or (net ca Net short-term capital gain or (los If gain, also enter in Part I, line	(j) Adjusted basis as of 12/31/69 pital loss) { If	(k) Excess of col (i) over col (j), if any gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7 222(5) and (6):	} 2	(k), but not less	than -0-) or ol (h))
Complete only for assets showing (i) F M V as of 12/31/69 Capital gain net income or (net ca Net short-term capital gain or (los If gain, also enter in Part I, line	(j) Adjusted basis as of 12/31/69 pital loss) { If	(k) Excess of col (i) over col (j), if any gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7 222(5) and (6):	} 2	(k), but not less	than -0-) or ol (h))
Complete only for assets showing (i) F M V as of 12/31/69 Capital gain net income or (net can be short-term capital gain or (loss of gain, also enter in Part I, line	(j) Adjusted basis as of 12/31/69 pital loss) { If	(k) Excess of col (i) over col (j), if any gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7 222(5) and (6):	} 2	(k), but not less	than -0-) or ol (h))
(i) F M V as of 12/31/69 Capital gain net income or (net ca Net short-term capital gain or (los If gain, also enter in Part I, line	(j) Adjusted basis as of 12/31/69 pital loss) { If	(k) Excess of col (i) over col (j), if any gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7 222(5) and (6):	} 2	(k), but not less	than -0-) or ol (h))
Capital gain net income or (net ca Net short-term capital gain or (los If gain, also enter in Part I, line	pital loss) { If	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7 222(5) and (6):	} 2		ol (h))
Capital gain net income or (net ca Net short-term capital gain or (los If gain, also enter in Part I, line	pital loss) { If s) as defined in sections 12	(loss), enter -0- in Part I, line 7 222(5) and (6):	<u>'</u>		421,292
Capital gain net income or (net ca Net short-term capital gain or (los If gain, also enter in Part I, line	pital loss) { If s) as defined in sections 12	(loss), enter -0- in Part I, line 7 222(5) and (6):	<u>'</u>		421,292
Capital gain net income or (net ca Net short-term capital gain or (los If gain, also enter in Part I, line	pital loss) { If s) as defined in sections 12	(loss), enter -0- in Part I, line 7 222(5) and (6):	<u>'</u>		421,292
Capital gain net income or (net ca Net short-term capital gain or (los If gain, also enter in Part I, line	pital loss) { If s) as defined in sections 12	(loss), enter -0- in Part I, line 7 222(5) and (6):	<u>'</u>		421,29
Capital gain net income or (net ca Net short-term capital gain or (los If gain, also enter in Part I, line	pital loss) { If s) as defined in sections 12	(loss), enter -0- in Part I, line 7 222(5) and (6):	<u>'</u>		421,292
Net short-term capital gain or (los If gain, also enter in Part I, line	pital loss) { If s) as defined in sections 12	(loss), enter -0- in Part I, line 7 222(5) and (6):	<u>'</u>		421,29
Net short-term capital gain or (los If gain, also enter in Part I, line	s) as defined in sections 12	222(5) and (6):	<u>'</u>		421,29
If gain, also enter in Part I, line			,		
_	a R COMMIN ICI ISBB INST				
Part I line X	, , ,		f i		
		duced Tax on Net Investment	3		
or optional use by domestic private	· ···		-		
"Yes," the foundation does not qua Enter the appropriate amount in					_
(a) Base penod years Calendar year (or tax year beginning in) Adj	(b) usted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution (col (b) divided b	
2010	549,062.	468,151.			1.1728
2009	506,488.	1,116,410.			0.4536
2008	639,568.	704,420.			0.9079
2007	690,696.	1,892,326.			0.3649
2006	558,088.	2,840,352.	 		0.1964
		*			
Total of line 1, column (d)			2		3.0959
Average distribution ratio for the	5-year base period - divide	e the total on line 2 by 5, or by the			
number of years the foundation h	-				0.6191
•					
_ , ,, , , , , , , , , , , , , , , , ,	ble-use assets for 2011 fro	om Part X, line 5	4		439,74
Enter the net value of noncharita			.		
Enter the net value of noncharita			_		272,28
			5		
			. 5		-,
Multiply line 4 by line 3			ŀ		
Multiply line 4 by line 3			ŀ		4,24
Multiply line 4 by line 3	me (1% of Part I, line 27b)		. 6		4,24
Multiply line 4 by line 3	me (1% of Part I, line 27b)		. 6		
Multiply line 4 by line 3 Enter 1% of net investment incor Add lines 5 and 6	me (1% of Part I, line 27b)		. 6		4,24 276,53
Multiply line 4 by line 3 Enter 1% of net investment incor Add lines 5 and 6	me (1% of Part I, line 27b)		. 6	tusing a 1% to	4,24 276,53 416,00
Multiply line 4 by line 3	me (1% of Part I, line 27b)		. 6	t using a 1% ta	4,24 276,53 416,00
Multiply line 4 by line 3 Enter 1% of net investment incor Add lines 5 and 6 Enter qualifying distributions from	me (1% of Part I, line 27b)		. 6		4,24 276,53 416,00

