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Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation OMB No 1545-0052

2012

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2012, or tax year beginning , 2012, and ending

THE	FOLEY PRIVATE CHARITABLE FO	UNDATION		A	Employer identification num 27-2682535	ber
1517	NORTH POINT #430			В	Telephone number (see the I	nstructions)
SAN	FRANCISCO, CA 94123			_	415 317-2288	
G Ch	eck all that apply. Initial return	Initial return of a form	ner public charity	D	If exemption application is p 1 Foreign organizations, check	•
	Address change	Name change			2 Foreign organizations meetili here and attach computation	
H C		1(c)(3) exempt private for		_	·	
I F	Section 4947(a)(1) nonexempt charitable to	counting method X C	orivate foundation	E	If private foundation status under section 507(b)(1)(A),	check here
► §	from Part II, column (c), line 16) (Part I	Other (specify) , column (d) must be on		F	If the foundation is in a 60- under section 507(b)(1)(B),	
Part	Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b) Net investmen income	nt	(c) Adjusted net income	(d) Disbursements for charitable purposes (cas basis only)
	1 Contributions, gifts, grants, etc, received (att sch)	219,200.				
	2 Ck I if the foundn is not req to att Sch B 3 Interest on savings and temporary					***************************************
	cash investments 4 Dividends and interest from securities					
	5 a Gross rents					
- -	b Net rental income or (loss) 6 a Net gain/(loss) from sale of assets not on line 10	-				
R E V	b Gross sales price for all assets on line 6				-	
Ε	7 Capital gain net income (from Part IV, line 2)					
N U	8 Net short-term capital gain 9 Income modifications		***************************************			······································
E	10 a Gross sales less returns and		······································	•••••		
	allowances b Less Cost of goods sold					······································
	c Gross profit/(loss) (att sch)					
	11 Other income (attach schedule)					
	12 Total. Add lines 1 through 11	219,200.		0.	0.	
	13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages	19,200.				19,20
	15 Pension plans, employee benefits					
A	16 a Legal fees (attach schedule) SEE ST 1	1,841.				1,84
M	b Accounting fees (attach sch) c Other prof fees (attach sch)					
O I P S	17 Interest					
OPERAT.	18 Taxes (attach schedule)(see instrs) SEE STM 2 19 Depreciation (attach sch) and depletion	10.				1
N G E	20 Occupancy CENTED					
A E	22 Printing and publications.		.			
A N P E N	23 Other expenses (attaջin နဲ့ ghedule)					
S E	24 Total operating and administrative expenses. Add lines, 3 through 23	21,051.				21,05
3	expenses. Add lines 13 through 23 25 Contributions grits grants pale PART XV	55,000.				55,00
	26 Total expenses and disbursements. Add lines 24 and 25	76,051.		0.	0.	76,05
	27 Subtract line 26 from line 12:			******		
	a Excess of revenue over expenses and disbursements	143,149.			<u> </u>	
	b Net investment income (if negative, enter 0)			0.		
	C Adjusted net income (if negative, enter 0) or Paperwork Reduction Act Notice, see inst	muetions			0. A0504L 12/23/12	Form 990-PF (20

Par		Balance Sheets Attached Schedules and amounts in the description column should be for end of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest-bearing	65,050.	208,199.	208, 199.
	2	Savings and temporary cash investments		200,133.	200,199.
	3	Accounts receivable			
		Less allowance for doubtful accounts			
-	4	Pledges receivable			
		Less. allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions).			
	7	Other notes and loans receivable (attach sch).			
Š		Less. allowance for doubtful accounts			
A S E T	8	Inventories for sale or use			
Ť	9	Prepaid expenses and deferred charges			
S		a Investments – U.S. and state government obligations (attach schedule)			
		h Investments — corporate stock (attach schedule)			
		c Investments — corporate bonds (attach schedule)			
	11	Investments — land, buildings, and equipment. basis			•
		Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis			_
		Less: accumulated depreciation - (attach schedule)	-		·
	15 16	Other assets (describe Total assets (to be completed by all filers — see the instructions. Also, see page 1, item I)	65,050.	208,199.	208,199.
Ļ	17	Accounts payable and accrued expenses			
Å	18	Grants payable			
A B	19	Deferred revenue			
Ĺ	20	Loans from officers, directors, trustees, & other disqualified persons			
ļ.	21	Mortgages and other notes payable (attach schedule)			
į	22	Other liabilities (describe)			:
	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here	0.	0.	
		and complete lines 24 through 26 and lines 30 and 31.			
NE	24	Unrestricted			
E U	25	Temporarily restricted			:
A D	26	Permanently restricted			
A B A L A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
E L T A	27	Capital stock, trust principal, or current funds			
SN	28	Paid-in or capital surplus, or land, building, and equipment fund			
O E	29	Retained earnings, accumulated income, endowment, or other funds.	65,050.	208,199.	
R S	30	Total net assets or fund balances (see instructions)	65,050.	208,199.	
	31	Total liabilities and net assets/fund balances (see instructions)	65,050.	208,199.	
Par	IIII	Analysis of Changes in Net Assets or Fund Balance			
1	Tota	I net assets or fund balances at beginning of year – Part II colum			CF 050
•		of-year figure reported on prior year's return)		1 2	65,050.
2		er amount from Part I, line 27a		3	143,149.
3		increases not included in line 2 (itemize) Lines 1, 2, and 3			200 100
4 5		ases not included in line 2 (itemize)		5	208,199.
_		i net assets or fund balances at end of year (line 4 minus line 5) -	– Part II, column (b). line		208,199.
	. 5		,		200,100.

