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### Form 990-PF

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

2013

OMB No 1545 0052

► Do not enter Social Security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. 2013, and ending For calendar year 2013, or tax year beginning Employer identification number SMITH FAMILY FOUNDATION 27-4396874 9601 VERLAINE COURT Telephone number (see the instructions) LAS VEGAS, NV 89145 If exemption application is pending, check here C G Check all that apply. Initial return of a former public charity Initial return Final return Amended return D 1 Foreign organizations, check here Address change Name change 2 Foreign organizations meeting the 85% test, check here and attach computation Check type of organization. X Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Accounting method X Cash Fair market value of all assets at end of year (from Part II, column (c), line 16) if the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here (Part I, column (d) must be on cash basis.) 123,572 Part | Analysis of Revenue and (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net Expenses (The total of amounts in for charitable expenses per books income income columns (b), (c), and (d) may not necespurposes (cash sarily equal the amounts in column (a) basis only) (see instructions)) Contributions, gifts, grants, etc, received (att sch) 166,500 If the foundn is not req to att Sch B Interest on savings and temporary cash investments 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 **b** Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10 a Gross sales less allowances b Less Cost of goods sold c Gross profit/(loss) (att sch) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 166,500 0 0 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages Pension plans, employee benefits 16 a Legal fees (attach schedule) **b** Accounting fees (attach sch) 15,000 c Other prof fees (attach sch) SEE ST 1 15,000. OPERAT 17 Interest SEE STM 2 850 850 18 Taxes (attach schedule)(see instrs) Depreciation (attach sch) and depletion 19 V Occupancy Travel, conferences, and meetings Printing and publications EXPENSES Other expenses (attach schedule) 23 Total operating and administrative <u>15,85</u>0 15,850. expenses. Add lines 13 through 23 Contributions, gifts, grants paid PART XV 175,955 175,955 Total expenses and disbursements. Add lines 24 and 25 0 0 191,805. 191,805 Subtract line 26 from line 12: a Excess of revenue over expenses -25,305and disbursements

C Adjusted net income (if negative, enter 0) BAA For Paperwork Reduction Act Notice, see instructions.

b Net investment income (if negative, enter 0)

TEEA0504L 10/18/13

0.

0

Form 990-PF (2013)

2 -25,3052 Enter amount from Part I, line 27a 3 3 Other increases not included in line 2 (itemize) 4 128,941. 4 Add lines 1, 2, and 3 5 5,369. Decreases not included in line 2 (itemize) SEE STATEMENT 3 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 123,572. 6

BAA

2-story brick warehouse or common stock 200 shares Mi C Company)			(b) How acquired P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, yea
la N/A				<del>                                     </del>	<del> </del>
b		<del></del>	<del></del>		<del> </del>
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal	e e	(h) Gain or (e) plus (f) m	
a					
b					
С					
d					
е					
· · · · · · · · · · · · · · · · · · ·	ving gain in column (h) and owned by t			(I) Gains (Cole	
(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 a		gain minus column (k jan -0-) <b>or</b> Losses (fr	
a					
ь					
c					
d		<u> </u>			
е					
<ul><li>Capital gain net income or (n</li><li>Net short-term capital gain or</li></ul>		enter in Part I, line 7 ter -0- in Part I, line 7	2		<del></del>
· -	, ,	<del></del> 1			
If gain, also enter in Part I, lir in Part I, lir	ne 8, column (c) (see instructions). If (l	oss), enter -0-	- <sub>3</sub>		
	er Section 4940(e) for Reduce	d Tay on Not Investm		<u> </u>	<del></del>
····	te foundations subject to the section 49	<del></del>		N/A	
'Yes,' the foundation does not qu	ction 4942 tax on the distributable amo alify under section 4940(e) Do not com in each column for each year, see the	plete this part.		Yes	No
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as:	sets (col	<b>(d)</b> Distribution umn (b) divided	
2012					
2011					
2010					
2009					
2008					
				T	
2 Total of line 1, column (d)			2		
3 Average distribution ratio for number of years the foundation	the 5-year base period — divide the tota on has been in existence if less than 5	al on line 2 by 5, or by the years	3		
4 Enter the net value of noncha	aritable-use assets for 2013 from Part X	(, line 5	4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)		6	1	
7 Add lines 5 and 6			7		
8 Enter qualifying distributions	from Part XII, line 4		8	1	
If line 8 is equal to or greater	than line 7, check the box in Part VI, I	ine 1h and complete that o	art using a 1% f	av rate See the	