	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	struc	uons	<u>;) </u>
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of roling or determination letter (attach copy of letter if necessary - see instructions)			ļ
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		4,2	245.
	here ► X and enter 1% of Part I, line 27b			1
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			_ j
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2 3		4,2	245.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		4,2	245.
6	Credits/Payments			1
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 4,695.			_
þ	100000000000000000000000000000000000000			
C	Tax paid with application for extension of time to file (Form 8868) 6c 10,000.			j
d _	Backup withholding erroneously withheld	-	11 4	. i
7	Total credits and payments Add lines 6a through 6d		14,6	393.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		10,4	150
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10,	130.
	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No
ıa	or intervene in any political campaign?	1a	100	X
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the	••		
_	instructions for definition)?	1ь		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?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \blacktriangleright \$(2) On foundation managers \blacktriangleright \$			1 1
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$	_		3
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	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	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		Х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		1
_	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 languages, that offertively emends the governing instrument so that no mandatany diseases that			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	***	X
7	conflict with the state law remain in the governing instrument?	7	Х	
	Enter the states to which the foundation reports or with which it is registered (see instructions)			1
- 4	CA,			
b				
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8ь	Х	1
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 year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete			
	Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses	10		Х
				(2011)

Pai	t VII-A	Statements Regarding Activities (continued)			
11	At any	time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning	of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the	foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person ha	ad advisory privileges? If "Yes," attach statement (see instructions)	12		Х
13		pundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
		address ► HTTP://AG.CA.GOV/CHARITIES			
14	The book	s are in care of ▶ RICHARD & ELIZABETH MOLEY Telephone no ▶			
	Located a	at ▶P.O. BOX 4316; CARMEL, CA ZIP+4 ▶ 93921			
15	Section 4	947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	\prod
		r the amount of tax-exempt interest received or accrued during the year			_
16		time during calendar year 2011, did the foundation have an interest in or a signature or other authority		Yes	No
		nk, securities, or other financial account in a foreign country?	16		Х
		instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of	1	-	
		an country			-
Pai		Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		
		m 4720 if any item is checked in the "Yes" column, unless an exception applies.	Τ	Yes	No
1.		the year did the foundation (either directly or indirectly)		100	
16	-	ige in the sale or exchange, or leasing of property with a disqualified person? Yes X No	1		1
	-	by money from, lend money to, or otherwise extend credit to (or accept it from) a			1
		ualified person?			
		ish goods, services, or facilities to (or accept them from) a disqualified person?			
		an goods, on those, or the most to the mos			
		compensation to, or pay or reimburse the expenses of, a disqualified person?			1
		,,,			4
					1
		e to pay money or property to a government official? (Exception, Check "No" if the			1
		dation agreed to make a grant to or to employ the official for a period after ination of government service, if terminating within 90 days)]
		· · · · · · · · · · · · · · · · · · ·			
	-	nswer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			· 1
		3 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b		1
	_	ations relying on a current notice regarding disaster assistance check here			
•		foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	_		J
		corrected before the first day of the tax year beginning in 2011?	1c_		A
2		n failure to distribute income (section 4942) (does not apply for years the foundation was a private		i i	
		g foundation defined in section 4942(j)(3) or 4942(j)(5))			
•		nd of tax year 2011, did the foundation have any undistributed income (lines 6d and XIII) for tax year(s) beginning before 2011?			
		list the years			
		re any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	1		
		to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	- <u>-</u>		- -
		listed, answer "No" and attach statement - see instructions)	2 b		<u> </u>
(_	ovisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			1
					1 1
3 8		oundation hold more than a 2% direct or indirect interest in any business enterprise		1	
		ne during the year? Yes X No			
1		did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or	1		
	-	ed persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
		sioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
		, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	}	Ì	'
		on had excess business holdings in 2011)		 -	
		oundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	 	X
1		foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitabl	e purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4 b	1	X