	(a) List and describe 2-story brick warehouse	(b) How acquired P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, yea		
1 2	a N/A			D Donation		
					1	
-	<u> </u>		•			
	d					
	е					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal		(h) Gain or (e) plus (f) mi	
	a					
t	b					
	<u> </u>					
	<u> </u>					
		ng gain in column (h) and owned by	the foundation on 12/31/60		0 10.1	
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if ar	(i) ny t	(I) Gains (Colu gain minus column (k), han -0-) or Losses (fro	but not less
	3					
t	b					
	<u> </u>					
	d					
	<u> </u>		enter in Part I, line 7			
3	If gain, also enter in Part I, line in Part I, line 8	oss) as defined in sections 1222(5) a 8, column (c) (see instructions). If (I	oss), enter -0-	3		
Pa	At V Qualification Unde	r Section 4940(e) for Reduce	d Tax on Net Investme	ent Income		
	es,' the foundation does not quali Enter the appropriate amount in	fy under section 4940(e). Do not come each column for each year, see the	nplete this part. Instructions before making a		Yes (d)	No
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of	}	((1)	
	2011		noncharitable-use assi	ets (col	Distribution umn (b) divided b	
	2010		noncharitable-use assi	ets (co	Distribution	
			noncharitable-use assi	ets (co	Distribution	
	2009		noncharitable-use ass	ets (col	Distribution	
	2009 2008		noncharitable-use ass	ets (col	Distribution	
	2009		noncharitable-use ass	ets (col	Distribution	
	2009 2008		noncharitable-use ass	ets (col	Distribution	
	2009 2008 2007 Total of line 1, column (d) Average distribution ratio for the	e 5-year base period — divide the tota has been in existence if less than 5	el on line 2 by 5, or by the		Distribution	
	2009 2008 2007 Total of line 1, column (d) Average distribution ratio for the number of years the foundation	e 5-year base period — divide the tota has been in existence if less than 5 table-use assets for 2012 from Part X	el on line 2 by 5, or by the years	2	Distribution	
3	2009 2008 2007 Total of line 1, column (d) Average distribution ratio for the number of years the foundation	has been in existence if less than 5	el on line 2 by 5, or by the years	2	Distribution	
3	2009 2008 2007 Total of line 1, column (d) Average distribution ratio for the number of years the foundation Enter the net value of nonchard	has been in existence if less than 5 table-use assets for 2012 from Part X	el on line 2 by 5, or by the years	2 3	Distribution	
3 4 5	2009 2008 2007 Total of line 1, column (d) Average distribution ratio for the number of years the foundation Enter the net value of nonchard Multiply line 4 by line 3	has been in existence if less than 5 table-use assets for 2012 from Part X	el on line 2 by 5, or by the years	2 3 4 5	Distribution	
3 4 5 6	2009 2008 2007 Total of line 1, column (d) Average distribution ratio for the number of years the foundation Enter the net value of nonchard Multiply line 4 by line 3 Enter 1% of net investment income	has been in existence if less than 5 table-use assets for 2012 from Part X ome (1% of Part I, line 27b)	el on line 2 by 5, or by the years	2 3 4 5	Distribution	

