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Form **990-PF**

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

OMB No 1545-0052

2013

Department of the Treasury
Internal Revenue Service

Do not enter
Information abo

For calendar year 2013, or tax year beginning

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

| For ca | lendar year 2013, or tax year beginning | , 2013 | and ending | 1 | |
|-------------------|--|--------------------------|---------------------------------------|--|-------------------------------|
| | CY FAMILY FOUNDATION B E. HIGHLAND AVE. F104-618 | | A | Employer identification num 26-2884937 | |
| | ENIX, AZ 85016 | | В | Telephone number (see the 602-315-9570 | instructions) |
| G Ch | eck all that apply Initial return | Initial return of a form | ner public charity | If exemption application is | pending, check here |
| | Final return | Amended return | D | 1 Foreign organizations, chec | k here $ ightharpoonup$ |
| | X Address change | Name change | | 2 Foreign organizations meet | ing the 85% test, check |
| H C | Check type of organization $X Section 501$ Section 4947(a)(1) nonexempt charitable to | (c)(3) exempt private f | da falladadaa | here and attach computation | Ш |
| I F | | ounting method X C | = | If private foundation status under section 507(b)(1)(A) | |
| | | Other (specify) | Accidal F | If the foundation is in a 60 | · |
| ► \$ | 1,899,502. (Part 1, | column (d) must be or | 1 ' | under section 507(b)(1)(B) | |
| Part | | (a) Revenue and | (b) Net investment | (c) Adjusted net | (d) Disbursements |
| | Expenses (The total of amounts in columns (b), (c), and (d) may not neces- | expenses per books | income | income | for charitable purposes (cash |
| | sarily equal the amounts in column (a) (see instructions)) | | | | basis only) |
| | Contributions, gifts, grants, etc, received (att sch) | | | | |
| | 2 Ck X if the foundn is not req to att Sch B | | · | | |
| | 3 Interest on savings and temporary cash investments | 17. | 17. | 17. | |
| | 4 Dividends and interest from securities | 13,147. | 13,147 | 13,147. | |
| | 5 a Gross rents b Net rental income | | | | |
| RE | or (loss) 6 a Net gain/(loss) from sale of assets not on line 10 | | | : | |
| V | b Gross sales price for all assets on line 6a | | | | |
| ୍ଧି E ସ N | 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain | | | | |
| U | 9 Income modifications | | | | |
| E | 10 a Gross sales less returns and | | | | |
| - ! | allowances b Less Cost of | | | | |
| | c Gross profit/(loss) (att sch) | | | · · · · · · · · · · · · · · · · · · · | |
| ! ! | 11 Other income (attach schedule) | 204 404 | 224 124 | 224 424 | |
| • •) | SEE STATEMENT 1 12 Total. Add lines 1 through 11 | 304,101. 317,265. | 304,101 317,265 | 304,101. 317,265. | |
| | 13 Compensation of officers, directors, trustees, etc. | 0. | 311,203 | 317,203. | |
| | 14 Other employee salaries and wages | | | | |
| | 15 Pension plans, employee benefits 16a Legal fees (attach schedule) SEE ST 2 | 41,600. | 41,600 | 41,600. | · · · |
| Ď M | b Accounting fees (attach sch) SEE ST 3 | 8,255. | 8,255 | 8,255. | |
| N | e Other prof fees (attach sch) SEE ST 4 | 380. | 380 | 380. | |
| OPERAT | 17 Reference (attach school (Assembly) SEE STM 5 | 2,069. | | | · · |
| Ř A | 19 Depreciation (attach | 2,009. | | | · · |
| | Nsch) and depletion | | | | |
| N V | 21 Travel, conferences, and meetings | | · · · · · · · · · · · · · · · · · · · | | |
| A E | 22 Printing and publications | | | | |
| N D E | 23 Other expenses (attach schedule) SEE STATEMENT 6 | 350. | 350 | 350. | |
| S E | 24 Total operating and administrative expenses. Add lines 13 through 23 | E2 654 | 50,585 | 50,585. | |
| S | 25 Contributions, gifts, grants paid PART XV | 52,654. 142,000. | 30,365 | 30,363. | 142,000. |
| | 26 Total expenses and disbursements. Add lines 24 and 25 | 194,654. | 50,585 | 50,585. | 142,000. |
| - | 27 Subtract line 26 from line 12: | 151,051. | | 30,000. | 212,000. |
| | a Excess of revenue over expenses and disbursements | 122,611. | | | |
| | b Net investment income (if negative, enter -0-) | | 266,680 | | |
| | C Adjusted net income (if negative, enter -0-) | | | 266,680. | Form 990 PF (2013) |

Page 2

| Day | | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year | End o | f year | | | |
|------------------|--|---|---------------------------------------|----------------|-----------------------|--|--|--|
| Par | . 11 | 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 | 71,800. | 85,752. | 85,752. | | | |
| | ٠2 | Savings and temporary cash investments | 82,798. | 192,816. | 192,816. | | | |
| | 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) | | | | | | |
| Ą | | Less allowance for doubtful accounts > | | | | | | |
| Š | 8 | Inventories for sale or use . | | • | | | | |
| A S E T | 9 | Prepaid expenses and deferred charges | | | | | | |
| Ś | 10: | a Investments — U.S. and state government obligations (attach schedule) | | | | | | |
| | ļ | b 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) STATEMENT 7 | 1,616,709. | 1,620,934. | 1,620,934. | | | |
| | 14 | Land, buildings, and equipment basis ▶ | | | | | | |
| | | Less. accumulated depreciation (attach schedule) | | | | | | |
| | 15 | Other assets (describe | | | | | | |
| | 16 | Total assets (to be completed by all filers — see the instructions. Also, see page 1, item I). | 1,771,307. | 1,899,502. | 1,899,502. | | | |
| | 17 | Accounts payable and accrued expenses | 2777270077 | 2/033/002. | 2,033,002. | | | |
| I A | 18 | Grants payable | | | | | | |
| ĝ | 19 | Deferred revenue | | | | | | |
| L | 20 | Loans from officers, directors, trustees, & other disqualified persons | | | | | | |
| Ī | 21 | Mortgages and other notes payable (attach schedule) | - | | - | | | |
| i | 22 | Other liabilities (describe) | | | i I | | | |
| E S | 23 | Total liabilities (add lines 17 through 22) | 0. | 0. | | | | |
| | 23 | Foundations that follow SFAS 117, check here | 0. | 0. | | | | |
| | | and complete lines 24 through 26 and lines 30 and 31. | | | | | | |
| N F E U | 24 | Unrestricted | · · · · · · · · · · · · · · · · · · · | | | | | |
| ΤN | 25 | Temporarily restricted | | | | | | |
| A D | 26 | Permanently restricted Foundations that do not follow SFAS 117, check here | | | | | | |
| SBSA | | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. | | | | | | |
| ΕL | 27 | Capital stock, trust principal, or current funds | 1,771,307. | 1,899,502. | 1 | | | |
| TASN | 28 | Paid-in or capital surplus, or land, building, and equipment fund | 1,771,307. | 1,033,302. | | | | |
| С | 29 | Retained earnings, accumulated income, endowment, or other funds | | | | | | |
| O E R S | 30 | Total net assets or fund balances (see instructions) | 1,771,307. | 1,899,502. | | | | |
| • | 31 | Total liabilities and net assets/fund balances | • | | | | | |
| Dov | • | (see instructions) Analysis of Changes in Net Assets or Fund Balance | 1,771,307. | 1,899,502. | | | | |
| | | | | | | | | |
| 1 | Tota | I net assets or fund balances at beginning of year — Part II, colu of-year figure reported on prior year's return). | mn (a), line 30 (must a | gree with | 1,771,307. | | | |
| 2 | | er amount from Part I, line 27a | | 2 | 122,611. | | | |
| 3 | | increases not included in line 2 (itemize) SEE STATEMENT | 8 | 3 | 5,584. | | | |
| 4 | | lines 1, 2, and 3 | · | | 1,899,502. | | | |
| 5 | | ases not included in line 2 (itemize) | | 5 | , , | | | |
| _6_ | Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30 6 1,899,502. | | | | | | | |