Form 990-PF (2013) SMITH FAMILY FOUNDATION	10 mg (S + 1; + 40 40(+) 40		7-4396874		Pa	age 4
Part VI Excise Tax Based on Investment Inc		N/A' on line 1	see instruction	5)		
1 a Exempt operating foundations described in section 4940(d)(2), check h Date of ruling or determination letter (attack	copy of letter if necessar		i i			
<b>b</b> Domestic foundations that meet the section 4940(e) rec		y – see ilistrs)	1			Ω
check here. And enter 1% of Part I, line 27b	qualements in rait v,		<del></del>			0.
c All other domestic foundations enter 2% of line 27b Exempt foreign o	rganizations enter 4% of Part I, Ii	ine 12, column (b)	<del></del>			*****
2 Tax under section 511 (domestic section 4947(a)(1) trus	sts and taxable					
foundations only. Others enter -0-)	sis and taxable		2			0.
3 Add lines 1 and 2			3			0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) tru	ists and taxable foundation	ns only Others enter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from	line 3 If zero or less, ente	r -0-	5			0.
6 Credits/Payments.		1 1	<u> </u>			
a 2013 estimated tax pmts and 2012 overpayment credited to 2013		6a				
<b>b</b> Exempt foreign organizations — tax withheld at source		6b				
c Tax paid with application for extension of time to file (F	orm 8868)	6c				
d Backup withholding erroneously withheld		6 d	<b></b> ∤			_
7 Total credits and payments Add lines 6a through 6d			7			<u>0.</u>
8 Enter any penalty for underpayment of estimated tax		220 is attached	8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amour			9			0.
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the	he amount overpaid	1	10			
11 Enter the amount of line 10 to be Credited to 2014 estimated tax	<u> </u>	Refunded	11			
Part VII-A   Statements Regarding Activities				- F	<del></del>	
1 a During the tax year, did the foundation attempt to influe participate or intervene in any political campaign?	ence any national, state, o	r local legislation or did it		1 a	Yes	No X
<b>b</b> Did it spend more than \$100 during the year (either dir (see the instructions for definition)?	ectly or indirectly) for politi	cal purposes		1 b		Х
If the answer is 'Yes' to 1a or 1b, attach a detailed des or distributed by the foundation in connection with the		nd copies of any materials	published			
c Did the foundation file Form 1120-POL for this year?	activities.			1 c	1	Х
d Enter the amount (if any) of tax on political expenditure	es (section 4955) imposed	during the year.				
(1) On the foundation •\$0	. (2) On foundation mar	nagers •\$	0	. 1	- 1	
e Enter the reimbursement (if any) paid by the foundation foundation managers		cal expenditure tax imposi	ed on		1	į
foundation managers		ted to the IRS?		2	- 1	Х
If 'Yes,' attach a detailed description of the activities.	not previously been report	ted to the into		-		
•			_			ĺ
3 Has the foundation made any changes, not previously of incorporation, or bylaws, or other similar instrument	reported to the IRS, in its is 2. If 'Yes,' attach a confor	governing instrument, arti	cles	3		Х
4a Did the foundation have unrelated business gross inco				4 a		. X
<b>b</b> If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this		g /		4 b	/ N	/A
5 Was there a liquidation, termination, dissolution, or substantial contr.	•			5		. X
If 'Yes,' attach the statement required by General Insti						
6 Are the requirements of section 508(e) (relating to sec		atisfied either				
By language in the governing instrument, or	,					ĺ
<ul> <li>By state legislation that effectively amends the gover with the state law remain in the governing instrumen</li> </ul>	rning instrument so that no	mandatory directions that	t conflict	6	Х	
7 Did the foundation have at least \$5,000 in assets at any time during t	he year? If 'Yes,' complete Part II,	column (c), and Part XV		7	X	
8 a Enter the states to which the foundation reports or with NV			<b>-</b>			
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of (or designate) of each state as required by General Instruction G <sup>2</sup> If 'N	Form 990-PF to the Attorney Gen	eral		8 b	⁄ X	
9 Is the foundation claiming status as a private operating	foundation within the mea	aning of section 4942(j)(3)	or 4942(j)(5)	9		v
for calendar year 2013 or the taxable year beginning in 10 Did any persons become substantial contributors durin				3		X
and addresses			<del></del>	10	0.55	(2013)
RAA				Form <b>99</b>	ひ-ピト (	ZU13)