Form 990-PF (2011)

Par	VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requi	ired (continued)				
5 a	During the year did the foundation pay or incur any amou	nt to						
	(1) Carry on propaganda, or otherwise attempt to influer	nce legislation (section	4945(e))?	. Yes X No	,			
	(2) Influence the outcome of any specific public ele-	ction (see section 4	1955), or to carry or	1,		1		
	directly or indirectly, any voter registration drive?	•	• • • • • • • • • • • • • • • • • • • •		,			
	(3) Provide a grant to an individual for travel, study, or other			- — —	1 1			
	(4) Provide a grant to an organization other than a							
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s							
	(5) Provide for any purpose other than religious, ch				'			
	• • • • • • • • • • • • • • • • • • • •		• •					
	purposes, or for the prevention of cruelty to children or animals?							
U	Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?							
	Organizations relying on a current notice regarding disast							
С	If the answer is "Yes" to question 5a(4), does the					j		
	because it maintained expenditure responsibility for the gr			. LYes LNo	•	1		
_	If "Yes," attach the statement required by Regulations section.	, ,						
6 a	Did the foundation, during the year, receive any fund	· ·						
	on a personal benefit contract?							
Þ	Did the foundation, during the year, pay premiums, direct	ctly or indirectly, on a	personal benefit contrac	* ⁷	<u>6b</u>			
	If "Yes" to 6b, file Form 8870				į			
	At any time during the tax year, was the foundation a pa		•			J		
	If "Yes," did the foundation receive any proceeds or have				7b			
Par	t VIII Information About Officers, Directors and Contractors	, irustees, roun	dauon wanagers,	nighty Pald Emplo	oyees,			
1	List all officers, directors, trustees, foundation r	nanagers and thei	r compensation (see	instructions).				
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all			
 מידים	PACHMENT 7		O	d		n		
			-					
2	Compensation of five highest-paid employees "NONE."	(other than thos	se included on line	e 1 - see instructi	ons). If n	one, enter		
(a	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation		se account, lowances		
	NONE							
					 -			
						. —		
					· · · · · -			
						 		
Tota	I number of other employees paid over \$50,000 .				I	▶		
					Form 90	0-PF (2011)		

Form 990-PF (2011) Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for professional services. Part IX-A **Summary of Direct Charitable Activities** List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc Summary of Program-Related Investments (see instructions) Amount Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments. See instructions

Form 990-PF (2011)

Total. Add lines 1 through 3.

Form 990-PF (2011) Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, Part X see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., a Average monthly fair market value of securities 1a 435,136. 11,309. 1 b Fair market value of all other assets (see instructions) 1 c d Total (add lines 1a, b, and c) 446,445. Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)1e Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 3 446,445. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see 6,697. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 439,748. Minimum investment return. Enter 5% of line 5 6 21,987. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating Part XI foundations and certain foreign organizations check here > and do not complete this part.) Minimum investment return from Part X, line 6 21,987. 2a Tax on investment income for 2011 from Part VI, line 5 b Income tax for 2011 (This does not include the tax from Part VI)... 2b 2 c 4,245. Distributable amount before adjustments. Subtract line 2c from line 1 3 17,742. 4 5 17,742. Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, 17,742. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a 416,000. Program-related investments - total from Part IX-B 1 b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3 b Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 416,000. 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 instructions) 4,245. 5 Adjusted qualifying distributions. Subtract line 5 from line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

qualifies for the section 4940(e) reduction of tax in those years.

Form 990-PF (2011)

411,755.

6

Form 990-PF (2011)