| 2-story brick warehouse, or common stock 200 shares MI C Company) | | | How acquired P — Purchase D — Donation | (C) Date acquired (month, day, year) | (d) Date sold (month, day, year) |
|---|---|--|--|--|-------------------------------------|
| 1a N/A | | | D DOMARION | | |
| b · | | | | | |
| c | | | | - | |
| d | - | | | | |
| e | | | | | |
| (e) Gross sales price | (f) Depreciation allowed | (g) Cost or other basis | | (h) Gain or | (loss) |
| (6) 2.000 22.00 \$1100 | (or allowable) | plus expense of sale | | (e) plus (f) m | |
| a | | | | | |
| b | | | | | - |
| С | | | | | |
| d | | | | | |
| e | | | | | . |
| | I ving gain in column (h) and owned by | the foundation on 12/31/69 | | 413 Cours (Cal | |
| (i) Fair Market Value as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of column (i) over column (j), if any | | (I) Gains (Coli ain minus column (k an -0-) or Losses (fr |), but not less |
| а | | - | | | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| е | | | | <u> </u> | |
| | | ¬ | 3 | | |
| | r Section 4940(e) for Reduced | Tax on Net Investmen | | <u> </u> | |
| If 'Yes,' the foundation does not qua | ction 4942 tax on the distributable am diffy under section 4940(e) Do not con in each column for each year; see the | nplete this part. | | Yes | X No |
| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use assets | | (d) Distribution imn (b) divided l | |
| 2012 | 119,190. | 1,716, | 393. | | 0.069442 |
| 2011 | 137,578. | 1,597, | | • | 0.086138 |
| 2010 | 106,319. | 1,557, | | | 0.068258 |
| 2009 | 10,750. | 1,455, | | | 0.007386 |
| 2008 | 6,000. | 690, | | | 0.008695 |
| 2 Total of line 1, column (d) | | | 2 | | 0.239919 |
| 3 Average distribution ratio for the number of years the foundation | ne 5-year base period — divide the tol n has been in existence if less than 5 | tal on line 2 by 5, or by the years | 3 | | 0.047984 |
| 4 Enter the net value of nonchar | itable-use assets for 2013 from Part 2 | X, line 5 | 4 | - | L,851,706. |
| 5 Multiply line 4 by line 3 | | | 5 | | 88,852. |
| 6 Enter 1% of net investment in | come (1% of Part I, line 27b) | | 6 | | 2,667. |
| 7 Add lines 5 and 6 | | | 7 | | 91,519. |
| 8 Enter qualifying distributions fi | | | 8 | | 142,000. |
| If line 8 is equal to or greater in Part VI instructions. | than line 7, check the box in Part VI, I | ine 1b, and complete that pai | rt using a 1% | | ne 990-PF (2013) |

| | <u>884937</u> | | Р | age 4 |
|--|------------------------|-----|-----|----------|
| Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in | nstruction | s) | | |
| 1 a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1. | | | | _ |
| Date of ruling or determination letter. (attach copy of letter if necessary — see instrs) | | | | |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, | 1 | | 2,6 | 567. |
| check here ► X and enter 1% of Part I, line 27b | | | | |
| c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b) | | | | |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable | | | | |
| foundations only Others enter -0-). | 2 | | | 0. |
| 3 Add lines 1 and 2 | 3 | | 2,6 | 567. |
| 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- | 5 | | 2,6 | 667. |
| 6 Credits/Payments | | | | |
| a 2013 estimated tax pmts and 2012 overpayment credited to 2013 6a 2,320. | | | | |
| b Exempt foreign organizations — tax withheld at source 6b | | | | |
| c Tax paid with application for extension of time to file (Form 8868) | | | | |
| d Backup withholding erroneously withheld 6d | | | | |
| 7 Total credits and payments Add lines 6a through 6d | 7 | | 2,3 | 320. |
| 8 Enter any penalty for underpayment of estimated tax. Check here I 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 . SEE STATEMENT 9 . | 9 | | 9 | 362. |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | | | |
| | 11 | | | |
| Part VII-A Statements Regarding Activities | | | | |
| 1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | | | Yes | No |
| participate or intervene in any political campaign? | | 1 a | | Х |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? | ļ | 1 b | | х |
| If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published | | | | <u> </u> |
| or distributed by the foundation in connection with the activities. | | | | l |
| c Did the foundation file Form 1120-POL for this year? | | 1 c | | X |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | | | |
| (1) On the foundation •\$ 0. (2) On foundation managers •\$ | 0. | | | |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers | | i | | |
| | | | | |
| 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 | İ | 3 | | |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | 4 a | | X |
| b If 'Yes,' has it filed a tax return on Form 990-T for this year? | İ | 4 b | NT | |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | 5 | 1/1 | /A X |
| 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: | 1 | | ı. | |
| By language in the governing instrument, or | | i | | |
| | ĺ | | | · |
| • 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 | | : |
| 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 | Х | ļ |
| 8 a Enter the states to which the foundation reports or with which it is registered (see instructions) | | | | ; |
| AZ | | | | |
| b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | | 0.6 | , | · |
| (or designate) of each state as required by General Instruction G? If 'No,' attach explanation | | 8ь | _X | |
| 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4 for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If 'Yes,' complete in the complete of the complete in the complete of the co | 1942(j)(5) Part XIV | 9 | | X |
| 10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses | | 10 | | х |