	990-PF (2013) SMITH FAMILY FOUNDATION	27-439	96874	Pa	age <b>5</b>
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		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified persadvisory privileges? If 'Yes,' attach statement (see instructions)	on had	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption	n application	<sup>7</sup> 13	' X	_
	Website address ► N/A				-
14	The books are in care of ► THERESA HARTKE ANDERSON Telephone	e no ► 70	732-7	462	
	Located at ► 5113 ALPINE PLACE LAS VEGAS NV ZIP + 4 ►	89107			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here		<u> </u>		П
	and enter the amount of tax-exempt interest received or accrued during the year	<b>►</b>   15	1	,	N/A
	· · · · · · · · · · · · · · · · · · ·	L		Yes	No
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority bank, securities, or other financial account in a foreign country?		16	2 2 2	X
_	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the name of t foreign country ►	he			
Pai	rt VII-B   Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		188.8	Yes	No
1 a	a During the year did the foundation (either directly or indirectly)			7	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	No	水()	<i>^;</i>
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?		No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X	No 📑 📆		ž - '
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X	No 🥳		1 10 24
	(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		, , , , , , , , , , , , , , , , , , ,
				4	
	(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 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	
					ر. ئى
1	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	12	1 b	M	/A
	Organizations relying on a current notice regarding disaster assistance check here	´ <b>▶</b> □	1 1		11
		L_		3.0	4 5
4	c 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?	,	1c	<u> </u>	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))				
	a At the end of tax year 2013, did the foundation have any undistributed income (lines 6d		, liki		\$ 0
	and 6e, Part XIII) for tax year(s) beginning before 2013?	Yes	No		* · 🔅
	If 'Yes,' list the years ► 20 , 20 , 20 , 20	•			3,
	<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 494:	2(2)(2)		33	λ,
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942	(a)(2) to			٠ ٦٠
	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	11.00	835	3.7
	► 20 _ , 20 _ , 20 _ , 20 _				* * 3
2	<b></b>		1.3		
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	☐ Yes 🏻	No 🚴	25 1 % 1 Contracts	. 4
				2 2 3	2 % 3 × 3
	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 approving the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or	เ ed	1,2	1,000	*
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or		- 7/3		* 1
	(3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2013)		3 b	NT.	/A
		•	30	IN	' Δ
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its		1 4-		
	charitable purposes?		4 a	7 41 45	X
	<b>b</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		San San Amar	حشستها.	
	the tax year beginning in 2013?		4 b		<u> X</u>
BA			Form <b>99</b>	0-PF (	2013

Part VII-B   Statements Regarding Activiti		4720 May Be Requ	uired (co	ntınued)		
5 a During the year did the foundation pay or incu	•					
(1) Carry on propaganda, or otherwise attemp				Yes √X	No No	13/15/1
(2) Influence the outcome of any specific publion, directly or indirectly, any voter registra	tion drive?				No E.	
(3) Provide a grant to an individual for travel,	study, or other similar i	ourposes?		X Yes	No	TANK ES
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section				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 the described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to o a current notice regard	qualify under the except ling disaster assistance	tions		5	b , X
Organizations relying on a current notice rega	rding disaster assistand	e check here		▶ [		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure responsible 'Yes,' attach the statement required by Region 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 premiums	s ,	Yes · X	No 🖺	
<b>b</b> Did the foundation, during the year, pay premi	ums, directly or indirec	tly, on a personal bene	fit contrac	t <u>5</u>	6	b X
If 'Yes' to 6b, file Form 8870			otion?	□v 5		
7a At any time during the tax year, was the found b If 'Yes,' did the foundation receive any procee					No 🔼 N/A 7	b
Part VIII Information About Officers, D					147 11	-1 (
and Contractors	,		<b>,</b>	,,		,
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-)	emplo plans a	ributions to yee benefit and deferred bensation	other	nse account, allowances
EDWARD D. SMITH  9601 VERLAINE CT.  LAS VEGAS, NV 89145	TRUSTEE 2.00	0.		0.		0.
SHAUNA H. SMITH  9601 VERLAINE CT.  LAS VEGAS, NV 89145	TRUSTEE 2.00	0.		0.		0.
2 Compensation of five highest-paid employees (o						
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	emplo plans a	ributions to yee benefit and deferred pensation	othe:	ense account, r allowances
NONE				<del></del>		
						·
		1				
			<u> </u>			
			<del> </del>		+	
			1			
Takel number of all an analysis and a second		<u> </u>	<u> </u>		<u> </u>	
<b>Total</b> number of other employees paid over \$50,000	TEEA0306L 0	7/10/13			-	0 <b>90-PF</b> (2013)

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Total. Add lines 1 through 3 0. Form 990-PF (2013)

All other program-related investments. See instructions

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Form 990-PF (2013) SMITH FAMILY FOUNDATION 27-4396874 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

,		
Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes     Average monthly fair market value of securities	1 a	
b Average of monthly cash balances	1 b	00 350
C Fair market value of all other assets (see instructions)	1 c	80,350. 833.
·	1 d	
d Total (add lines 1a, b, and c)	10	81,183.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)  1 e 0	— 1	0
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	81,183.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	1,218.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	79,965.
6 Minimum investment return. Enter 5% of line 5.	6	3,998.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations	rating fo	undations
and certain foreign organizations check here ► and do not complete this part.)		
1 Minimum investment return from Part X, line 6	1	3,998.
2 a 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.)	7	
c Add lines 2a and 2b	2 c	
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	3,998.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	3,998.
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	3,998.
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 a	191,805.
<b>b</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 lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	191,805.
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	191,805.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether qualifies for the section 4940(e) reduction of tax in those years	the found	ation