Page 9

_	n 990-PF (2011) art XIII Undistributed Income (see instru	ictions)			Page
-	, character beautiful and the character than the ch		(b)	(a)	(4)
1	Distributable amount for 2011 from Part XI,	(a) Corpus	Years prior to 2010	(c) 2010	(d) 2011
_	line 7				17,742.
2	Undistributed income, if any, as of the end of 2011			- •	
a L	Enter amount for 2010 only				
3	Excess distributions carryover, if any, to 2011				
_	From 2006				
	From 2007 606, 298.				
	From 2008 613,311.				
	From 2009 460,691.				
	From 2010 536,530.				
	Total of lines 3a through e	2,643,404.			
4	Qualifying distributions for 2011 from Part XII,		·		
	line 4 ▶ \$ 416,000.				
а	Applied to 2010, but not more than line 2a				
	Applied to undistributed income of prior years				
_	(Election required - see instructions)				
c	Treated as distributions out of corpus (Election				
Ī	required - see instructions)				
d	Applied to 2011 distributable amount				17,742.
	Remaining amount distributed out of corpus	398,258.			
5	Excess distributions carryover applied to 2011				
6	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below:				
_		3,041,662.			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,011,002.			
	Prior years' undistributed income Subtract line 4b from line 2b				
C	Inne 4b from line 2b Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable	-			-
	amount - see instructions				
е	Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount - see instructions				
f	Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be				
	distributed in 2012				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	426,574.		· · · · · · · · · · · · · · · · · · ·	
9	Excess distributions carryover to 2012.	0 615 063			
	Subtract lines 7 and 8 from line 6a	2,615,088.			
	Analysis of line 9				
	Excess from 2007				
	Excess from 2008 613,311.				
	Excess from 2009				
	Excess from 2010 536,530.				
_	Excess from 2011		<u> </u>		Form 990-PF (201

unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

The name, address, and telephone number of the person to whom applications should be addressed.

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

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

JSA 1E1490 1 000

c Any submission deadlines

Page 11

Part XV Supplementary Information (continued)			· · · · · · · · · · · · · · · · · · ·
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	If recipient is an individual	roved for F	uture Payment	1
Kecipient	show any relationship to	status of	Purpose of grant or contribution	Amount
Name and address (nome or business)	or substantial contributor	recipient	- CONTRIBUTION	
a Paid during the year				
A HITTA COMPANIE O				
ATTACHMENT 8				
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			1	
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				}
		_		
	<u> </u>			
Total	<u> </u>		▶ 3a	410,000.
b Approved for future payment				
T	<u>L</u>	I	1	
Total	<u> </u>		<u>.</u> ▶ 3b	

Part XVI-A Analysis of Income-Produ	cing Activ	vities			
Enter gross amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
a					
b	_				
c					
d					
e			+		
f			 		
g Fees and contracts from government agencies Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	12.	
4 Dividends and interest from securities			01	9,233.	
5 Net rental income or (loss) from real estate			, F	, , , , , , , , , , , , , , , , , , ,	\$* U U V
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property .					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	-88,435.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					·
1 Other revenue ab			 		
			+		-
C					
d					
d			1		
e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e)					-79,190
e Subtotal Add columns (b), (d), and (e)	ulations) to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to th
e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calce Part XVI-B Relationship of Activities Line No. Explain below how each activity	ulations) to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to th
e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calce art XVI-B Relationship of Activities Line No. Explain below how each activity	ulations) to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to the
e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated a substitution of activities. Part XVI-B Relationship of Activities Line No. Explain below how each activities.	ulations) to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to the
e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated a substitution of activities. Part XVI-B Relationship of Activities Line No. Explain below how each activities.	ulations) to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to the
e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated a substitution of activities. Part XVI-B Relationship of Activities Line No. Explain below how each activities.	ulations) to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to ti
2 Subtotal Add columns (b), (d), and (e)	ulations) to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to the
2 Subtotal Add columns (b), (d), and (e)	ulations) to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to th
2 Subtotal Add columns (b), (d), and (e)	ulations) to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to ti