| Par | 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 | | <u>X</u> |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions) | 12 | | х |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Х | |
| | Website address • N/A | | | |
| 14 | The books are in care of ► MARY RONEY Telephone no. ► 602-3: | <u> 15-9</u> | <u>570</u> _ | |
| 16 | Located at 1928 E. HIGHLAND AVE. F104-618 PHOENIX AZ ZIP + 4 85016 | _N/Ā | | · |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year | +47 +4 | , | ∐ N/A |
| 10 | · · · · · · · · · · · · · · · · · · · | | Yes | No |
| 16 | At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? | 16 | | X |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If 'Yes,' enter the name of the foreign country ► | | | ; |
| Par | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required | <u></u> | | |
| | File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies. | | Yes | No |
| 1 a | a During the year did the foundation (either directly or indirectly) | | | ! |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No | | | ; |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No | | | 1 |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . Yes X No | | | i |
| | | | | ! |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No | | | 1 |
| | (6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) Yes X No | | | 1 |
| ŀ | b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1 b | N | /A |
| | Organizations relying on a current notice regarding disaster assistance check here | | | - |
| (| Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2013? | 1 c | | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | | | ! |
| ā | a At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013? Yes X No | | | i |
| | If 'Yes,' list the years ► 20 _ , 20 _ , 20 | | | , |
| ı | b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | | | : |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions.) | 2 b | N | /A |
| | c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | | |
| | ► 20 , 20 , 20 , 20 <u>_</u> | | | i |
| 3 8 | a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No | | | |
| | b If 'Yes,' did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation | | | |
| | or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to | | | |
| _ | détermine if the foundation had excess business holdings in 2013) | 3 b | N | /A |
| 4 8 | a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4 a | | X |
| ŀ | b Did the foundation make any investment in a prior year (but after December 31, 1969) that could | | | |
| | jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013? | 4 b | | X |
| BAA | | rm 99 | 0-PF (| |

| Form 990-PF (2013) RONEY FAMILY FOUND | | /=xx 11 | 26-288 | 34937 Page 6 |
|---|---|---|--|---------------------------------------|
| Part VII-B Statements Regarding Activiti | | 14/20 May Be Req | uired (continued) | |
| 5 a During the year did the foundation pay or incu | • | | | |
| (1) Carry on propaganda, or otherwise attempt | t to influence legislation | n (section 4945(e))? | Yes X | No |
| (2) Influence the outcome of any specific public on, directly or indirectly, any voter registra | lic election (see section ition drive? | 4955), or to carry | Yes X | No |
| (3) Provide a grant to an individual for travel, | | | ☐ Yes X | No |
| (4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section | nan a charitable, etc, or 4940(d)(2)? (see instru | ganization described actions) | 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 | , literary, or or animals? | Yes X | No |
| b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)? | | | tions | 5b N/A |
| Organizations relying on a current notice rega | rding disaster assistanc | ce check here | ▶ ∐ | |
| c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure responsible. If 'Yes,' attach the statement required by Regulary 1. | sibility for the grant? | | N/A Yes | No |
| 6 a Did the foundation, during the year, receive ar on a personal benefit contract? | ny funds, directly or indi | rectly, to pay premium: | s Yes X | No |
| b Did the foundation, during the year, pay premi | ums, directly or indirec | tly, on a personal bene | fit contract ⁷ | 6 b X |
| If 'Yes' to 6b, file Form 8870 | | | | |
| 7 a At any time during the tax year, was the found | dation a party to a prohi | ibited tax shelter transa | action? Yes X | No _ |
| b If 'Yes,' did the foundation receive any procee | | | | I/A 7b |
| Part VIII Information About Officers, D | rectors, Trustees, | Foundation Manag | gers, Highly Paid E | mployees, |
| and Contractors | | · · · · · · · · · · · · · · · · · · · | · | |
| 1 List all officers, directors, trustees, foundation | n managers and their o | compensation (see inst | ructions). | |
| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| MARY RONEY | PRES SECY | 0. | 0. | 0. |
| 1928 E. HIGHLAND AVE. F104-618 PHOENIX, AZ 85016 | 2.00 | | | |
| RICHARD RONEY | VP TREAS | 0. | 0. | 0. |
| 1928 E. HIGHLAND AVE. F104-618 PHOENIX, AZ 85016 | 2.00 | v . | | · · |
| CHELSEA RONEY | DIRECTOR | 0. | 0. | 0. |
| 1928 E. HIGHLAND AVE. F104-618 PHOENIX, AZ 85016 | 2.00 | 0. | 0. | 0. |
| MARY K RONEY | DIRECTOR | 0. | 0. | 0. |
| 1928 E. HIGHLAND AVE. F104-618 | 2.00 | · · | 0. | 0. |
| PHOENIX, AZ 85016 | | | | |
| 2 Compensation of five highest-paid employees (of | | | | |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d)Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| NONE | | | · · · · · · · · · · · · · · · · · · · | , |
| | | | | |
| | | | · | |
| | | | | |
| | | | | - |
| | | | | |
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| | | | * | |
| | | | | |
| | | | <u> </u> | _ |
| Total number of other employees paid over \$50,000 BAA | TEEA0306L 0 | 7/10/13 | | Form 990-PF (2013) |

| 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 | |
| | |
| | |

Total. Add lines 1 through 3

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0.