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### Part XIII Undistributed Income (see instructions)

•	<b>(a)</b> Corpus	(b) Years prior to 2012	<b>(c)</b> 2012	<b>(d)</b> 2013
1 Distributable amount for 2013 from Part XI,				
2 Undistributed income, if any, as of the end of 2013				3,998.
a Enter amount for 2012 only			0.	
<b>b</b> Total for prior years 20 , 20 , 20	***************************************	0.		· · · · · · · · · · · · · · · · · · ·
3 Excess distributions carryover, if any, to 2013		3.	······································	
a From 2008				
<b>b</b> From 2009				
<b>c</b> From 2010				
<b>d</b> From 2011 186, 925.			I	
e From 2012 212, 411.				
f Total of lines 3a through e	399,336.			
4 Qualifying distributions for 2013 from Part				
XII, line 4. \$ 191,805.  a Applied to 2012, but not more than line 2a			0	
			0.	
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions)		0.		
· · · · · · · · · · · · · · · · · · ·		0.		
c Treated as distributions out of corpus (Election required — see instructions)	0.			
d Applied to 2013 distributable amount				3,998.
e Remaining amount distributed out of corpus	187,807.			
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				
indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	587,143.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0.		
		0.		
<ul> <li>Enter the amount of prior years' undistribut- ed income for which a notice of deficiency</li> </ul>				
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				
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.			
,	0.			
8 Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions)	0.			
9 Evenes distributions carryover to 2014	<del>_</del>		***************************************	
9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a	587,143.			
10 Analysis of line 9.				
a Excess from 2009				
<b>b</b> Excess from 2010	-			-
<b>c</b> Excess from 2011 186, 925.	1			
d Excess from 2012 212, 411.				
e Excess from 2013 187, 807.				Form 900 PF (2013)

Part XIV Private Operating Founda		ructions and Pa	art VII-A, questio	n 9)	N/A
1 a If the foundation has received a ruling or d is effective for 2013, enter the date of the i	etermination letter	that it is a private of	operating foundation,	and the ruling	
<b>b</b> Check box to indicate whether the foundation	~	rating foundation d	lescribed in section	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		12 12 0/(2)
income from Part I or the minimum investment return from Part X for	(a) 2013	<b>(b)</b> 2012	(c) 2011	(d) 2010	(e) Total
each year listed					
<b>b</b> 85% of line 2a		<del></del>			
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					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					
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)					
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)					
<ul><li>(3) Largest amount of support from an exempt organization</li></ul>					
(4) Gross investment income					
Part XV   Supplementary Information assets at any time during the	(Complete thi	s part only if th	he foundation ha	ad \$5,000 or moi	re in
1 Information Regarding Foundation Manag		nstructions.)			
a List any managers of the foundation who to close of any tax year (but only if they have SEE STATEMENT 4	nave contributed mi	ore than 2% of the than \$5,000) (See	total contributions re section 507(d)(2))	eceived by the founda	ation before the
OLL STATEMENT 4					
b List any managers of the foundation who can a partnership or other entity) of which the NONE	own 10% or more o foundation has a 1	f the stock of a cor 0% or greater inter	rporation (or an equa rest.	Illy large portion of th	e ownership of
2 Information Regarding Contribution, Gran Check here  if the foundation only requests for funds. If the foundation make complete items 2a, b, c, and d.	nakes contributions	to preselected cha	aritable organizations		
a The name, address, and telephone number	er or e-mail of the p	person to whom ap	plications should be	addressed.	
SEE STATEMENT 5	submitted and infor	motion and materi	ale they chould include		
<b>b</b> The form in which applications should be s	oubinitieu and infor	mation and materi	ara mey should includ	20	
SEE STATEMENT FOR LINE 2A					
c Any submission deadlines.					
SEE STATEMENT FOR LINE 2A			<del></del>		
d Any restrictions or limitations on awards, s	such as by geograp	phical areas, charita	able fields, kinds of i	nstitutions, or other f	actors.
SEE STATEMENT FOR LINE 2A					

Page 11 Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment lf recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation status of recipient Recipient Purpose of grant or contribution Amount Name and address (home or business) a Paid during the year SEE STATEMENT 6 ► 3a 175,955. Total **b** Approved for future payment