	Exempt Organ								
			engage in any of the following					Yes	No
ın sect	ion 501(c) of the Co	de (other than s	section 501(c)(3) organizatio	ns) or ın	section 527, re	lating to political			
•	zations?								İ
		-	a noncharitable exempt orga]		,
			<i>.</i>				1a(1)		X
(2) Oth	ner assets						1a(2)		Х
	transactions							ļ. I	لـا
(1) Sal	les of assets to a no	ncharitable exen	npt organization				1b(1)	<u> </u>	X
(2) Pui	rchases of assets fro	om a noncharita	ble exempt organization				1b(2)	<u></u>	Х
(3) Re	ntal of facilities, equi	pment, or other	assets				1b(3)		X
(4) Re	ımbursement arrangı	ements					1b(4)	<u> </u>	X
(5) Loa	ans or loan guarantee	es					1b(5)		X
(6) Pe	rformance of service	s or membersh	p or fundraising solicitations				1b(6)	<u> </u>	X
c Sharin	g of facilities, equipn	nent, mailing list	s, other assets, or paid emplo	yees			_1c_	<u> </u>	X
			s," complete the following s						
			ces given by the reporting for						
		1	ement, show in column (d)						
(a) Line no	(b) Amount involved N/A	(c) Name of n	onchantable exempt organization		escription of transfe	rs, transactions, and shar	ing arra	ingeme	nts
	N/A			N/A		·····			
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2a Is the	foundation directly	or indirectly aff	iliated with, or related to, or	ne or mo	ore tax-exempt	organizations		_	
			her than section 501(c)(3)) o				7 Y	es X	No
	" complete the follo		, ,		• • • •				
	(a) Name of organization	n	(b) Type of organization		(0) Description of relations	ship		
	- · -								
	r penalties of perjury, I decial and Complete Declaration of	are that I have examin	ed this return, including accompanying expayer) is based on all information of which	schedules an	nd statements, and to	the best of my knowledg	e and h	belief, it	is true,
Sign	1)	At Proc	11.1.	N property no.	- N - 1	May the IRS	S discus	e the	retum
Here	1hum	mny	ا قادرانغ	V	ce folsiden		eparer		below
Sigi	nature of officer or trustee		Date	Title		(see instruction	15)? <u>X</u>	Yes	No
	I Daniel Transition								
Paid	Print/Type preparer's	name	Preparer's signature	_	Date 06/10/2013		PTIN		
Preparer			taken n's			self-employed	P003	6173	12
-			JSECOOPERS LLP			Firm's EIN ▶ 13-4	0083	24	
Use Only			BOULEVARD, STE 1800						
	SA.	N JOSE, CA	/	95	5110-2709	Phone no 408 8	17-3	700	
						=	~m 90	M-PE	(2011)

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Name of the organization		Employer identification number
THE MOLEY FAMILY FOUR	NDATION	
		77-0528059
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ındatıon
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private founda	tion
	501(c)(3) taxable private foundation	
property) from any o	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 one contributor. Complete Parts I and II.	or more (in money or
Special Rules		
under sections 509((3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support (a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during th, 000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form III	e year, a contribution of
during the year, tota	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from I contributions of more than \$1,000 for use exclusively for religious, charitalises, or the prevention of cruelty to children or animals. Complete Parts I, II,	ible, scientific, literary,
during the year, con not total to more tha year for an exclusive applies to this organ	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from tributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but the n \$1,000. If this box is checked, enter here the total contributions that werely religious, charitable, etc., purpose. Do not complete any of the parts unle ization because it received nonexclusively religious, charitable, etc., contributions.	ese contributions did re received during the ss the General Rule butions of \$5,000 or
990-EZ, or 990-PF), but it mus	s not covered by the General Rule and/or the Special Rules does not file S t answer "No" on Part IV, line 2, of its Form 990, or check the box on line I PF, to certify that it does not meet the filing requirements of Schedule B (Fo	H of its Form 990-EZ or on

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) (2011)

Name of organization THE MOLEY FAMILY FOUNDATION

Employer Identification number 77-0528059

Part I	Contributors (see instructions). Use duplicate copies of Par	t I if additional space is need	led.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	P.O. BOX 4316 CARMEL, CA 93921	\$ 454,875.	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total 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) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total 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) Total 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) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II f there is a noncash contribution)

Employer identification number

77-0528059

Part II	Noncash Property (see instructions) Use duplicate copies	of Part II if additional space is nee	ded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	25,000 SHS CISCO STOCK HIGH - \$18.48 LOW - \$17.91 AVG - \$18.195	\$\$.	12/20/2011
(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
		 \$	

Name of organization THE MOLEY FAMILY FOUNDATION

Employer identification number

77-0528059

Part III	Exclusively religious, charitable, etc., that total more than \$1,000 for the year.	individual contributions to ear. Complete columns (a) t	section 5 through (e	01(c)(7), (8), or (10) organizations) and the following line entry.					
•	For organizations completing Part III, e contributions of \$1,000 or less for the	year. (Enter this information	religious, c n once. Se	charitable, etc., ee instructions.) ▶\$					
	Use duplicate copies of Part III if addition	onal space is needed.							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held					
		(e) Transfer of gift							
		(e) Transier or gift							
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held					
		(e) Transfer of gift		<u> </u>					
	Transferee's name, address, as	nd ZIP + 4	Relationship of transferor to transferee						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	-	(d) Description of how gift is held					
_									
-									
	(e) Transfer of gift								
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee						
(a) No.									
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held					
1 0100									
	(e) Transfer of gift								
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee					
		<u> </u>							

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77-0528059

ATTACHMENT 1

- CONTRIBUTIONS, GIFTS AND GRANTS RECEIVED FORM 990PF, PART I

DATE

NAME AND ADDRESS

DIRECT PUBLIC SUPPORT

454,875.

