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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

Department of the Treasury Internal Revenue Service

▶ 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 calendar year 2013 or tax year beginning | | , and ending | | |
|--|------------------------------------|---------------------------------------|---|--|
| Name of foundation | | | A Employer identification | n number |
| MENARD FAMILY FOUNDATION | | | | |
| C/O LINDSAY & BROWNELL, L | | · · · · · · · · · · · · · · · · · · · | 33-083479 | 0 |
| Number and street (or P O box number if mail is not delivered to street | · | Room/suite | B Telephone number | |
| 4225 EXECUTIVE SQUARE, SU | | | 858-558-9 | 200 |
| City or town, state or province, country, and ZIP or foreign | postal code | | C If exemption application is | pending, check here |
| LA JOLLA, CA 92037 | | | | |
| G Check all that apply: Initial return | | ormer public charity | D 1. Foreign organization | ns, check here |
| Final return | Amended return | | 2 Foreign organizations m | neeting the 85% test |
| Address change | Name change | | 2 Foreign organizations mechanical check here and attach of | computation |
| | exempt private foundation | | E If private foundation st | |
| Section 4947(a)(1) nonexempt charitable trust | Other taxable private founda | <u> </u> | under section 507(b)(| 1)(A), check here |
| · · · · · · · · · · · · · · · · · · · | ting method. X Cash | Accrual | F If the foundation is in a | |
| (from Part II, col. (c), line 16) | Other (specify) | | under section 507(b)(| 1)(B), check here |
| 17,870,083. (Part I, col | | | | (4) |
| Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes |
| necessarily equal the amounts in column (a) | OXPONOCO POI DOCKO | | | (cash basis only) |
| 1 Contributions, gifts, grants, etc , received 2 Check X if the foundation is not required to attach Sch 8 | | | N/A | |
| 3 Interest on savings and temporary cash investments | 6. | 6. | | STATEMENT 1 |
| cash investments 4 Dividends and interest from securities | 169,329. | 163,329. | | STATEMENT 2 |
| 5a Gross rents | 109,329. | 103,323. | | SIMIEMENI Z |
| b Net rental income or (loss) | | | | |
| , | 1,046,647. | | | |
| b Gross sales price for all 5,912,833. | 1,040,047. | | | |
| b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) | | 1,046,647. | | |
| 8 Net short-term capital gain | | 2701070170 | | · · · · · · · · · · · · · · · · · · · |
| 9 Income modifications | | | | |
| Gross sales less returns and allowances | | | | |
| D Less Cost of goods sold / | | | | |
| c Gross profit or floss | | | | |
| 11 Other Income 12 Stal Add Mes 4 through 14 | -19,034. | -19,034. | | STATEMENT 3 |
| | 1,196,948. | 1,190,948. | | |
| Compensation of officers, directors, trusters, etc | 103,333. | 51,666. | | 51,667. |
| 14 Other emptoyee sataries and wages | | | | |
| 15 Pension plans employee benefits | | | <u></u> | |
| 16a Legal fees | | | | |
| b Accounting fees STMT 4 c Other professional fees STMT 5 | 7,000. | 3,500. | | 3,500. |
| m control processional rees BIIII 3 | 62,857. | 62,857. | | 0. |
| 17 Interest | 20 026 | 4 501 | | 4 225 |
| 18 Taxes STMT 6 19 Depreciation and depletion 20 Occupancy | 38,826. | 4,591. | | 4,235. |
| 17 Interest 18 Taxes STMT 6 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications | | | | |
| 20 Occupancy 21 Travel, conferences, and meetings | 5,874. | 2,937. | - | 2,937. |
| 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 7 24 Total operating and administrative expenses. Add lines 13 through 23 | 3,0/4. | 4,33/. | | 4,33/. |
| | 42,284. | 24,708. | | 17,576. |
| 23 Other expenses STMT 7 24 Total operating and administrative expenses. Add lines 13 through 23 | 42,204. | 24,700 | | 11,310. |
| expenses. Add lines 13 through 23 | 260,174. | 150,259. | | 79,915. |
| 25 Contributions, gifts, grants paid | 668,150. | 200,200. | | 668,150. |
| 26 Total expenses and disbursements | 000,100 | · -··-· · · · | <u> </u> | 1 330,130. |
| Add lines 24 and 25 | 928,324. | 150,259. | | 748,065. |
| 27 Subtract line 26 from line 12 | | | | |
| a Excess of revenue over expenses and disbursements | 268,624. | | | |
| b Net investment income (if negative, enter -0-) | | 1,040,689. | | |
| c Adjusted net income (if negative, enter -0-) | | | N/A | |