	990-PF (2012) THE FOLEY PRIVATE CHARITABLE FOUNDATION		68253 <u>:</u>		1	Page 4
Pa	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	see in:	structio	15)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here					
	Date of ruling or determination letter (attach copy of letter if necessary — see instrs)					
t	Domestic foundations that meet the section 4940(e) requirements in Part V,	-	1			0.
	check here ► ☐ and enter 1% of Part I, line 27b		ŧ			
•	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)	-	Ŧ			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable					
	foundations only. Other's enter -0-)	L	2			0.
3	Add lines 1 and 2	<u> </u>	3			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)) <u> </u>	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5			0.
6	Credits/Payments	ŀ	#			
	2012 estimated tax pmts and 2011 overpayment credited to 2012	[Ī			
	Exempt foreign organizations — tax withheld at source		1			
	: Tax paid with application for extension of time to file (Form 8868)		1			
_	Backup withholding erroneously withheld Takel and the and neuronate Add lance Continues College (Continues Continues Continue	 	_ 1			•
7	Total credits and payments Add lines 6a through 6d	\vdash	7			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	_ _	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9			0.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	-	0			
11 (D ai	Enter the amount of line 10 to be: Credited to 2013 estimated tax *** Refunded TVI-A Statements Regarding Activities		1			
				[Yes	l Na
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	İ		1 a	162	No X
				· · ·		1
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?			1 b		Х
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials or distributed by the foundation in connection with the activities.	publisi	hed			
	: Did the foundation file Form 1120-POL for this year?			1 c		X
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation (2) On foundation managers		_			
	(1) On the foundation	<u> </u>	0	<u>-</u>		
·	foundation managers \$\\$\$	ea on				
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, art	cloc				
3	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	icies		3		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		Х
Ŀ	If 'Yes,' has it filed a tax return on Form 990-T for this year?			4 b	N	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	-	Х
	If 'Yes,' attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.					
	By language in the governing instrument, or					
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that with the state law remain in the governing instrument? 	it conflic	ct	6		х
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV			7	X	
	Enter the states to which the foundation reports or with which it is registered (see instructions)	-				
	CA	-				
ь	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			8 b	X]
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If 'Yes,' compared to the section 4942(j)(3) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)?	or 494	2()(5)			v
				9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing the and addresses	eir name	es	10		х
BAA		*	F	orm 99	0-PF (

BAA

charitable purposes?

the tax year beginning in 2012?

3 b

4 a

N/A

Х

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

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

Form 990-PF (2012) THE FOLEY PRIVATE Part VII-B Statements Regarding Activit			27-26 quired (continued)		Page 6
5a During the year did the foundation pay or incu		ii ii zo iii ay bo ii o	quired (continued)	1 1	
(1) Carry on propaganda, or otherwise attempt	-	n (section 4945(e))?	☐ Yes X	No	
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registra	ic election (see section	4955), or to carry		No	
(3) Provide a grant to an individual for travel,		ourposes?	<u></u>	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, org 4940(d)(2)? (see instruc	ganization described ctions)	Yes X	No	
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children o	, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of t described in Regulations section 53.4945 or in (see instructions)?	he transactions fail to q a current notice regard	ualify under the excepting disaster assistance	ons	5 b	N/A
Organizations relying on a current notice regains	rding disaster assistance	e check here	▶		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure responsing 'Yes,' attach the statement required by Region 1.	sibility for the grant?	• • •	N/A Yes] No	
6a Did the foundation, during the year, receive ar on a personal benefit contract?		• •	∏Yes X	No	
b Did the foundation, during the year, pay premi	ums, directly or indirect	ly, on a personal benefi		6 Ь	<u> </u>
7 a At any time during the tax year, was the found	ation a party to a prohib	oited tax shelter transac	tion? Yes X	No	
b If 'Yes,' did the foundation receive any procee	ds or have any net inco	me attributable to the tr	ansaction?	N/A 76	1
Part VIII Information About Officers, Dir	ectors, Trustees, Fo	undation Managers	, Highly Paid Empl	oyees,	
and Contractors			<u> </u>		
1 List all officers, directors, trustees, foundation	1		T	1	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other all	account, owances
CHRISTY A. FOLEY	PRESIDENT	19,200.	0.		0.
1517 NORTH POINT #430	20.00				
SAN FRANCISCO, CA 94123	CEC (EDEL CITE				
LYNN BROWN P.O. BOX 1808	SEC/TREASURE 0	0.	0.		0.
HAYDEN LAKE, ID 83835	U				
MARIANNE LOWE	TRUSTEE	0.	0.		
2020 N. BROADWAY	0	0.	0.		0.
SANTA ANA, CA 92702					
DENNIS GARVEY	TRUSTEE	0.	0.	-	0.
2020 N BROADWAY	0	.	· ·		0.
SANTA ANA, CA 92702					
2 Compensation of five highest-paid employees	(other than those inclu	ded on line 1 — see ins	tructions). If none, ente	r 'NONE.'	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense other alle	account, owances
NONE					
	·				
				i	
					 -
Total number of other employees paid over \$50,000			•		0
BAA	TEEA0306L 12	2/25/12		Form 990-	PF (2012)

Form 990-PF (2012) THE FOLEY PRIVATE CHARITABLE FOUNDATION 27-26 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emp and Contractors (continued)	82535 Page 7 loyees,
3 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	0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
	-
	-
2	
3	_
	_
4	
	-
	-
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
N/A	-
	-
2	
	_
All other program-related investments. See instructions.	
3	-
	-
Total. Add lines 1 through 3	0.
BAA	Form 990-PF (2012)

2 c

4 5

6 7 3,863.