12/20/2011

RICHARD MOLEY P.O. BOX 4316 CARMEL, CA 93921

TOTAL CONTRIBUTION AMOUNTS

454,875.

276805-7942-00

TL1920 6608

ATTACHMENT

6,000.

6,000.

12,000.

6,000.

12,000.

TOTALS

PWC TAX PREP FEES

DESCRIPTION

CHARITABLE PURPOSES

ADJUSTED NET INCOME

NET INVESTMENT INCOME

> EXPENSES PER BOOKS

REVENUE AND

FORM 990PF, PART I - ACCOUNTING FEES

6,000.

276805-7942-00

ATTACHMENT 2

THE MOLEY FAMILY FOUNDATION

77-0528059

ATTACHMENT 3

FORM 990PF, PART I - TAXES

REVENUE AND **EXPENSES**

DESCRIPTION

PER BOOKS

FRANCHISE TAX BOARD

35.

TOTALS

35.

ATTACHMENT 4

FORM 990PF, PART I - OTHER EXPENSES

REVENUE AND EXPENSES PER BOOKS

DESCRIPTION BANK CHARGES

R BOOKS 144.

TOTALS

144.

THE MOLEY FAMILY FOUNDATION

- CORPORATE STOCK FORM 990PF, PART II

DESCRIPTION

CISCO SYSTEMS, INC.

TOTALS

ATTACHMENT 5

ENDING BOOK VALUE

ENDING FMV

374,875.

374,875.

374,875.

374,875.

276805-7942-00

ATTACHMENT 5

TL1920 6608

ATTACHMENT 6

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

<u>DESCRIPTION</u> <u>AMOUNT</u>

CY CHANGE IN UNREALIZED GAIN OR LOSS

80,193.

TOTAL

80,193.

ATTACHMENT 7

ATTACHMENT 7	NS EXPENSE ACCT AND OTHER AS ALLOWANCES	0	0	0
ATT	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS			
II	COMPENSATION	0	0	0
FORM 990PE, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT 1.00	VICE PRESIDENT/TREASURER 1.00	GRAND TOTALS
FORM 990PE, PART VIII -	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

	-	ATTACHMENT 8	MENT 8
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		•
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
	-		
HOLY LAND CHRISTIAN ECUMENICAL FOUNDATION	NONE	GENERAL USE	350,000
6935 WISCONSIN AVENUE, SUITE 214	501(C)(3)		
BETHESDA, MD 20815			
BETHLEHEM UNIVERSITY	NONE	GENERAL USE	20,000
P.O BOX 692	501(C)(3)		
LINCROFT, NJ 07738	_		
PALO ALTO PARTNERS IN EDUCATION	NONE	GENERAL USE	10,000.
P.O. BOX 1557	501(C)(3)		
PALO ALTO, CA 94302	_		

TOTAL CONTRIBUTIONS PAID

410,000

SCHEDULE D (Form 1041)

Capital Gains and Losses

Employer identification number

OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

▶ 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).

THE MOLEY FAMILY FOUNDATION 77-0528059 Note: Form 5227 filers need to complete only Parts I and II Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less (f) Gain or (loss) for (b) Date acquired (e) Cost or other basis (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (c) Date sold the entire year Subtract (e) from (d) (d) Sales price (mo , day, yr) (mo, day, yr) (see instructions) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2010 Capital Loss Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, Long-Term Capital Gains and Losses - Assets Held More Than One Year Part II (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (c) Date sold (e) Cost or other basis (b) Date acquired the entire year Subtract (e) from (d) (d) Sales price (mo , day, yr) (mo, day, yr) 6a b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b. 421,292. 6b Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 9 Gain from Form 4797, Part I 10 10 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2010 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back. For Paperwork Reduction Act Notice, see the Instructions for Form 1041. Schedule D (Form 1041) 2011