LHA For Paperwork Reduction Act Notice, see instructions

| D | art | Balance Sheets Attached schedules and amounts in the description | Beginning of year | Епа о | <u> </u> |
|----------------|-------|---|-------------------|----------------|---------------------------|
| | art | column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | 9,224. | 63,213. | 63,213. |
| | 2 | Savings and temporary cash investments | 1,734,270. | 3,232,919. | 3,232,919. |
| | 3 | Accounts receivable | | | |
| | | Less: allowance for doubtful accounts ▶ | | | |
| | 4 | Pledges receivable ▶ | , | | |
| | | Less: allowance for doubtful accounts | | | |
| | 5 | Grants receivable | | . , | |
| | | Receivables due from officers, directors, trustees, and other | | | |
| | ľ | disqualified persons | | | |
| | , | Other notes and loans receivable | <u></u> | | |
| | ′ | Less, allowance for doubtful accounts | | | |
| | _ | | | | |
| ssets | | Inventories for sale or use | | | |
| Ass | ı | Prepaid expenses and deferred charges | 147 160 | 147 160 | 150 200 |
| | l | Investments - U.S and state government obligations STMT 9 | 147,168. | 147,168. | 152,300. |
| | l | Investments - corporate stock STMT 10 | 8,283,849. | 8,091,714. | 12,943,131. |
| | l | Investments - corporate bonds STMT 11 | 1,467,875. | 387,180. | 384,005. |
| | 11 | Investments - land, buildings, and equipment basis | | | |
| | | Less accumulated depreciation | | | |
| | 12 | Investments - mortgage loans | | | |
| | 13 | Investments - other STMT 12 | 1,052,712. | 1,041,528. | 1,094,515. |
| | 14 | Land, buildings, and equipment basis ► 3,501. | | | |
| | | Less accumulated depreciation STMT 13► 3,501. | | | |
| | 15 | Other assets (describe ►) | | | |
| | 16 | Total assets (to be completed by all filers - see the | | | |
| | | instructions. Also, see page 1, item 1) | 12,695,098. | 12,963,722. | 17,870,083. |
| | 17 | Accounts payable and accrued expenses | | | |
| | 18 | Grants payable | | | |
| ç | 19 | Deferred revenue | | | |
| Lrabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| abi | 21 | Mortgages and other notes payable | | | |
| J | 22 | Other liabilities (describe) | | | |
| | | | | | |
| | 23 | Total liabilities (add lines 17 through 22) | 0. | 0. | |
| | | Foundations that follow SFAS 117, check here | | | |
| | | and complete lines 24 through 26 and lines 30 and 31 | | | |
| es | 24 | Unrestricted | 11,795,098. | 12,163,722. | |
| ű | 25 | Temporarily restricted | 900,000. | 800,000. | |
| or Fund Balanc | 26 | Permanently restricted | 300,0001 | 33375331 | |
| ᅙ | - " | Foundations that do not follow SFAS 117, check here | | | |
| Ξ | | and complete lines 27 through 31 | | | |
| | 27 | Capital stock, trust principal, or current funds | | | |
| Assets | l | Paid-in or capital surplus, or land, bldg., and equipment fund | | | |
| \ss | 28 | Retained earnings, accumulated income, endowment, or other funds | | | |
| Net A | 29 | - · · · · · · · · · · · · · · · · · · · | 12,695,098. | 12,963,722. | |
| Ž | 30 | Total net assets or fund balances | 12,033,030. | 12,303,1220 | |
| | ١., | Total lightilding and not accept found halances | 12,695,098. | 12,963,722. | |
| _ | 31 | Total liabilities and net assets/fund balances | | 12,303,122. | |
| P | art | Analysis of Changes in Net Assets or Fund Ba | alances | | |
| | Total | I not accept on fund halanges at haganage of year. Part II golumn (a) line | 20 | | |
| | | I net assets or fund balances at beginning of year - Part II, column (a), line is | JU | | 12,695,098. |
| | | st agree with end-of-year figure reported on prior year's return) | | 1 | |
| | | r amount from Part I, line 27a | | 2 | 268,624. |
| | | r increases not included in line 2 (itemize) | | 3 | 12 062 722 |
| | | lines 1, 2, and 3 | | 4 | 12,963,722. |
| | | eases not included in line 2 (itemize) | 1 (1) 1 (2) | 5 | 12 063 722 |
| 6 | Fotal | net assets or fund balances at end of year (line 4 minus line 5) - Part II, co | lumn (b), line 30 | 6 | 12,963,722. |
| | | | | | Form 990-PF (2013) |