► 3b

Total

### Part XVI-A Analysis of Income-Producing Activities

Enter aross	amounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 514	
•	am service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions.)
<u>a</u>		<del>  -  </del>		code		
. —				<del></del>		
		<del>                                     </del>		<del></del>		
ď		<del>                                     </del>		<del> </del>		
e		<del> </del>		+	·	
f	<del></del>	+		<del>-   -  </del> -		
·	and contracts from government agencies	<del>   </del>				<del></del>
-	pership dues and assessments			<del></del>		
	t on savings and temporary cash investments	<del></del>				<del></del>
	ends and interest from securities			<del> </del>	<u> </u>	
	ental income or (loss) from real estate					
	financed property	<del> </del>				
	ebt-financed property			<del></del>		
	rtal income or (loss) from personal property	<del>                                     </del>		<del>-  -</del>	<del></del>	··
	investment income					
	(loss) from sales of assets other than inventory			<del></del>		<del></del>
	acome or (loss) from special events	-		<del></del>	·	<del></del>
	s profit or (loss) from sales of inventory					<del></del>
	revenue:		1			<del></del>
a					1	
b		<del>                                     </del>		-		· · · · · · · · · · · · · · · · · · ·
<u> </u>		<del>                                     </del>				
d		1				
e		1				
	otal Add columns (b), (d), and (e)					<del></del>
	. Add line 12, columns (b), (d), and (e)	1			13	0.
	heet in line 13 instructions to verify calculation	ıs.)				
Part XVI	B Relationship of Activities to the	e Accompli	shment of Exem	ipt Purpos	es	
Line No. ▼	Explain below how each activity for which incaccomplishment of the foundation's exempt	come is report purposes (oth	ed in column (e) of Fer than by providing	Part XVI-A cor funds for such	ntributed importantly to purposes). (See insti	o the ructions )
N/A						
		<u></u> -				
						· · · · · · · · · · · · · · · · · · ·
			····		<u> </u>	
					****	
BAA		TEEA	0502L 07/11/13			Form <b>990-PF</b> (2013)

TEEA0502L 07/11/13

# Form 990-PF (2013) SMITH FAMILY FOUNDATION 27-439687 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

	- Exempt Organ			<del></del>	<del></del>		
des	the organization direct cribed in section 501(c ting to political organiz	) of the Code (othe	age in any of the following with r than section 501(c)(3) organi	any other organizal zations) or in section	tion n 527,	Y	es No
<b>a</b> Trai	nsfers from the reporting	ng foundation to a	noncharitable exempt organiza	tion of.			
	Cash	-	, -			1 a (1)	_ x
(2)	Other assets				ļ	1 a (2)	X
<b>b</b> Oth	er transactions						
_	Sales of assets to a n	oncharitable evemi	nt organization			1 b (1)	x
	Purchases of assets fi		_			1 b (2)	X
					1		
٠,	Rental of facilities, equ	•	ssets			1 b (3)	X
` '	Reimbursement arrang	_				1 b (4)	X
, ,	Loans or loan guarant				}	1 b (5)	<u> X</u>
			or fundraising solicitations			1 b (6)	X
<b>c</b> Sha	aring of facilities, equip	ment, mailing lists,	other assets, or paid employe	es	Į	1 c	X
<b>d</b> If th the any	ne answer to any of the goods, other assets, o transaction or sharing	e above is 'Yes,' co or services given by arrangement, sho	mplete the following schedule the reporting foundation. If the win column (d) the value of th	Column <b>(b)</b> should a e foundation receive e goods, other asse	always show the fair ma ed less than fair market of ts, or services received.	rket value o value in	f
(a) Line no	o (b) Amount involved	(c) Name of	noncharitable exempt organization	(d) Description of	f transfers, transactions, and s	haring arrangen	nents
N/A							
·····							
			<del>-</del>		<del></del>		
		<del></del>					
	<del></del>			<del> </del>			
				<del> </del>			
·				ļ			
	<u> </u>						
<u></u>							
				<u> </u>			
	<del>                                     </del>			<del> </del>			
des	scribed in section 501 (o Yes,' complete the follo	c) of the Code (other owing schedule	ed with, or related to, one or mer than section 501(c)(3)) or in	section 527?		Yes	XNo
	(a) Name of organiz	ation	(b) Type of organization		(c) Description of rela	tionship	
N/A							
	Inder penalties of perjury, I decl	are that I have examined the	nis return, including accompanying schedul	es and statements, and to th	e best of my knowledge and belie	i, it is true,	
1	orrect, and complete beclara	ation of preparer (other ti	an taxpayer) is based on all information	of which preparer has any	y knowledge	May the IRS	discuss
Sign	Ø in late	1 1/200	1.40.4-		1	this return w	vith the
Here	UNI	MIN	10/30/	7 1rus	tel	preparer sho	tions <u>)?</u>
	Signature of officer∕on truste		Date -	Title		X Ye	s No
	Print/Type preparer's	s name	ALL SAMPLES LINES	Date Date	Check	PTIN	
Paid	KEITH M. S	PRAGUE, CPA	KEITH M. SPRAGU	EX CPA 1028	self employed	P001163	60
Prepare			RAGUE, GROEN & NEE	SE CPA'S	Firm's EIN ► 20-1:	306351	
Use Or			ENTER AVENUE	<del></del>	<del></del>		
USE UI	ייי	VISALIA, CA			Phone no / (559	) 625-03	320
BAA		110min, Cr	70201 0014		1.1.2.10 (339		
BAA						Form <b>990-F</b>	T (2013)