chedule D (Form 1041) 2011			Page 2
Part III Summary of Parts I and II	(1) Beneficiaries'	(2) Estate's	(3) Total
Caution: Read the instructions before completing this part.	(see instr)	or trust's	(0) 10(a)
Net short-term gain or (loss)			
4 Net long-term gain or (loss):			
a Total for year	·		421,292.
b Unrecaptured section 1250 gain (see line 18 of the wrksht) 14b			
c 28% rate gain14c	;		_
5 Total net gain or (loss). Combine lines 13 and 14a ▶ 15			421,292.
ote: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Fo	orm 990-T, Part I, line 48	a) If lines 14a and 15	5, column (2), are net
ains, go to Part V, and do not complete Part IV If line 15, column (3), is a net loss, comple	ete Part IV and the Capita	Loss Carryover Works	ineet, as necessary
Part IV Capital Loss Limitation		<u> </u>	
6 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I,	line 4c, if a trust), the sr	naller of:	
a The loss on line 15, column (3) or b \$3,000 ote: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, li arryover Worksheet in the instructions to figure your capital loss carryover	ne 22 (or Form 990-T, li	ne 34), is a loss, comp) plete the Capital Loss
Part V Tax Computation Using Maximum Capital Gains Rates			
orm 1041 filers. Complete this part only if both lines 14a and 15 in column ((2) are dains or an am	nount is entered in f	Part I or Part II and
here is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more that		TOUR IS CITICICA III I	art i oi i art ii ang
aution: Skip this part and complete the Schedule D Tax Worksheet in the instru			
Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or			
Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero			
orm 990-T trusts. Complete this part only if both lines 14a and 15 are ga	ins, or qualified divide	ends are included i	n income in Part I
f Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and c	omplete the Schedule	D Tax Worksheet	in the instructions
either line 14b, col (2) or line 14c, col. (2) is more than zero			
7 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	17		
8 Enter the smaller of line 14a or 15 in column (2)			
but not less than zero 18		-	
9 Enter the estate's or trust's qualified dividends			
from Form 1041, line 2b(2) (or enter the qualified	ا ا		
dividends included in income in Part I of Form 990-T) 19	<u> </u>		
0 Add lines 18 and 19	- 	'	
1 If the estate or trust is filing Form 4952, enter the	 ,,		
amount from line 4g; otherwise, enter -0 \(\beta\)		. 2.1	
	22		
	23		
3 Subtract line 22 from line 17. If zero or less, enter -0-	• • • 23		
A Fatas the ampliance the amplitude to the 47 or 62 200	1		-
4 Enter the smaller of the amount on line 17 or \$2,300	24		
15 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			
Subtract line 25 from line 24	26		
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 line 22	27		
8 Enter the amount from line 26 (If line 26 is blank, enter -0-)	28		
Subtract line 28 from line 27			
0 Multiply line 29 by 15% (15)		30	
Figure the tax on the amount on line 23. Use the 2011 Tax Rate Sc			
(see the Schedule Ginstructions in the instructions for Form 1041)		31	
2 Add lines 30 and 31			
3 Figure the tax on the amount on line 17 Use the 2011 Tax Rate So	chedule for Estates a	nd Trusts	
(see the Schedule Ginstructions in the instructions for Form 1041)			
4 Tax on all taxable income. Enter the smaller of line 32 or line 33 here			
G, line 1a (or Form 990-T, line 36)			
			le D (Form 1041) 2011

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 number THE MOLEY FAMILY FOUNDATION 77-0528059 Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (b) Date acquired (mo , day, yr) (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (e) Cost or other basis (see instructions) (f) Gain or (loss) Subtract (e) from (d) (c) Date sold (d) Sales pnce (mo, day, yr) 6a PUBLICLY TRADED SECURITIES VAR VAR 421,512. 220. 421,292.

421,292.