MENARD FAMILY FOUNDATION Form 990-PF (2013) 33-0834790 C/O LINDSAY & BROWNELL, Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired (a):List and describe the kind(s) of property sold (e.g., real estate, (c) Date acquired (d) Date sold P - Purchase D - Donation (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs MLC Co) 1a SALES OF PUBLICLY TRADED SECURITIES P P b FROM K-1 RHJ PARAMO FUND, LP c FROM K-1 RHJ PARAMO FUND, P 1256 P $_{\rm LP}$ SEC d FROM K-1 RHJ PARAMO FUND, e CLASS ACTION SETTLEMENT (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price plus expense of sale (or allowable) (e) plus (f) minus (g) 5,871,900 4,837,427 1,034,473. а 21,693. 21,693 b 14,932 14,932. C 28,759 -28,759. d 4,308. 4,308. е Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col. (I) Losses (from col. (h)) (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any 1,034,473. а 21,693. b 14,932. C -28,759. d 4,308. е If gain, also enter in Part I, line 7 1,046,647. 2 Capital gain net income or (net capital loss) 2 If (loss), enter -0- in Part I, line 7 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8 N/A Part V | Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year; see the instructions before making any entries (a) Base period years (d) Distribution ratio (b) (c)

| | Calendar year (or tax year beginning in) | Adjusted qualifying distributions | Net value of noncharitable-use assets | | (col. (b) divided by col. (c)) |
|---|---|---|---------------------------------------|----|--------------------------------|
| | 2012 | 692,012. | 15,240,054. | | .045407 |
| | 2011 | 672,032. | 15,750,524. | | .042667 |
| | 2010 | 640,515. | 13,965,950. | | .045863 |
| | 2009 | 664,562. | 12,634,758. | | .052598 |
| | 2008 | 674,021. | 11,775,477. | | .057239 |
| 2 | | se period - divide the total on line 2 by 5 | or by the number of years | 2 | .243774 |
| 3 | the foundation has been in existence if less | • | or by the number of years | 3 | .048755 |
| | the foundation has been in existence in less | , than o youro | | | 1010733 |
| 4 | Enter the net value of noncharitable-use as | sets for 2013 from Part X, line 5 | | 4 | 16,495,754. |
| 5 | Multiply line 4 by line 3 | | | 5 | 804,250. |
| 6 | Enter 1% of net investment income (1% of | Part I, line 27b) | | 6 | 10,407. |
| 7 | Add lines 5 and 6 | | | 7 | 814,657. |
| 8 | Enter qualifying distributions from Part XII, | , line 4 | | 8_ | 748,065. |

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

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See the Part VI instructions