### 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
► Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545 0047

2013

Name of the organization		Employer identification number
SMITH FAMILY FOUNDATION		27-4396874
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organiza	ation
	4947(a)(1) nonexempt charitable trust n	not treated as a private foundation
	527 political organization	·
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust to	reated as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the	e General Rule or a Special Rule .	
, ,	·	ral Pula and a Special Pula. See instructions
	organization can check boxes for both the General	al Rule and a Special Rule. See instructions.
General Rule  V For an organization filing Form 990, 90	in.E7 or 990.PE that received during the year \$	5,000 or more (in money or property) from any one
contributor. (Complete Parts I and II.)	o-Lz, or 990-11 that received, during the year, \$	5,000 of more (in money or property) from any one
Special Rules		
For a section 501(c)(3) organization fil	ing Form 990 or 990-EZ that met the 33-1/3% sup	port test of the regulations under sections
509(a)(1) and 170(b)(1)(A)(vi) and reci	erved from any one contributor, during the year, a Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Con	contribution of the greater of (1) \$5,000 or
	ganization filing Form 990 or 990-EZ that received	
the prevention of cruelty to children or	for use exclusively for religious, charitable, scier animals. Complete Parts I, II, and III	itilic, literary, or educational purposes, or
For a section 501(c)(7), (8), or (10) or	ganization filing Form 990 or 990-EZ that received	I from any one contributor, during the year,
contributions for use exclusively for re	ligious, charitable, etc, purposes, but these contri otal contributions that were received during the ve	ibutions did not total to more than \$1,000.
purpose. Do not complete any of the	parts unless the <b>General Rule</b> applies to this organ	nization because it received nonexclusively
religious, charitable, etc, contributions	of \$5,000 or more during the year	<b>▶</b> \$
Caution: An organization that is not cover	ed by the General Rule and/or the Special Rules o	does not file Schedule B (Form 990, 990-EZ, or
990-PF) but it <b>must</b> answer 'No' on Part IV	$\prime$ , line 2, of its Form 990, or check the box on line	H of its Form 990-EZ or on its Form 990-PF,
	et the filing requirements of Schedule B (Form 99	
BAA For Paperwork Reduction Act Notic or 990-PF.	e, see the Instructions for Form 990, 990EZ,	Schedule <b>B</b> (Form 990, 990-EZ, or 990-PF) (2013

Name of orga			ployer identification number 7–4396874
	FAMILY FOUNDATION  Contributors (see instructions) Use duplicate copies of Part I if additional spa		-43968/4
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	EDWARD D. AND SHAUNA H. SMITH 9601 VERLAINE COURT	\$	Person / X Payroll  OO. Noncash
,	LAS_VEGAS,_NV_89145		(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	BRANDON AND MEGAN SMITH  8150 CASSIAN COURT  LAS VEGAS, NV 89149	\$17,00	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-~-		\$	Person Payroll Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions )

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2013)

Page

1 of

1 of Part 1

Page

1 to

1 of Part II

Name of organization
SMITH FAMILY FOUNDATION

Employer identification number 27-4396874

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
, <u>N</u>	I/A		
		·   ·	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		· <del></del>	
-		· \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		: : \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_			
		 \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
BAA		Schedule <b>B</b> (Form 990, 990-EZ	

•	organizations that total more than For organizations completing Part III, enter t contributions of \$1,000 or less for the year. (	\$1,000 for the year. Comple otal of exclusively religious, char	ete columns (a)				
	contributions of \$1,000 or less for the year. (	Enter this information once See	: instructions.)	► \$			
	Use duplicate copies of Part III if additional s			(4)			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
,	N/A						
			↓				
	<b></b>		4				
		(e)					
!	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee				
(2)	(b)	(6)		(d)			
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
Part I							
		<del>-</del>	+				
			+				
	<u> </u>						
		(e)	1				
	Townstown Is well and the	(e) Transfer of gift	Dala	tion object of two conferences to the supplications			
	Transferee's name, addres	s, and ZIP + 4	Rela	tionship of transferor to transferee			
		·					
	<u> </u>	·					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	<u> </u>	{					
	<u> </u>						
	, <del></del>						
	Transferee's name, addres	Relationship of transferor to transferee					
	Transferee s frame, address	Telatorising of transferor to transferor					
		· <del>  </del>					
			<del></del>				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
				<del></del>			
	(e) Transfer of gift						
	Transferee's name, addres	Relationship of transferor to transferee					
	in and in a second seco	-,	relationship of delisieror to delisieree				
		· <del>-</del>					
			<u> </u>				

of Part III

2013

### FEDERAL STATEMENTS

PAGE 1

**CLIENT 11514** 

SMITH FAMILY FOUNDATION

27-4396874

10/27/14

10.03AM

STATEMENT 1 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES

	(A)		(B) NET		(C)		(D)	
	EXPENSES		INVESTMENT		ADJUSTED		CHARITABLE	
	PER BOOKS		INCOME		NET INCOME		PURPOSES	
TOTAL	\$ \$	/15,000. 15,000.	\$	0.	\$	0.	\$ \$	<u>' 15,000.</u> 15,000.