3,863.

3,863.

Part XII Qualifying Distributions (see instructions)

Deduction from distributable amount (see instructions)

Recoveries of amounts treated as qualifying distributions

Add lines 3 and 4

3 Distributable amount before adjustments. Subtract line 2c from line 1

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1

1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes. a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	76,051.
b Program-related investments — total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3 a	
b Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions. Add I'nes 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	76,051.
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 instructions)	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	76,051.

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

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,				2 062
line 7 2 Undistributed income, if any, as of the end of 2012.				3,863.
_ · ·			,	
a Enter amount for 2011 only		` `	0.	
b Total for prior years: 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2012			· .	
a From 2007				
b From 2008				
c From 2009				
d From 2010				
e From 2011 21, 469.	21 460			
f Total of lines 3a through e	21,469.			
4 Qualifying distributions for 2012 from Part				
XII, line 4. • \$ 76,051.			, 1	
a Applied to 2011, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.			
d Applied to 2012 distributable amount				3,863.
e Remaining amount distributed out of corpus	72,188.		***************************************	3,003.
5 Excess distributions carryover applied to 2012	72,100.			0.
(If an amount appears in column (d), the	<u> </u>			:
same amount must be shown in column (a).)	,			• •
6 Enter the net total of each column as				
indicated below:	02 657		ļ	:
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	93,657.			
b Prior years' undistributed income. Subtract		0.]	
line 4b from line 2b		- 0.		: :
c Enter the amount of prior years' undistributed income for which a notice of deficiency				
has been issued, or on which the section				
4942(a) tax has been previously assessed		0.	·····	, , , , , , , , , , , , , , , , , , ,
d Subtract line 6c from line 6b Taxable		ا ،	1	`
amount – see instructions		0.		: ·
e Undistributed income for 2011 Subtract line 4a from			0.	
line 2a Taxable amount — see instructions			· · · · · · · · · · · · · · · · · · ·	
f Undistributed income for 2012 Subtract lines				
4d and 5 from line 1. This amount must be				0
distributed in 2013				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3)	_			
(see instructions)	0.			
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)	0.			
applied on line 5 or line 7 (see instructions)	0.			:
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	93,657.			
10 Analysis of line 9.				
a Excess from 2008				
b Excess from 2009				
c Excess from 2010		1		
d Excess from 2011 21, 469.				
e Excess from 2012 72,188.				

	(2012) THE FOLEY PRIVAT				27-2682535	Page 10
	Private Operating Founda			<u> </u>		N/A
ıs effec	oundation has received a ruling or ditive for 2012, enter the date of the i	uling		-		1.000
	box to indicate whether the foundati ne lesser of the adjusted net	on is a private ope	rating foundation de:	Prior 3 years	4942(j)(3) or	4942(j)(5)
ıncome	from Part I or the minimum	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
	nent return from Part X for ear listed	(4) 2012	(6) 2511	(6) 2010	(4) 2003	(e) Total
b 85% of						
line 4 fo	ng distributions from Part XII, or each year listed					<u> </u>
	included in line 2c not used directly conduct of exempt activities					
for activ Subtrac	ing distributions made directly ve conduct of exempt activities. It line 2d from line 2c					
3 Complete alternate	ete 3a, b, or c for the tive test relied upon					
a 'Assets	' alternative test — enter.					
• •	ue of all assets					
sec	ue of assets qualifying under tion 4942(j)(3)(B)(i)					
minimum	ent' alternative test — enter 2/3 of i investment return shown in Part X, each year listed					
	rt' alternative test — enter.					.
inve divi on	al support other than gross estment income (interest, dends, rents, payments securities loans (section £(a)(5)), or royalties)				_	
more	port from general public and 5 or e exempt organizations as provided ection 4942(j)(3)(B)(III)					
(3) Lar an	gest amount of support from exempt organization					
	ess investment income					
Part XV	Supplementary Information assets at any time during th	(Complete this	part only if the	foundation had	1 \$5,000 or more	e in
	assets at any time during the		istructions.)		 .	
a List anv	managers of the foundation who he fany tax year (but only if they have	ave contributed mo	ore than 2% of the to han \$5,000). (See so	tal contributions rec ection 507(d)(2).)	eived by the foundat	tion before the
b List any a partne NONE	managers of the foundation who o ership or other entity) of which the f	wn 10% or more of oundation has a 10	the stock of a corpo % or greater interes	oration (or an equally t	/ large portion of the	ownership of
Check h	ntion Regarding Contribution, Grant here $\stackrel{\blacktriangleright}{}$ ${}$ If the foundation only m is for funds. If the foundation makes the items 2a, b, c, and d	akes contributions	to preselected chari	table organizations a		
a The nar	ne, address, and telephone numbe	r or e-mail of the pe	erson to whom appli	cations should be ac	ldressed.	
	The state of the s	had to				
b the for	n in which applications should be s	ubmitted and inforn	nation and materials	they should include	•	
c Any sub	omission deadlines.					
d Any res	trictions or limitations on awards, si	uch as by geograph	nical areas, charitabl	e fields, kinds of ins	titutions, or other fa	ctors