MENARD FAMILY FOUNDATION

| _ | MEMORIAN TO CONTROL TO | 00041 | 700 | | |
|----|--|-----------------|-----|-----|---------------|
| | n 990-PF (2013) C/O LINDSAY & BROWNELL, LLP 33-0 ort VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948- | 0834' see in | | | Page 4 ns) |
| | 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 instructions) | | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% | | 2 | 0,8 | 14. |
| - | 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, col (b). | | | | |
| | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | | | 0. |
| | Add lines 1 and 2 | | 2 | 0,8 | 14. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | | | 0. |
| | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | | 2 | 0,8 | 14. |
| | Credits/Payments: | | | | |
| | 2013 estimated tax payments and 2012 overpayment credited to 2013 6a 36,698. | | | | |
| | Exempt foreign organizations - tax withheld at source | | | | |
| | Tax paid with application for extension of time to file (Form 8868) | | | | |
| | Backup withholding erroneously withheld 6d | | | | |
| | Total credits and payments. Add lines 6a through 6d | | 3 | 6,6 | 98. |
| | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 | | | | |
| | Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed | | | | |
| 10 | Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | 1 | 5,8 | 84. |
| 11 | Enter the amount of line 10 to be: Credited to 2014 estimated tax 15,884. Refunded 11 | | | | 0. |
| | rt VII-A Statements Regarding Activities | | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in | | | Yes | No |
| | any political campaign? | [| 1a | | <u>X</u> |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? | [| 1b | | X |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or | | | | |
| | distributed by the foundation in connection with the activities | | | | |
| C | Did the foundation file Form 1120-POL for this year? | | 1c | | Х |
| 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 • | | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | | | |
| | managers ► \$ 0. | | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | L | 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 | Į | 3 | | X |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | Ĺ | 4a | | X |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | /A | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | _ | 5 | | <u>X</u> |
| | If "Yes," attach the statement required by General Instruction T | | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | | | |
| | By language in the governing instrument, or | | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law | | | | |
| | remain in the governing instrument? | _ | 6 | X | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV | _ | 7 | X | |
| | | | | | 1 |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) | | | | |
| | CA | | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) | | | | |
| | of each state as required by General Instruction G? If "No," attach explanation | ļ | 8b | X | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar | | | | |
| | year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV | Ļ | 9 | | _X_ |
| 10 | Did any nersons become substantial contributors during the tax year? If "yes " attach a schedule listing their names and addresses | | 10 | | ΙX |

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| _ | 1990-PF (2013) C/O LINDSAY & BROWNELL, LLP 33-083 | <u>4790</u> | | Page 5 |
|----|--|----------------|-------------|----------|
| Pa | art 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 | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | X | <u> </u> |
| | Website address ► WWW.MENARDFOUNDATION.ORG | | | |
| 14 | The books are in care of ► LINDSAY AND BROWNELL, LLP Telephone no. ► (858) | 558 | -92 | 00 |
| | Located at ▶4225 EXECUTIVE SQUARE, SUITE 1150, LA JOLLA, CA ZIP+4 ▶9 | 2037 | | |
| 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 | N | /A | |
| 16 | At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank, | | Yes | No |
| | 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 | | | |
| Pa | art 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. | | Yes | No |
| 1a | 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? | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No | | | |
| | (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)? | | | |
| | (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) | | | |
| b | of the 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)? | 1b | | Х |
| | Organizations relying on a current notice regarding disaster assistance check here | | | |
| 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 | | Х |
| 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 and 6e, Part XIII) for tax year(s) beginning | | | |
| | before 2013? Yes X No | | | |
| | If "Yes," list the years >,,,,,,, | | | |
| 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 | | İ | |
| | statement - see instructions.) N/A | 2ь | | |
| C | : If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | | |
| | > | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | |
| | during the year? | 1 | | |
| b | of "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after | j | | |
| | 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 determine if the foundation had excess business holdings in 2013) N/A | 3ь | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | X |
| | 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? | 4b | | _X_ |
| | | orm 990 | -PF | (2013) |

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Total number of other employees paid over \$50,000

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|---|--------------------------------------|------------------|
| Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued) | ion Managers, Highly | |
| 3 Five highest-paid independent contractors for professional services. If none, enter | 'NONE." | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | | ▶ 0 |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers product N/A | al information such as the ced, etc. | Expenses |
| 2 | | |
| 3 | | |
| 4 | | |
| Part IX-B Summary of Program-Related Investments | | |
| Describe the two largest program-related investments made by the foundation during the tax year on line. | nes 1 and 2. | Amount |
| 1 <u>N/A</u> | | |
| 2 | | |
| All other program-related investments. See instructions. 3 | | <u> </u> |
| Total. Add lines 1 through 3 | > | 0. |