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

	_	(A) EXPENSES PER_BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FILING FEES	TOTAL \$	850. 850.	\$ 0.	\$ 0.	\$ \( \frac{\pm 850.}{\pm 850.} \)

STATEMENT 3 FORM 990-PF, PART III, LINE 5 OTHER DECREASES

2012 CONTRIBUTION REDUCTION

<u>/ 5,369.</u> TOTAL

STATEMENT 4 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

EDWARD D. SMITH SHAUNA H. SMITH

**STATEMENT 5** FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

SCHOLARSHIP GRANTS

NAME:

DAVID J. LYON

CARE OF:

STREET ADDRESS: CITY, STATE, ZIP CODE:

11 OUIETWOOD LANE SANDY, UT 84092 (801) 523-0475

TELEPHONE:

E-MAIL ADDRESS:

FORM AND CONTENT:

LETTER SPECIFYING NATURE OF SCHOLARSHIP GRANT DESIRED AND

REASONS JUSTIFYING IT.

SUBMISSION DEADLINES:

NONE

RESTRICTIONS ON AWARDS:

NONE

2013	FEDERAL STA	PAGE 2		
CLIENT 11514	SMITH FAMILY FO	27-4396874		
10/27/14				10.03AM
STATEMENT 6 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YE	AR			
NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
/LATTER DAY TOURS 11230 TRIBIANI LAS VEGAS, NV 89138	NONE	So	CHOLARSHIP	\$ 50,000.
UNIVERSAL GENEALOGY 275 EAST SOUTH TEMPLE, SUITE 201 SALT LAKE CITY, UT 84111	NONE	So	CHOLARSHIP	8,827.
TOWN CENTER WARD 10817 ELK LAKE DRIVE LAS VEGAS, NV 89144	NONE	S	CHOLARSHIP	, 940.
HILLCREST 9TH WARD 74 WEST SUNSET CIRCLE BROOKSIDE, UT 84782	NONE	S	CHOLARSHIP	688.
REBECKA BENNETT 10744 BALSAM CREEK LAS VEGAS, NV 89144	NONE	S	CHOLARSHIP	1,000.
ERIC CORPUZ / 416 NO SEVEN PEAKS BLVD #120 PROVO, UT 84606	NONE	S	CHOLARSHIP	5,000.
CHRISTINE BEDFORD 3075 SOUTH BRONCO STREET LAS VEGAS, NV 89146	NONE	S	CHOLARSHIP	500.
DILLON MOFFITT 93 W. 1230 N. #325 PROVO, UT 84604	NONE	S	CHOLARSHIP	2,500.
HUNTER CARREIRA 1704 ST GREGORY DRIVE LAS VEGAS, NV 89117	NONE	S	CHOLARSHIP	36,000.
DREW LUDWIG 1340 FREEDOM BLVD. APT 213 PROVO, UT 84604	NONE	S	CHOLARSHIP	5,000.
JOEL STEPHENS 455 N. 400 W. APT 11 PROVO, UT 84601	NONE	S	CHOLARSHIP	2,500.
GREG GIRVIN 558 CANYON ROAD LOGAN, UT 84321	NONE	S	CHOLARSHIP	2,500.

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2013	FEDERAL STA	S	PAGE 3	
CLIENT 11514	SMITH FAMILY FO	27-4396874		
10/27/14				10 03AM
STATEMENT 6 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEA	AR			
NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
KATIE LISH 10701 BALSAM CREEK AVENUE LAS VEGAS, NV 89144	NONE		SCHOLARSHIP	\$ /5,000.
KATHLEEN GUZMAN .5632 GRANDMOTHER HAT STREET LAS VEGAS, NV 89081	NONE		SCHOLARSHIP	2,500.
MATTHEW LISH 10701 BALSAM CREEK AVENUE LAS VEGAS, NV 89144	NONE		SCHOLARSHIP	7,500.
AUSTIN EELLS 1565 N. UNIVERSITY AVENUE APT. 106 PROVO, UT 84604	NONE		SCHOLARSHIP	2,500.
ROUSELAND BUISSERETH 405 NO. 175 E. NORTH SALT LAKE CITY, UT 84054	NONE		SCHOLARSHIP	2,500
CARLOS ARIAS BERMUNDEZ 68 NORTH 200 WEST HEBER CITY, UT 84032	NONE		SCHOLARSHIP	2,500
TODD SWIFT 9537 VIRGINIA PINE CT LAS VEGAS, NV 89123	NONE		SCHOLARSHIP	12,000
KELAN LARKIN 330 N. 12TH WEST #50 REXBURG, ID 83440	NONE		SCHOLARSHIP	3,000
TAYLOR WESTMORELAND 1063 FENNELL FLOWER CT LAS VEGAS, NV 89138	NONE		SCHOLARSHIP	5,000
MORGAN HANCOCK 3195 NORTH 900 SOUTH OGDEN, UT 84404	NONE		SCHOLARSHIP	5,000

NONE

NONE

SCHOLARSHIP

SCHOLARSHIP

3,000.