6b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 6b

FEDERAL FOOTNOTES

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

	-===	=======
DESCRIPTION	BO	OK VALUE
PRINCIPAL	\$	407,893
UNREALIZED GAINS	\$	(22.958)

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

. Kind of Property			Desc	or Date Date so D acquired			
Gross sale price less expenses of sale	Depreciation allowed/	Cost or other	FMV as of	Adj basis as of	Excess of FMV over	Gain or	
expenses of sale	allowable	basis	12/31/69	12/31/69	adı basış	(loss)	
		PUBLICLY TRA	ADED SECURI	ries -		VAR	VAR
421,512.		220.				421,292.	
Ì					ı		
OTAL CATALIT	OSS)					421,292.	-
U) NIAD LAIO.	033)	}			• • • • • •	<u> </u>	=
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TL1920 6							

(Rev. January 2012)

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of th Internal Revenue		➤ File a :	separate ap	plication for each return.			
		Automatic 3-Month Extension, c	omplete o	nly Part I and check thi	is box		► X
 If you are 	filing for an	Additional (Not Automatic) 3-Mo	inth Extens	sion, complete only Pa	irt II (on page 2 of this	form).	
		mless you have already been gran					j.
a corporation 8868 to req Return for T instructions).	required to uest an ext transfers A For more of	You can electronically file Form 8 to file Form 990-T), or an addition tension of time to file any of the associated With Certain Personal details on the electronic filing of the	al (not aut forms liste Benefit (is form, vis	omatic) 3-month exten d in Part I or Part II wi Contracts, which must it www.irs.gov/efile and	sion of time. You can ith the exception of F be sent to the IRS d click on e-file for Cha	electronically orm 8870, li in paper fo	y file Form nformation ormat (see
		-Month Extension of Time. On					
•	-	to file Form 990-T and requesting				•	, m
Part I only		i' a a a a a a a a a a a a a a a a a a a	i	and twists must use t	Com 7004 to managet as		, , ▶
		including 1120-C filers), partnersh	ips, reivio	s, and trusts most use r			
to file income		s. cempt organization or other filer, see in:	ctarctions		Enter filer's identify		
Type or Name of exempt organization or other filer, see instructions. Employer identification number							
print THE MOLEY FAMILY FOUNDATION X 77-0528059							
File by the		treet, and room or suite no. If a P.O. box	c see instruc	tions.	Social security nur		
due date for	l .	OX 4316			Goodal Sociality has	Tibel (GOIT)	
filing your return, See		or post office, state, and ZIP code. For	a foreign add	dress, see instructions.	! !		
instructions.		, CA 93921	- · · · · · · · · · · · · · · · · · · ·				
Enter the Re		for the return that this application	s for (file a	separate application fo	or each return)"	• • • • • •	. 04
Application			Return	Application	· · · · · · · · · · · · · · · · · · ·		Return
is For			Code	Is For			Code
Form 990			01	Form 990-T (corporal	tion)		07
							0.8
Form 990-BL 02 Form 1041-A Form 990-EZ 01 Form 4720						09	
							10
Form 990-PF 04 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069							
		r than above)	06	Form. 8870			12
		care of ▶ RICHARD & ELIZA	ABETH MO	DLEY		· · · · · · · · · · · · · · · · · · ·	
Telephon				FAX No			بسيم
 If the orga 	anization de	oes not have an office or place of	busmess ir	the United States, che	ck this box	• • • • • •,	▶∐
 If this is for the whole 	or a Group e group, ch	Return, enter the organization's for neck this box	ur digit Gro f it is for pa	oup Exemption Number art of the group, check	(GEN)this box ▶	. If th	
		nd EINs of all members the extens					
1 reque	est an auto	matic 3-month (8 months for a con 06/15 , 20 13 , to file the	rporation re exempt or	equired to file Form 99 ganization return for th	0-T) extension of time e organization named	above. The e	xtension is
		on's return for:					
▶□	calendar y	rear 20 or					
×X	tax year b	eginning 11/0	<u>)1</u> , 20 <u>11</u>	l, and ending	10/31	. 20 12 .	
	Change in a	tered in line 1 is for less than 12 m accounting period					
3a If this	application	n is for Form 990-BL, 990-PF, 99	90-T, 4720), or 6069, enter the	tentative tax, less an	ıy	
nonref	undable cr	edits, See instructions.				3a \$	10,000.
		on is for Form 990-PF, 990-T, rments made. Include any prior year				3b \$	0
C Bales	e due Sul	otract line:3b from line 3a. Include	Vour nave	nent with this form, if re	equired, by using EFTP		
		al Tax Payment System). See instru		twent mills stille (Mills II)	rance, ay asing a n	3c \$	10,000.
Carrion	VIIII PER A	ping to make an electronic fund	withdrawa	with this Form 8868	, see Form 8453-EO		
payment ins		ring to main on producing land					_ =
		erwork Reduction Act Notice, see Inst	ructions.	_ · · · · · · · · · · · · · · · · · · ·		Form 8868	(Rev. 1-2012)