| P | Minimum Investment Return (All domestic foundations must complete this part. Foreign four | ndations, | see instructions) |
|----|---|-------------|--------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| а | Average monthly fair market value of securities | 1a | 12,318,666. |
| b | Average of monthly cash balances | 1b | 3,329,329. |
| C | Fair market value of all other assets | 1c | 1,098,963. |
| d | Total (add lines 1a, b, and c) | 1d | 16,746,958. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | • |
| | 1c (attach detailed explanation) 1e 0 • | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 16,746,958. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 251,204. |
| 5 | Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 16,495,754. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 824,788. |
| Р | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here and do not complete this part.) | d certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 824,788. |
| 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 | 2c | 20,814. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 803,974. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 803,974. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 803,974. |
| P | art XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | T.10. 0.55 |
| а | Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 | <u>1a</u> | 748,065. |
| b | Program-related investments - total from Part IX-B | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| а | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 748,065. |
| 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 | 5 | <u> </u> |
| 6 | Adjusted qualifying distributions Subtract line 5 from line 4 | 6 | 748,065. |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q | ualifies fo | r the section |

Form **990-PF** (2013)

4940(e) reduction of tax in those years.

MENARD FAMILY FOUNDATION C/O LINDSAY & BROWNELL, LL

Undistributed Income (see instructions)

Form 990-PF (2013)
Part XIII Ur

LINDSAY & BROWNELL, LLP 33

(c) (d) 2012 2013 Corpus Years prior to 2012 1 Distributable amount for 2013 from Part XI, 803,974. 2 Undistributed income, if any, as of the end of 2013 0 a Enter amount for 2012 only b Total for prior years: 0 3 Excess distributions carryover, if any, to 2013: 86,641. a From 2008 **b** From 2009 33,527. c From 2010 d From 2011 e From 2012 120,168. f Total of lines 3a through e 4 Qualifying distributions for 2013 from Part XII, line 4: ► \$_ 748,065 0 a Applied to 2012, but not more than line 2a b Applied to undistributed income of prior 0. years (Election required - see instructions) c Treated as distributions out of corpus 0 (Election required - see instructions) 748,065. d Applied to 2013 distributable amount 0 e Remaining amount distributed out of corpus 55,909 55,909. Excess distributions carryover applied to 2013 (if an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: 64,259 a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract 0. line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously 0 assessed 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 instr 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 0 section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2008 not applied on line 5 or line 7 30,732 9 Excess distributions carryover to 2014 33,527 Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 33,527. a Excess from 2009 b Excess from 2010 c Excess from 2011 d Excess from 2012 e Excess from 2013

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

C/O LINDSAY & BROWNELL,

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year PUBLIC CHARITY SCHOLARSHIPS & REPAIRS BLESSED SACRAMENT SCHOOL NONE 6641 SUNSET BLVD HOLLYWOOD, CA 90028 10,000. BORDERLINKS NONE PUBLIC CHARITY GENERAL SUPPORT 620 S. 6TH AVENUE TUCSON, AZ 85701 6,000. NONE PUBLIC CHARITY GENERAL SUPPORT BIRTHLINE 3660 CLAIREMONT DR. SUITE 4 SAN DIEGO, CA 92117 1,000. PUBLIC CHARITY GENERAL SUPPORT NONE BIRTHLINE 3660 CLAIREMONT DR. SUITE 4 SAN DIEGO, CA 92117 150. CARDINAL BERNARDIN CENTER NONE PUBLIC CHARITY GENERAL SUPPORT P.O. BOX 432256 SAN YSIDRO CA 92143 5 000. SEE CONTINUATION SHEET(S) Total ▶ 3a 668 150. **b** Approved for future payment NONE **▶** 3b Total