2,500.

BRANDON WILKINSON 251 E. 4TH SOUTH REXBURG, ID 83440

PROVO, UT 84606

JASMINE KASPAR 1130 EAST 450 NORTH STREET APR 77 2013 PAGE 4 FEDERAL STATEMENTS **CLIENT 11514 SMITH FAMILY FOUNDATION** 27-4396874 10/27/14 10.03AM STATEMENT 6 (CONTINUED)
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR FOUND-DONEE PURPOSE OF ATION NAME AND ADDRESS RELATIONSHIP STATUS AMOUNT GRANT BRANDON BIRD SCHOLARSHIP NONE \$ / 5,000. 4723 LOGAN ROCK LAS VEGAS, NV 89129 YUNZIO CUI NONE SCHOLARSHIP /2,500.530 EAST 600 NORTH PROVO, UT 84606 TOTAL \$ 175,955.

### Form **8868**

(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.

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

OMB No 1545-1709

• If you a	re filing for an Automatic 3-Month Extension, co	mplete only	Part I and check this box		· · X		
• If you a	re filing for an Additional (Not Automatic) 3-Mon	ıth Extensioı	n, complete only Part II (on page 2 of th	ıs form).			
Do not com	plete Part II unless you have already been grant	ed an autom	atic 3-month extention on a previously f	iled-Form 8868.			
Electronic ( corporation request an e Associated	filing (e-file). You can electronically file Form 886 required to file Form 990-T), or an additional (no extension of time to file any of the forms listed in Par With Certain Personal Benefit Contracts, which reling of this form, visit www.irs.gov/efile and click	68 if you need of automatic) t I or Part II w nust be sent	d a 3-month automatic extension of time 3-month extension of time. You can ele with the exception of Form 8870, Information to the IRS in paper format (see instruct	e to file (6 months for ectronically file Form Return for Transfers	8868 to		
Part I	Automatic 3-Month Extension of Time	e. Only sub	omit original (no copies needed).				
-	on required to file Form 990-T and requesting an						
income tax	rporations (including 1120-C filers), partnerships returns.	, REMICS, ai	na trusts must use Form 7004 to reques	t an extension of tin	ie to file		
			Enter filer's identi	fying number, see i			
<b>T</b>	Name of exempt organization or other filer, see instructions	Employer identification in	umber (EIN) or				
Type or print							
•	SMITH FAMILY FOUNDATION			27-4396874			
File by the due date for	Number, street, and room or suite number. If a P O box, see	instructions		Social security number (SSN)			
filing your return See	9601 VERLAINE COURT  City, town or post office, state, and ZIP code. For a foreign ac	ddaaa					
instructions		aress, see instru	ictions				
	LAS VEGAS, NV 89145						
Enter the R	Return code for the return that this application is	for (file a sep	parate application for each return) .		04		
Application	1	Return Code	Application Is For	Return Code			
Form 990 or	Form 990-EZ	01	Form 990-T (corporation)		07		
Form 990-E	BL	02	Form 1041-A		08		
Form 4720 (	(individual)	03	Form 4720 (other than individual)		09		
Form 990-F	PF	04	Form 5227		10		
Form 990-1	(section 401(a) or 408(a) trust)	05	Form 6069		11		
Form 990-1	(trust other than above)	06	Form 8870		12		
Telepho  If the o  If this is check to the extension of the content of the conten	ension is for. lest an automatic 3-month (6 months for a corporation	Fax No usiness in th ur digit Group check this b in required to ganization re , and ending	Exemption Number (GEN)  ox .	f this is for the whole  mes and EINs of al  mal return	<b>-</b>		
3a If this	s application is for Forms 990-BL, 990-PF, 990-T, sfundable credits. See instructions	4720, or 60	69, enter the tentative tax, less any	3a \$	. 0.		
<b>b</b> If this tax p	s application is for Forms 990-PF, 990-T, 4720, o ayments made. Include any prior year overpaym	r 6069, enter ent allowed a	any refundable credits and estimated as a credit	3ь\$	0.		
c Balar EFTP	nce due. Subtract line 3b from line 3a. Include yo S (Electronic Federal Tax Payment System). Se	our payment e instruction	with this form, if required, by using	3c \$	0.		
Caution. If payment in	you are going to make an electronic funds withdistructions.	Irawal (dırect	debit) with this Form 8868, see Form 8	453-EO and Form 8	879-EO for		