Form 990-PF (2012) THE FOLEY PRIVATE CHARITABLE FOUNDATION 27-2682535 Page 11 Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, -oundation Recipient show any relationship to any Purpose of grant or status of recipient **Amount** foundation manager or contribution Name and address (home or business) substantial contributor a Paid during the year **BIONEERS** CHARITABLE ORG GENERAL CHARITABLE 10,000. 1607 PASEO DE PERALTA , SUITE 3 OPERATIONS - SOLVING SANTA FE, NM 87501 ENVIRONMENTAL AND SOCIAL PROBLEMS. CHARITABLE ORG THE PACHAMAMA ALLIANCE GENERAL CHARITABLE 25,000. PRESIDIO BUILDING #1009 OPERATIONS -SAN FRANCISCO, CA 94129 PRESERVING THE AMAZON RAINFOREST. ISHA FOUNDATION CHARITABLE ORG GENERAL CHARITABLE 10,000. 951 ISHA LANE OPERATIONS -MCMINNVILLE, TN 37110 PHYSICAL, MENTAL & SPIRITUAL WELL-BEING CATHOLIC CHARITIES, USA CHARITABLE ORG GENERAL OPERATIONAL 10,000. P.O. BOX 17141 PURPOSES - HURRICANE BALTIMORE, MD 21297 SANDY RELIEF **Total** 3 a 55,000. b Approved for future payment

Total

3ь

Part XVI-A Analysis of Income-Producing Activities

Enter grees	amounts unless otherwise indicated.	Unrelate	d business income	Evaludad	by section 512, 513, or 514	
_	am service revenue.	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions.)
_				1		
		-				
				-		
		-		- 		
f				+		
a Fees	and contracts from government agencies			1		
_	pership dues and assessments			1 -1		_
	t on savings and temporary cash investments					
	ends and interest from securities	 		 		- · · · · · · · · · · · · · · · · · · ·
· -	ental income or (loss) from real estate:					[
	financed property					
	ebt-financed property	-		 		<u> </u>
	ntal income or (loss) from personal property			1 1		
	r investment income			+	 	
	(loss) from sales of assets other than inventory					
	ncome or (loss) from special events s profit or (loss) from sales of inventory		· · · · · · · · · · · · · · · · · · ·			
	•			-		
	revenue:					
					-	
						· · · · · · · · · · · · · · · · · · ·
e	1 1 A 11 1 (A) (A) = -1 (A)			-		
	otal. Add columns (b), (d), and (e)	1				<u> </u>
40						
	. Add line 12, columns (b), (d), and (e)				13	0.
(See worksl	heet in line 13 instructions to verify calculations	···			· · · · · · · · · · · · · · · · · · ·	0.
(See worksl		···	shment of Exemp	ot Purpo	· · · · · · · · · · · · · · · · · · ·	0.
(See worksl	B Relationship of Activities to the	Accompli			ses	
(See worksl	B Relationship of Activities to the	Accompli			ses	
(See works) Part XVI Line No.	heet in line 13 instructions to verify calculations	Accompli			ses	
(See worksl Part XVI- Line No.	B Relationship of Activities to the	Accompli			ses	
(See works) Part XVI Line No.	B Relationship of Activities to the	Accompli			ses	
(See works) Part XVI Line No.	B Relationship of Activities to the	Accompli			ses	
(See works) Part XVI Line No.	B Relationship of Activities to the	Accompli			ses	
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(See works) Part XVI Line No.	B Relationship of Activities to the	Accompli			ses	
(See works) Part XVI Line No.	B Relationship of Activities to the	Accompli			ses	
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(See works) Part XVI Line No.	B Relationship of Activities to the	Accompli			ses	
(See works) Part XVI Line No.	B Relationship of Activities to the	Accompli			ses	
(See works) Part XVI Line No.	B Relationship of Activities to the	Accompli			ses	
(See works) Part XVI Line No.	B Relationship of Activities to the	Accompli			ses	