Form 990-PF (2013)

| | <u>6-288</u> | |
|--|---------------|--------------|
| Part X Minimum Investment Return (All domestic foundations must complete this part. F | oreign | foundations, |
| see instructions.) | · [· · · · · | |
| 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes a Average monthly fair market value of securities. | | 205 525 |
| • | 1 a | 325,525. |
| b Average of monthly cash balances | 1 b | 267,014. |
| c Fair market value of all other assets (see instructions) | 1 c | 1,287,366. |
| d Total (add lines 1a, b, and c) | 1 d | 1,879,905. |
| e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e 0 | | |
| (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets | $\frac{1}{2}$ | 0 |
| 3 Subtract line 2 from line 1d | 3 | 1 070 005 |
| | 3 | 1,879,905. |
| 4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions) | 4 | 28,199. |
| 5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 | 5 | 1,851,706. |
| 6 Minimum investment return. Enter 5% of line 5 | 6 | 92,585. |
| Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper | ating f | |
| and certain foreign organizations check here ► and do not complete this part.) | | |
| 1 Minimum investment return from Part X, line 6 | 11 | 92,585. |
| 2a Tax on investment income for 2013 from Part VI, line 5 | . 🗆 | |
| b Income tax for 2013. (This does not include the tax from Part VI.) | | |
| c Add lines 2a and 2b | 2 c | 2,667. |
| 3 Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 89,918. |
| 4 Recoveries of amounts treated as qualifying distributions . | 4 | |
| 5 Add lines 3 and 4 | 5 | 89,918. |
| 6 Deduction from distributable amount (see instructions) | 6 | |
| 7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 | 7 | 89,918. |
| Part XII Qualifying Distributions (see instructions) | | |
| | | |
| 1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26 | 1 | 142,000. |
| b Program-related investments — total from Part IX-B | 1 b | 142,000. |
| 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. | 2 | |
| | ├ ─┤ | |
| Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) | 3 a | |
| b Cash distribution test (attach the required schedule) | 3ь | |
| 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 142,000. |
| 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 | 2,667. |
| 6 Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 139,333. |

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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Form **990-PF** (2013)

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2012 | (c) 2012 | (d) 2013 |
|---|----------------------|----------------------------|---------------------------------------|---------------------------|
| Distributable amount for 2013 from Part XI, line 7 | | | | 89,918. |
| 2 Undistributed income, if any, as of the end of 2013. | | ······ | | 05,510. |
| a Enter amount for 2012 only | | | 0. | Į. |
| b Total for prior years 20 , 20 , 20 | | 0. | | |
| 3 Excess distributions carryover, if any, to 2013. | | | | |
| a From 2008 | | | | |
| b From 2009 | | | | |
| c From 2010 | | | | |
| d From 2011 6, 506. | | | | |
| e From 2012 37, 990. | | | | |
| f Total of lines 3a through e | 44,496. | | | 1 |
| 4 Qualifying distributions for 2013 from Part | | | | · - |
| XII, line 4 ► \$ 142,000. | | | | , |
| a Applied to 2012, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior years | | | | Ì |
| (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | · | | |
| (Election required — see instructions) | 0. | | · · · · · · · · · · · · · · · · · · · | |
| d Applied to 2013 distributable amount | | | | 89,918. |
| e Remaining amount distributed out of corpus | 52,082. | | | |
| 5 Excess distributions carryover applied to 2013 | 0. | | | 0. |
| (If an amount appears in column (d), the same amount must be shown in column (a)) | | | | , |
| (-,,, | | | | |
| 6 Enter the net total of each column as | | | | ļ |
| indicated below: | | | | I |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 96,578. | | | |
| b Prior years' undistributed income. Subtract | | _ | | |
| line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency | | | | |
| has been issued, or on which the section | | | | |
| 4942(a) tax has been previously assessed | | 0. | | |
| d Subtract line 6c from line 6b Taxable | | _ | | |
| amount — see instructions | | 0. | · | |
| e Undistributed income for 2012 Subtract line 4a from | | | • | |
| line 2a Taxable amount — see instructions | | | 0. | |
| f Undistributed income for 2013 Subtract lines | | | | |
| 4d and 5 from line 1. This amount must be | | | | 0 |
| distributed in 2014 | | | | 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 2008 not applied on line 5 or line 7 (see instructions) | 0. | | | ! |
| applied of life 5 of life 7 (see instructions) | 0. | | | |
| 9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a | 06 570 | | | ' |
| 10 Analysis of line 9 | 96,578. | | | |
| a Excess from 2009 | | | | |
| b Excess from 2010 | | | | ! |
| c Excess from 2011 6,506. | | | | |
| d Excess from 2012 6,306. | | | | |
| | | | 1 | |
| e Excess from 2013 52,082. | | | | Earm 900 DE (2012) |

| m 990-PF (2013) RONEY FAMILY FOUR rt XIV Private Operating Foundat | | ustions and Dar | t VIII A guestion | 26-2884937 | |
|--|-------------------------------------|---|--|---|--------------------------|
| a If the foundation has received a ruling or dete | • | _ | | • | N/A |
| is effective for 2013, enter the date of the | ruling | | | ►[| |
| b Check box to indicate whether the foundat | | erating foundation of | | 4942(j)(3) or | 4942(j)(5) |
| a Enter the lesser of the adjusted net income from Part I or the minimum | Tax year | ļ | Prior 3 years | | |
| investment return from Part X for each year listed | (a) 2013 | (b) 2012 | (c) 2011 | (d) 2010 | (e) Total |
| b 85% of line 2a. | | | | | |
| c Qualifying distributions from Part XII, line 4 for each year listed | | | | | |
| d Amounts included in line 2c not used directly for active conduct of exempt activities | | | | _ | |
| e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c | | | | | |
| Complete 3a, b, or c for the alternative test relied upon: | | | | | |
| a 'Assets' alternative test — enter | | | | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | ļ <u></u> | <u> </u> | | |
| b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c 'Support' alternative test - enter | | | | | |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from an exempt organization | | | | | |
| (4) Gross investment income | | | | | |
| Supplementary Information assets at any time during the | e year – see ii | s part only if the nstructions.) | e foundation had | \$5,000 or more | ın |
| Information Regarding Foundation Managa List any managers of the foundation who have close of any tax year (but only if they have | e contributed more | than 2% of the total of than \$5,000) (See | contributions received (e section 507(d)(2)) | by the foundation befo | ore the |
| NONE | | | | | |
| b List any managers of the foundation who own a partnership or other entity) of which the NONE | 10% or more of the foundation has a | e stock of a corporati 10% or greater inte | on (or an equally large rest | portion of the owner | ship of |
| Information Regarding Contribution, Gran Check here X if the foundation only marequests for funds. If the foundation make complete items 2a, b, c, and d | ikes contributions to | preselected charitat | ole organizations and o | does not accept unsol nizations under othe | icited er conditions, |
| a The name, address, and telephone number o | r e-mail of the person | on to whom application | ons should be address | ed ed | |
| · | | | | | |
| | | | | | |
| | | | | | |
| b The form in which applications should be | submitted and info | ormation and materi | iais they should inclu | ae | |
| c Any submission deadlines | | . | | | |
| | | | | | |
| d Any restrictions or limitations on awards, | | | | | |

| 3 | Grants and Contributions Paid During the Ye | ar or Approved for Fut | ure Paymen | t | |
|---|---|--|---------------------------------------|----------------------------------|----------|
| | Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| | Name and address (home or business) | substantial contributor | recipient | oonanguren. | |
| | Name and address (home or business) Paid during the year STATEMENT 10 | substantial contributor | recipient | CONTRIBUTION | |
| | | | | | |
| | Total | | · · · · · · · · · · · · · · · · · · · | ► 3a | 142,000. |
| | Approved for future payment | | | | |
| | Total | | | ► 3b | <u> </u> |