Form 990-PF (2012) THE FOLEY PRIVATE CHARITABLE FOUNDATION 27-2682535 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

				_				p		$\overline{}$
describe	organization directly of the contract of the contract of the contract organization of the contract of the cont	f the Code (other	age in any of the than section !	ne following with 501(c)(3) organi	any othezations)	er organization or in section 52	27,		Yes	No
•	rs from the reporting		noncharitable e	exempt organiza	tion of.					
(1) Cas								1 a (1)		Х
(2) Oth	er assets							1 a (2)		Х
b Other tr	ansactions.									
(1) Sale	es of assets to a nond	charitable exemp	t organization					1 Ь (1)		X
(2) Pur	chases of assets fron	n a noncharitable	exempt organ	nization				1 b (2)		X
(3) Ren	ital of facilities, equip	ment, or other as	ssets					1 b (3)		X
(4) Rei	mbursement arranger	ments						1 b (4)		Х
(5) Loa	ns or loan guarantee:	s						1 b (5)		X
٠,	formance of services	•	J					1 b (6)		X
c Sharing	of facilities, equipme	ent, mailing lists,	other assets, o	or paid employe	es.			1 c		X
d If the ar the good any tran	nswer to any of the at ds, other assets, or s asaction or sharing ar	pove is 'Yes,' cor ervices given by rangement, show	mplete the follo the reporting f	owing schedule. Toundation If the the value of the	Column foundate goods.	(b) should alwation received le	ays show the far ess than fair mai or services recei	r market value rket value in	of	
(a) Line no	(b) Amount involved		oncharitable exemp				isfers, transactions,		gements	
N/A					1 1	<u> </u>				
							 -			
	" -						·			
					-		-			
					ľ					
										
								-		
	·					,				
<u> </u>						·				
describe	undation directly or in ed in section 501(c) of complete the followin	f the Code (other	d with, or relate than section 5	ed to, one or mo 501(c)(3)) or in s	re tax-ex ection 52	kempt organiza 27?	itions	Yes	X	No
	Name of organization	on	(b) Type	of organization		(c) Description of	relationship		
N/A										
Under p correct,	enalties of perjury, I declare the	nat I have examined this of preparer (other than	return, including ac n taxpayer) is base	companying schedules d on all information of	and statem of which pre	ents, and to the best parer has any know	of my knowledge and wledge	belief, it is true,	25 diecu	
lere Signa		Moren)		10/25//3 Date	S.		TREAS	this return preparer s	with the	e elow
	Print/Type preparer's nam		Preparer's si	•		Date		If PTIN		
Paid		OWN		un a Brow	V2~	10-25-1		P01355	698	
reparer		ROWN & BROW	WN CPAS				Firm's EIN > 95	-3758100		
Jse Only		.O. BOX 186								
	H	AYDEN LAKE,	ID 83835	5			Phone no (2	08) 772-9		
BAA								Form 990	- PF (2	:012)

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

2012

Name of the organization		Employer identification number
THE FOLEY PRIVATE CHARITABL	E FOUNDATION	27-2682535
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	I as a private foundation
	527 political organization	·
	SZ, pomiodi organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as	a private foundation
	무 ''''	a private roundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the	Conoral Pule or a Special Pule	
	•	
Note. Only a section 501(c)(7), (8), or (10) or	rganization can check boxes for both the General Rule and	d a Special Rule. See instructions
General Rule		
X For an organization filing Form 990, 990-contributor. (Complete Parts I and II.)	EZ, or 990-PF that received, during the year, \$5,000 or m	lore (in money or property) from any one
Special Rules		
509(a)(1) and 170(b)(1)(A)(vi) and receiv	g Form 990 or 990-EZ that met the 33-1/3% support test of ed from any one contributor, during the year, a contributio art VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts	on of the greater of (1) \$5.000 or
For a section 501(c)(7), (8), or (10) organ total contributions of more than \$1,000 for the prevention of cruelty to children or an	nization filing Form 990 or 990-EZ that received from any or use <i>exclusively</i> for religious, charitable, scientific, literar nimals Complete Parts I, II, and III.	one contributor, during the year, ry, or educational purposes, or
☐ contributions for use exclusively for religi	nization filing Form 990 or 990-EZ that received from any clous, charitable, etc. purposes, but these contributions did all contributions that were received during the year for an ets unless the General Rule applies to this organization bec	I not total to more than \$1,000.
religious, charitable, etc, contributions of		► \$
Caution: An organization that is not covered by the Generalswer 'No' on Part IV, line 2, of its Form 990, or chemeet the filing requirements of Schedule B (ral Rule and/or the Special Rules does not file Schedule B (Form 990, 990- eck the box on line H of its Form 990-EZ or on Part I, line 2, of its Fo Form 990, 990-EZ, or 990-PF)	EZ, or 990-PF) but it must orm 990-PF, to certify that it does not
BAA For Paperwork Reduction Act Notice, sor 990-PF.	see the Instructions for Form 990, 990EZ, Sched	ule B (Form 990, 990-EZ, or 990-PF) (2012)