Part XVI-A Analysis of Income-Producing Activities

| Enter gross | s amounts unless otherwise indicated | Unrelated | I business income | Excluded by s | ection 512, 513, or 514 | (0) |
|--------------|--|--|---------------------------------------|-----------------------|-------------------------|--|
| | • | (a) Business code | (b) Amount | (c) Exclu- sion | (d) Amount | (e) Related or exempt function income (See instructions) |
| a Progr | ram service revenue | | | code | | |
| "— | | | · · · · | | | . 18 |
| c | - National Control of the Control of | | | -11 | | <u> </u> |
| d | 10 M 20 M 10 M | | | | | |
| e | | | | | | |
| f | | | | | | |
| g Fees | and contracts from government agencies | | | | | |
| | bership dues and assessments | | | | | |
| | st on savings and temporary cash investments | | | 14 | 17. | |
| | ends and interest from securities | | | 14 | 13,147. | |
| | ental income or (loss) from real estate: | | | | | · · · · · · · · · · · · · · · · · · · |
| | financed property | | | | | |
| | lebt-financed property | | ·· ·· | | | |
| | ntal income or (loss) from personal property r investment income | | | 1 | | |
| | r (loss) from sales of assets other than inventory | | | + + | | |
| | ncome or (loss) from special events. | | | + | | · |
| | s profit or (loss) from sales of inventory | | | 1 | | |
| | r revenue | | | <u> </u> | • | |
| | -FITZGERALD FAMILY LP | | · · · · | 16 | 304,101. | |
| b | 111101111111111111111111111111111111111 | | | | | |
| c | | | | | | |
| ď | | | | | | |
| е | | | | | | |
| 12 Subto | otal Add columns (b), (d), and (e) | | ". | | 317,265. | |
| | l. Add line 12, columns (b), (d), and (e) | | | | 13 | 317,265. |
| (See works | sheet in line 13 instructions to verify calculation | ons) | | | | |
| Part XVI | -B Relationship of Activities to the | Accompli | shment of Exem | pt Purpose | s | |
| Line No. | Explain below how each activity for which is accomplishment of the foundation's exempt | ncome is repo | rted in column (e) of | Part XVI-A co | ontributed importantly | y to the |
| | accomplishment of the foundation's exempt | purposes (ou | | Turius for suc | Tripurposes) (See II | istructions) |
| N/A | | | | | | |
| | | | | - | | |
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Form 990-PF (2013) RONEY FAMILY FOUNDATION 26-2884937 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

| | d the organization directly | or indirectly e | engage in any of the f | ollowina wit | h anv othe | er organizatio | n | | Yes | No |
|-------------------------|---|--|--|--|---|--|---|--------------------|-----------------|--------------------|
| de | escribed in section 501(c) lating to political organiza | of the Code (o | ther than section 501 | (c)(3) organ | izations) o | or in section 5 | 527, | | | 1 |
| | ansfers from the reporting | | a noncharitable exer | mpt organiza | ation of | | | 1 | | l j |
| |) Cash | | | | | | | 1 a (1) | | $\vec{\mathbf{x}}$ |
| (2 |) Other assets | | | | | | | 1 a (2) | | X |
| | ther transactions | | | | | | | | | 1 |
| • |) Sales of assets to a nor | | | | | | | 1 b (1) | | X |
| • | Purchases of assets from | | . • | tion | | | | 1 b (2) | | X |
| • | Rental of facilities, equipment Reimbursement arrange | • | er assets | | | | | 1 b (3) 1 b (4) | | X |
| • |) Loans or loan guarantee | | | | | | | 1 b (4) | | X |
| • | Performance of services | | nip or fundraising solic | citations | | | | 1 b (6) | | X |
| • | haring of facilities, equipm | | · - | | ees | | | 1 c | | X |
| | | | | | | | | | _ | |
| d If th ar | the answer to any of the a e goods, other assets, or se ny transaction or sharing a | above is 'Yes,' rvices given by irrangement, s | the reporting foundation to column (d) the | ng schedule in If the four e value of th | Column (l adation rece ae goods, c | b) should alw eived less than other assets, | rays show the fair n i fair market value in or services receive | narket val d | ue of | |
| (a) Line | no. (b) Amount involved | (c) Name | of noncharitable exempt org | ganization | (d) De | escription of tran | sfers, transactions, and | sharing arrai | ngemen | ts |
| N/A | | | | | | • | | | | |
| | | | ··· - | | | | | | | |
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| | | | | | | | <u> </u> | | | |
| 2 2 15 | the foundation directly or in | directly affiliated | d with or related to or | o or more to | v exempt o | raanizations | | | | |
| Z a is | escribed in section 501(c) | of the Code (o | ther than section 501 | (c)(3)) or in | section 52 | 27? | | Yes | X | No |
| b If | 'Yes,' complete the follow | ing schedule. | | | | | | | | |
| | (a) Name of organizat | ion | (b) Type of c | organization | | (c) | Description of rela | ationship | | |
| N/A | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | Under penalties of perjury, I decla correct, and complete Declaration | re that I have exam | ined this return, including ac | companying sc | hedules and st | tatements, and to | the best of my knowledge | and belief, i | t is true, | |
| Ciam. | correct, and complete Declaration | of preparer (other | than taxpayer) is based on a | all information o | if which prepar | rer has any knowl | edge | May the | | |
| Sign Here | V/2 =1 | \bigcirc | K | 1. h.l | IS DO | ec cecy | | this retur | n with th | ne I |
| nere | Signature of officer of trustee | 7000 | Date | 11 / 7/ | Title | ES SECY | | (see pst | uctions) Yes | ? No |
| | Print/Type preparer's na | me | Preparer's signaly | afe / | 7/10 | Date | Check if | PTIN | 162 | 140 |
| Paid | FRANKLIN C. | FORSBERG | John alm | -opin | Ger. | 10-29-14 | | P01247 | 7045 | |
| Prepa | <u> </u> | | SBERG & OLSON, | PLC | \ | | | 130568 | | |
| Use O | - | | | JITE 220 | <u> </u> | | | | | |
| | <u>F</u> | HOENIX, A | AZ 85012 | | | | Phone no (602 | <u> 277-</u> | <u>5447</u> | |
| BAA | | | | | | | ···· | Form 990 | -PF (2 | 013) |

| 2013 | FEDERAL STATEMENTS | PAGE 1 |
|---|--|---------------------------------------|
| CLIENT LO7717 | RONEY FAMILY FOUNDATION | 26-288493 |
| 10/27/14 | | 12 18PM |
| STATEMENT 1 FORM 990-PF, PART I, LINE 11 OTHER INCOME | | |
| | (A) (B) NET REVENUE INVESTMENT PER BOOKS INCOME | (C) ADJUSTED NET INCOME |
| INC-FITZGERALD FAMILY LP | TOTAL \$ 304,101. \$ 304,101. \$ 304,101. | \$ 304,101. \$ 304,101. |
| STATEMENT 2 FORM 990-PF, PART I, LINE 16A LEGAL FEES | | |
| SNELL WILMER LLP | (A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME \$ 41,600. \$ 41,600. \$ 41,600 TOTAL \$ 41,600. \$ 41,600. \$ 41,600 | · |
| STATEMENT 3 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES | | |
| QUICKBOOKS TULL FORSBERG & OLSON | (A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED NET INCOME \$ 255. \$ 255. \$ 255 8,000. 8,000. 8,000. TOTAL \$ 8,255. \$ 8,255. \$ 8,255 | — — — — — — — — — — — — — — — — — — — |
| STATEMENT 4 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES | | |
| WEB DESIGN | (A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME TOTAL \$ 380. \$ 380. \$ 380. \$ 380. \$ 380. \$ 380. | |
| | | |

| 2013 | FEDERAL STATEMENTS | PAGE 2 |
|--|--|--|
| CLIENT LO7717 | RONEY FAMILY FOUNDATION | 26-2884937 |
| STATEMENT 5 FORM 990-PF, PART I, LINE 18 TAXES | | 12.18PM |
| 2013 EST TAX PAYMENT EXCISE FEDERAL TAX REFUND | \$ 2,129. -60. | (D) CHARITABLE PURPOSES 0. \$ 0. |
| STATEMENT 6 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES | | |
| ACC FILING FEES OFFICE EXPENSE | (A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME \$ 10. \$ 10. \$ 10. 340. 340. 340. 340. TOTAL \$ 350. \$ 350. \$ 350. | E <u>PURPOSES</u>).). |
| STATEMENT 7 FORM 990-PF, PART II, LINE 13 INVESTMENTS - OTHER | | |
| OTHER INVESTMENTS INVESTMENT IN FITZGERALD FA | VALUATION BOOK VALUE MM LP TOTAL OTHER INVESTMENTS \$ 1,285,794. | FAIR MARKET VALUE \$ 1,285,794. \$ 1,285,794. |
| OTHER PUBLICLY TRADED SECUE INVESTMENT ACCOUNT TOTAL OTH | MKT VAL 335,140. HER PUBLICLY TRADED SECURITIES \$ 335,140. TOTAL \$ 1,620,934. | 335,140. \$ 335,140. \$ 1,620,934. |
| STATEMENT 8 FORM 990-PF, PART III, LINE 3 OTHER INCREASES NET UNREALIZED GAINS OR LOS | SSES ON INVESTMENTS TOTAL | \$ 5,584. \$ 5,584. |

. . .

| 2013 | FEDERAL STA | TEMENT | S | PAGE 3 |
|--|----------------------|-----------------|----------------------------|---------------------------|
| CLIENT LO7717 | RONEY FAMILY FO | DUNDATION | | 26-288493 |
| 0/27/14 STATEMENT 9 FORM 990-PF, PART VI, LINE 9 TAX DUE | | | | 12 18PM |
| TAX DUE LATE PAYMENT PENALTY LATE INTEREST | | | \$ TOTAL <u>\$</u> | 347. 10. 5. 362. |
| STATEMENT 10 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEA | DONEE | FOUND- ATION | PURPOSE OF | |
| NAME AND ADDRESS ST MARY'S FOOD BANK 2831 N 31ST AVENUE PHOENIX, AZ 85009 | RELATIONSHIP NONE | STATUS | GENERAL PROGRAM SUPPORT | * 1,000 |
| HUMANE SOCIETY OF SOUTHERN ARIZONA 3450 N KELVIN BLVD TUCSON, AZ 85716 | NONE | | GENERAL PROGRAM SUPPORT | 5,500 |
| OPERATION SMILE 6435 TIDEWATER DRIVE NORFOLK, VA 23509 | NONE | | GENERAL PROGRAM SUPPORT | 2,000 |
| BROPHY COLLEGE PREP 4701 N CENTRAL AVENUE PHOENIX, AZ 85012 | NONE | | GENERAL PROGRAM SUPPORT | 34,500 |
| HILLSDALE COLLEGE 33 E COLLEGE STREET HILLSDALE, MI 49242 | NONE | | GENERAL PROGRAM SUPPORT | 1,000 |
| INTREPID FALLEN HEROS FUND ONE INTREPID SQUARE NEW YORK, NY 10036 | NONE | | GENERAL PROGRAM SUPPORT | 8,000 |
| MIDWEST SHELTER FOR HOMELESS VETERANS 119 N WEST STREET WHEATON, IL 60187 | NONE | | GENERAL PROGRAM SUPPORT | 1,000 |
| PHOENIX CHILDREN'S HOSPITAL 1919 E THOMAS ROAD PHOENIX, AZ 85016 | NONE | | GENERAL PROGRAM SUPPORT | 10,000 |
| SERVANTS OF THE BLESSED SACRAMENT 101 SILVER STREET WATERVILLE, ME 04901 | NONE | | GENERAL PROGRAM SUPPORT | 1,000 |

4 . . .