Pac	e

1 of Part 1

THE FOLEY PRIVATE CHARITABLE FOUNDATION

Page 1 of Employer identification number 27-2682535

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed	i	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FOLEY FAMILY TRUST P.O. BOX 1808 HAYDEN LAKE, ID 83835	\$219,200.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(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) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II if there is a noncash contribution Part II if there is
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution)
D 4 4		0.11.11.5.77	00.000.00

Page

1 to

1 of Part II

Name of organization

THE FOLEY PRIVATE CHARITABLE FOUNDATION

Employer identification number

27-2682535

art II	Noncash Property (see instructions). Use duplicate copies of Part II if additional	- space		
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A			
		_		
		\$_		
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date receive
		\$		
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
		= .		-
	V	\$_		
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date receive
		_ \$_		,,
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
				, <u> </u>
		\$_		
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date receive
		\dashv		
		\$_		

Page

of Part III

Name of organization
THE FOLEY PRIVATE CHARITABLE FOUNDATION

Employer identification number

27-2682535

Part III	Exclusively religious, charitable, etc organizations that total more than	, individual contributions \$1,000 for the year. Comp	to section 5	501(c)(7), (8) or (10) a) through (e) and the following line entry.	
	For organizations completing Part III, enter contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional	total of <i>exclusively</i> religious, ch (Enter this information once. Se	arıtable, etc.		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	,	(d) Description of how gift is held	
	N/A				
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rel	ationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
	Transferee's name, addres	· (e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
	(e) Transfer of gift Transferee's name, address, and ZIP + 4			ationship 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, and ZIP + 4			ationship of transferor to transferee	

2012

FEDERAL STATEMENTS

PAGE 1

THE FOLEY PRIVATE CHARITABLE FOUNDATION

27-2682535

STATEMENT 1 FORM 990-PF, PART I, LINE 16A LEGAL FEES

LEGAL FEES-DRISCOLL & FEDER TOTAL (A) (B) NET (C) ADJUSTED CHARITABLE PER BOOKS INCOME NET INCOME PURPOSES

1,841. (A) (B) NET (C) ADJUSTED NET INCOME PURPOSES

1,841. (A) (D) CHARITABLE PURPOSES

STATEMENT 2 FORM 990-PF, PART I, LINE 18 TAXES

1 or Tile

(Rev January 2013)