| 2013 | FEDERAL STA | TEMENT | S | | PAGE 4 | |
|--|-----------------------|---------------------------|----------------------------|----|---------|--|
| CLIENT LO7717 | RONEY FAMILY FO | RONEY FAMILY FOUNDATION | | | | |
| 10/27/14 STATEMENT 10 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEA | AR | | | | 12 18PM | |
| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | | AMOUNT | |
| SHEMER ART CENTER AND MUSEUM ASSOC 5005 E CAMELBACK ROAD PHOENIX, AZ 85018 | NONE | | GENERAL PROGRAM SUPPORT | \$ | 1,000. | |
| SISTERS OF CHARITY OF CINCINNATTI 5900 DELHI ROAD MOUNT ST JOSEPH, OH 45051 | NONE | | GENERAL PROGRAM SUPPORT | | 3,000. | |
| SOCIETY OF ST VINCENT DE PAUL 210 NORTH AVE 21 LOS ANGELES, CA 90031 | NONE | | GENERAL PROGRAM SUPPORT | | 1,000. | |
| ST JOSEPH'S MONASTERY PARISH 251 S MORLEY STREET BALTIMORE, MD 21229 | NONE | | GENERAL PROGRAM SUPPORT | | 500. | |
| T GEN FOUNDATION 400 E VAN BUREN ST STE 850 PHOENIX, AZ 85004 | NONE | | GENERAL PROGRAM SUPPORT | | 15,000. | |
| THE WATER PROJECT PO BOX 39487 CHARLOTTE, NC 28278 | NONE | | GENERAL PROGRAM SUPPORT | | 1,000. | |
| WOUNDED WARRIOR PROJECT 4899 BELFORT RD STE 300 JACKSONVILLE, FL 32256 | NONE | | GENERAL PROGRAM SUPPORT | | 6,000. | |
| AIDS ORPHANS & STREET URCHINS, INC 865 E HALL ROAD MERRITT ISLAND, FL 32953 | NONE | | GENERAL PROGRAM SUPPORT | | 1,000. | |
| ANY RAT RESCUE PO BOX 833 SCOTTSDALE, AZ 85252 | NONE | | GENERAL PROGRAM SUPPORT | | 1,500. | |
| DEAD DOG WALKING PIT BULL RESCUE | NONE | | GENERAL PROGRAM SUPPORT | | 2,000. | |
| THE DALLES, OR 97058 | | | | | | |
| HOSPICE OF THE VALLEY 1510 E FLOWER STREET PHOENIX, AZ 85014 | NONE | | GENERAL PROGRAM SUPPORT | | 2,500. | |

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10/27/14

FEDERAL STATEMENTS

PAGE 5

CLIENT LO7717

RONEY FAMILY FOUNDATION

26-2884937

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STATEMENT 10 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|---|-----------------------|---------------------------|----------------------------|---------------|
| LOYOLA ACADEMY 4701 N CENTRAL AVE PHOENIX, AZ 85012 | NONE | | GENERAL PROGRAM SUPPORT | \$ 10,000. |
| RYAN HOUSE 110 WEST MERRELL STREET, FIRST FLR PHOENIX, AZ 85013 | NONE | | GENERAL PROGRAM SUPPORT | 5,000. |
| U OF A CAMP WILDCAT 1303 E UNIVERSITY BLVD TUCSON, AZ 85719 | NONE | | GENERAL PROGRAM SUPPORT | 2,000. |
| U.S. VETS-PHOENIX-US VETERANS INITIATIVE 804 EAST JONES AVENUE PHOENIX, AZ 85040 | NONE | | GENERAL PROGRAM SUPPORT | 1,000. |
| INTERNATIONAL RESCUE COMMITTEE 122 EAST 42ND STREET NEW YORK, NY 10168 | NONE | | GENERAL PROGRAM SUPPORT | 1,000. |
| LOVEBUGS RESCUE P.O. BOX 953 CORONA DEL MAR, CA 92625 | NONE | | GENERAL PROGRAM SUPPORT | 1,000. |
| NATIONAL MILL DOG RESCUE P.O. BOX 88468 COLORADO SPRINGS, CO 80908 | NONE | | GENERAL PROGRAM SUPPORT | 2,000. |
| NOT FOR SALE P.O. BOX 1000 HALF MOON BAY, CA 94019 | NONE | | GENERAL PROGRAM SUPPORT | 1,000. |
| OAKTON HIGH SCHOOL BEST BUDDIES 2900 SUTTON RD VIENNA, VA 22181 | NONE | | GENERAL PROGRAM SUPPORT | 1,000. |
| ROLLING DOG FARM P.O. BOX 150 LANCASTER, NH 03584 | NONE | | GENERAL PROGRAM SUPPORT | 5,000. |
| ST JUDE'S CHILDREN'S HOSPITAL 262 DANNY THOMAS PL MEMPHIS, TN 38105 | NONE | | GENERAL PROGRAM SUPPORT | 1,000. |

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FEDERAL STATEMENTS

PAGE 6

CLIENT LO7717

RONEY FAMILY FOUNDATION

26-2884937

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STATEMENT 10 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | | OSE OF | AMOUNT |
|---|-----------------------|---------------------------|--------------------|---------|----------------|
| ARIZONA COALITION AGAINST DMSTC VIOLENCE 2800 N. CENTRAL AVE. STE. 1570 PHOENIX, AZ 85004 | NONE | | GENERAL SUPPORT | PROGRAM | \$ 1,000. |
| BRAILLE WITHOUT BORDERS 619 OCEAN CLUB COURT AMELIA ISLAND, FL 32034 | NONE | | GENERAL SUPPORT | PROGRAM | 1,500. |
| BUILDING HOMES FOR HEROS 65 ROOSEVELT AVE STE 105 VALLEY STREAM, NY 11581 | NONE | | GENERAL SUPPORT | PROGRAM | 5,000. |
| GRIZZLY AND WOLF SANCTUARY 201 S CANYON ST WEST YELLOWSTONE, MT 59758 | NONE | | GENERAL SUPPORT | PROGRAM | 1,000. |
| RCMS BEST BUDDIES 131 EAST BROAD STREET STE 205 FALLS CHURCH, VA 22046 | NONE | | GENERAL SUPPORT | PROGRAM | 1,000. |
| REACH OUT WORLDWIDE 700 S. FLOWER ST. #201 BURBANK, CA 91502 | NONE | | GENERAL SUPPORT | PROGRAM | 2,000. |
| ST. BERNADETTE'S PARISH 16245 N. 60TH ST SCOTTSDALE, AZ 85254 | NONE | | GENERAL SUPPORT | PROGRAM | 500. |
| UNDERDOG ARIZONA P.O. BOX 13392 CHANDLER, AZ 85248 | NONE | | GENERAL SUPPORT | PROGRAM | 1,500. |
| | | | | TOTAL | \$ 142,000. |

(Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

►Information about Form 8868 and its instructions is at www.irs.gov/form8868.