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545 1709

X

Department of the Treasury Internal Revenue Service

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

Do not con Electronic of corporation request an Associated	ire filing for an Additional (Not Automatic) 3-Month inplete Part II unless you have already been granted filing (e-file). You can electronically file Form 8868 is required to file Form 990-T), or an additional (not extension of time to file any of the forms listed in With Certain Personal Benefit Contracts, which milling of this form, visit www.irs.gov/efile and click of	d an automa if you need automatic) Part I or Pa ust be sent	atic 3-month extention on a previously file a 3-month automatic extension of time to 3-month extension of time. You can elect the structure of Form 8870, Info to the IRS in paper format (see instruction	ed For o file (tronica ormatic	m 8868. 6 months following formally file Formally file Formally file Formally formal	n 8868 to or Transfers
Part 1	Automatic 3-Month Extension of Time.	Only subn	nit original (no copies needed).		<u>-</u>	
	on required to file Form 990-T and requesting an a	utomatic 6-	month extension - check this box and co	mplet	e Part I on	v ► □
•	prporations (including 1120-C filers), partnerships,			an ext	ension of til	me to file
	Name of exempt organization or other filer, see instructions					on number (EIN) or
Type or print				27-	number (SSN)	
file by the due date for filing your	1517 NORTH POINT #430 City, town or post office, state, and ZIP code For a foreign ad		ructions			· · · · · · · · · · · · · · · · · · ·
return See instructions.	SAN FRANCISCO, CA 94123	uress, see ms	Inchoris			
Enter the R	Return code for the return that this application is fo	r (file a sepa	arate application for each return)			04
Application Is For		Return Code	Application ls For	-	-	Return Code
Form 990 o	r Form 990-EZ	01	Form 990-T (corporation)			07
Form 990-E	3L	02	Form 1041-A			08
Form 4720	(individual)	03	Form 4720			09
Form 990-F	PF	04	Form 5227			10
	(section 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T	(trust other than above)	06	Form 8870			12
Telepho If the or If this is check the external the external the content to the content	ension is for.	digit Group heck this bo	Exemption Number (GEN) and attach a list with the nar		s for the wh	
until The e ► [] ►	lest an automatic 3-month (6 months for a corpora 8/15, 20 13, to file the exempt organization is for the organization's return for: calendar year 20 12 or, 20, 20, 20	nization ret	urn for the organization named above.			
	tax year entered in line 1 is for less than 12 month nange in accounting period	is, check re	ason: Initial return Fin	al retu	ırn	
nonre	application is for Form 990-BL, 990-PF, 990-T, 473 fundable credits. See instructions.	· - · · · · · · · · · · · · · · · · · ·		3 a	\$	0.
payme	application is for Form 990-PF, 990-T, 4720, or 60 ents made. Include any prior year overpayment all	owed as a d	redit	3 ь	\$	0.
EFTP	ce due. Subtract line 3b from line 3a. Include your S (Electronic Federal Tax Payment System). See	nstructions	· · · · · · · · · · · · · · · · · · ·	3 с		0.
Caution. If y payment ins	you are going to make an electronic fund withdraw structions.	al with this l	Form 8868, see Form 8453-EO and Form	8879	EO for	

Form 886	B (Rev 1-2013)					Page 2
• If you a	are filing for an Additional (Not Automatic) 3-Month	Extension,	complete only Part II and check this	box		► X
Note. Only	complete Part II if you have already been granted	an automat	ic 3-month extension on a previously	filed Form	1 8868.	
If you a	are filing for an Automatic 3-Month Extension, comp	olete only P	art I (on page 1).			
Part II	Additional (Not Automatic) 3-Month Exte	ension of	Time. Only file the original (no	copies	needed).	
<u> </u>			Enter filer's id	lentifying	number, se	ee instructions
	Name of exempt organization or other filer, see instructions			Employer identification number (EIN) or		
-						
Type or print	THE FOLEY PRIVATE CHARITABLE FOUNDATION			27-2682	535	
					y number (SS	N)
File by the extended	BROWN & BROWN CPAS					
due date for filing your	P.O. BOX 1867					
return See instructions	City, town or post office, state, and ZIP code For a foreign addre	ess, see instruc	tions			
III SU BCUONS	HAYDEN LAKE, ID 83835					
	THRIDEN LAKE, ID 63633					
Enter the	Return code for the return that this application is for	file a sepa	arate application for each return).			04
Application Is For	on	Return Code	Application Is For			Return Code
Form 990	or Form 990-EZ	01				
Form 990-	BL	02	Form 1041-A			08
Form 4720) (individual)	03	Form 4720			09
Form 990-	PF	04	Form 5227			10
Form 990-	T (section 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-	T (trust other than above)	06	Form 8870			12
Teleph If the control of this whole grow	organization does not have an office or place of bus is for a Group Return, enter the organization's four up, check this box	digit Group	United States, check this box	 the name		this is for the
members	the extension is for				_	
5 For 6 1f the (7 State	calendar year 2012, or other tax year beginning tax year entered in line 5 is for less than 12 month. Change in accounting period.	g ns, check re	, 20 <u>13</u> , 20, and ending ason.			
nonr	s application is for Form 990-BL, 990-PF, 990-T, 472 efundable credits. See instructions.		· · · · · · · · · · · · · · · · · · ·	8 a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.			0.			
c Bala EFTF	nce due. Subtract line 8b from line 8a. Include your PS (Electronic Federal Tax Payment System). See i	payment winstructions	th this form, if required, by using	8 c	\$	0.
	Signature and Verific	ation mu	st be completed for Part II or	ıly.		
correct, and c	s of penury, I declare that I have examined this form, including accompare complete, and that I am authorized to prepare this form				G	1,11,12
Signature P	Cymn Willem Title		ARY/TREAS	·	ate ► 8	[174/1] (Pay 1 2012)
DAA	<i>U</i>	FIFZ0502L	U1/21/13		LOLLI 220 5	3 (Rev 1-2013)