| | e filing for an Automatic 3-Month Extension, con | | | | > X |
|---|--|---|--|---|------------------|
| | e filing for an Additional (Not Automatic) 3-Mont | | | | |
| | plete Part II unless you have already been grante | | | | |
| request an ex Associated V | ing (e-file). You can electronically file Form 8868 equired to file Form 990-T), or an additional (not tension of time to file any of the forms listed in Part With Certain Personal Benefit Contracts, which ming of this form, visit www irs gov/efile and click of the second se | : automatic) I or Part II w ust be sent | 3-month extension of time You can ele ith the exception of Form 8870, Information to the IRS in paper format (see instruction) | ctronically file Forn Return for Transfers | n 8868 to |
| | Automatic 3-Month Extension of Time | | | | |
| - | required to file Form 990-T and requesting an | | | | √ ► □ |
| All other corp income tax r | oorations (including 1120-C filers), partnerships, eturns | REMICs, ar | • | | |
| | Name of average organization or other files, see water of organizations | _ | Enter filer's identif | fying number, see i | |
| Type or print | Name of exempt organization or other filer, see instructions | | | Employer identification i | number (EIN) of |
| • | RONEY FAMILY FOUNDATION Number, street, and room or suite number If a PO box, see it | etructions | | 26-2884937 Social security number (| reski) |
| File by the due date for | | istructions | | Social security number (| (3314) |
| filing your return See | 5045 N 22ND STREET City, town or post office, state, and ZIP code For a foreign add | ress, see instru | ctions | L | |
| instructions | PHOENIX, AZ 85016 | | | | |
| Enter the Re | turn code for the return that this application is fo | or (file a sep | parate application for each return) | | 04 |
| Application Is For | | Return Code | Application Is For | | Return Code |
| Form 990 or F | orm 990-EZ | 01 | Form 990-T (corporation) | | 07 |
| Form 990-BL | • | 02 | Form 1041-A | | 08 |
| Form 4720 (ır | | 03 | Form 4720 (other than individual) | | 09 |
| Form 990-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 |
| Telephon If the org If this is check the exter I reque until The exter Z If the t | e No • 602-997-1701 ganization does not have an office or place of but for a Group Return, enter the organization's four is box If it is for part of the group, on the stan automatic 3-month (6 months for a corporation 8/15, 20 14, to file the exempt orgonal tension is for the organization's return for calendar year 20 13 or tax year beginning, 20, 20, 20, 20, 20, 20, 20, 20 | digit Group check this b required to anization re , and endir ths, check r | e United States, check this box Exemption Number (GEN) ox I and attach a list with the na file Form 990-T) extension of time turn for the organization named above. ng , 20 eason: Initial return Fire | nal return | J |
| nonref b If this | application is for Forms 990-BL, 990-FF, 990-1, a undable credits. See instructions application is for Forms 990-PF, 990-T, 4720, or yments made. Include any prior year overpayme | 6069, enter | any refundable credits and estimated | 3a \$ | 2,320. 2,320. |
| c Balanc | ce due. Subtract line 3b from line 3a Include your (Electronic Federal Tax Payment System) See | ır payment | with this form, if required, by using | 3c\$ | 2,320. |

| Form 8868 (Rev 1-2014) | | | | | Page 2 |
|---|---|---|---------------|------------------------|---------------------------|
| If you are filing for an Additional (Not Automatic) | | | | | ► X |
| Note. Only complete Part II if you have already been | | | sly filed Fo | rm 8868 | |
| If you are filing for an Automatic 3-Month Extensi | | | | | |
| Part II Additional (Not Automatic) 3-Mo | onth Extension | of Time. Only file the original | l (no cop | ies needed). | |
| | | Enter filer's ic | lentifying n | umber, see instr | ructions |
| Name of exempt organization or other filer, see instruct | lions | | Employer ide | ntification number (E | IN) or |
| Type or | | | | | |
| print RONEY FAMILY FOUNDATION | | <u> </u> | 26-288 | 1937 v number (SSN) | |
| Number, street, and room or suite number. If a P O. bo | x, see instructions | | Social Securi | y number (SSN) | |
| extended due date for TULL, FORSBERG & OLSON, PI | | | | | |
| filing your return see See See See See See See See See See | 220 | ons | | | |
| ilisa actions | igh dadicas, see manaca | | | | |
| PHOENIX, AZ 85012 | | | | | |
| Enter the Return code for the return that this applicat | ion is for (file a sei | parate application for each return) | | | 04 |
| Zino, and violant sead for the retain, that this approach | | | · | | <u>U 4</u> _1 |
| Application | Return | Application | | | Return |
| Is For | Code | ls For | | j | Code |
| Form 990 or Form 990-EZ | 01 | of the said of the said of the | | 1.4.最高级。 | artist il |
| Form 990-BL | 02 | Form 1041-A | | | 08 |
| Form 4720 (individual) | 03 | Form 4720 (other than individual) | | | 09 |
| Form 990-PF | 04 | Form 5227 | | | 10 |
| Form 990-T (section 401(a) or 408(a) trust) | 05 | Form 6069 | | | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | | | |
| The books are in care of ► <u>DICK RONEY</u> Telephone No. ► <u>602-997-1701</u> If the organization does not have an office or place. If this is for a Group Return, enter the organization whole group, check this box ► . If it is for part of members the extension is for. | e of business in th n's four digit Group | e United States, check this box | | | . ► ☐ s for the all |
| | | <u> </u> | | | |
| 4 I request an additional 3-month extension of time | ne until <u>11/15</u> | , 20_14. | | | |
| 5 For calendar year 2013 , or other tax year b | eginning _ | , 20, and ending | | ^{, 20} | - |
| 6 If the tax year entered in line 5 is for less than | 12 months, check re | eason: Initial return | Final re | eturn | |
| Change in accounting period | | | | - m-14-0 mo | |
| 7 State in detail why you need the extension | | SPECTFULLY REQUESTS ADD | | | |
| GATHER INFORMATION NECESSARY | TO LITE W CO | MPLEIE AND ACCORATE TAX | ZEINV | <u>.</u> | |
| 8a If this application is for Forms 990-BL, 990-PF, | 990-T 4720 or 606 | 9 enter the tentative tay less any | | | |
| nonrefundable credits. See instructions | | | 8a | \$ | 0. |
| b If this application is for Forms 990-PF, 990-T, 47 | 720, or 6069, enter | any refundable credits and estimate | ed 🧏 | | |
| tax payments made. Include any prior year over previously with Form 8868. | | s a credit and any amount paid | 8 b | \$ | 2,320. |
| | | | | | |
| c Balance due. Subtract line 8b from line 8a. Inclu EFTPS (Electronic Federal Tax Payment System | n). See instructions | | 8 c | \$ | 0. |
| Signature and V | erification mus | t be completed for Part II on | ly. | | |
| Under penalties of perjury, I declare that I have examined this form, incl correct, and complete, and that I am authorized to prepare this form | uding accompanying sche | dules and statements, and to the best of my kno | owledge and b | elief, it is true, | |
| | _ | | | | 1 |
| | Title ► CPA | | | ate ► 8-14 | |
| BAA (| FIFZ0502L | 12/31/13 | | Form 8868 (Re | ev 1-2014) |