MENARD FAMILY FOUNDATION

| Form 990-PF (2013) C/O LINDSAY & | | • | <u>.</u> | 33-0 | 834790 Page 1 |
|---|-----------------|---------------------------------|-----------------------|------------------------------|---------------------------------------|
| Part XVI-A Analysis of Income-Produ | | | T | | |
| Enter gross amounts unless otherwise indicated. | (a) Business | usiness income (b) Amount | (C) Exclu- sion | (d) Amount | (e) Related or exempt function income |
| 1 Program service revenue: | code | | code | Autobile | Turiotion moonic |
| b | - | <u>.</u> | | | , |
| d | 1 1 | | | | |
| e | | | | | |
| f | - | | | | |
| g Fees and contracts from government agencies2 Membership dues and assessments | | | 1 | | ····· |
| 3 Interest on savings and temporary cash | | | | | |
| investments | | | 14 | 6. | |
| 4 Dividends and interest from securities | | | 14 | 169,329. | |
| 5 Net rental income or (loss) from real estate. a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| 7 Other investment income | | | 14 | -19,034. | |
| 8 Gain or (loss) from sales of assets other than inventory | | | 14 | 1,046,647. | |
| 9 Net income or (loss) from special events | | | | 1,040,047. | |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue: | | | | | |
| a | - | | + +- | | |
| b | | | + + | | |
| d | | | | | |
| e | | | | | |
| 12 Subtotal Add columns (b), (d), and (e) | | 0 | • | 1,196,948. | 0 |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 1,196,948 |
| (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities | to the Accom | plishment of F | xempt F | Purnoses | |
| | | - | | | |
| Explain below how each activity for which income the foundation's exempt purposes (other than | | | A contribute | ed importantly to the accomp | disnment of |
| | | | | | |
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Form **990-PF** (2013)

323621 10-10-13

| Part > | (VII Information I Exempt Orga | | and Transactions | and Relationships With Nonch | naritable | | go io |
|---------------|---|---|----------------------------------|---|---|---------|--------------|
| 1 Did | the organization directly or in | directly engage in any of the follow | ing with any other organizati | on described in section 501(c) of | | Yes | No |
| the | Code (other than section 501 | (c)(3) organizations) or in section 5 | 527, relating to political orgai | nizations? | | | |
| a Tran | nsfers from the reporting four | ndation to a noncharitable exempt o | organization of: | | | | |
| (1) | Cash | | | | 1a(1) | | _X |
| (2) | Other assets | | | | 1a(2) | | _X_ |
| | er transactions: | | | | | | |
| | Sales of assets to a nonchar | , , | | | 1b(1) | | _ <u>X</u> _ |
| | | noncharitable exempt organization | | | 1b(2) | | X |
| | Rental of facilities, equipmen | · | | | 1b(3) | | <u>X</u> _ |
| ٠, | Reimbursement arrangemen | its | | | 1b(4) | - | <u>X</u> |
| | Loans or loan guarantees | mambarahin ar fiyadrayayan aaliaitat | 1000 | | 1b(5) | | X |
| | | membership or fundraising solicitati | | | 1b(6) | | X |
| | | mailing lists, other assets, or paid er | • • | ways show the fair market value of the good | 1c | oto. | |
| or s | ervices given by the reporting | | ved less than fair market vali | ue in any transaction or sharing arrangemen | | E15, | |
| (a) Line no | | (c) Name of noncharitab | | (d) Description of transfers, transactions, a | nd sharing ar | angeme | |
| <u> </u> | | N/A | | | | | |
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| | | Lectly affiliated with, or related to, one firer than section 501(c)(3)) or in sec | | izations described | Yes | x |] No |
| b If "Y | es," complete the following so | chedule. | | | | | |
| | (a) Name of o | rganization | (b) Type of organization | (c) Description of relatio | nship | | |
| | N/A | | | | | | |
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| Sign Here | | | | nation of which preparer has any knowledge | May the IRS of eturn with the shown below X Yes | prepare | ¥ |
| | Signature of officer or trust | ee ' | Date | Title | | | |
| | Print/Type preparer's | name Preparer's | signature | Date Check If PTH | V | | |
| | | | 111100 0 | self- employed | | | |
| Paid | MARY H. M | | H Kilianus | | 00735 | | |
| Prepa | , v v | NDSAY & BROWNEĽI | L; LLE) (| Firm's EIN ► 33- | 08858 | 95 | |
| Use O | | | <u> </u> | | | | |
| | | 225 EXECUTIVE SQ | | 1150 | | | |
| | L, | <u>A JOLLA, CA 9203</u> | 37 | Phone no. 858 | | | |
| | | | | | Form 990 |)-PF (| 2013) |

Part XV .Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, . Recipient Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor NONE PUBLIC CHARITY GENERAL SUPPORT CASA DE LOS POBRES, A.C. 349 CEDAR STREET 15,000, SAN DIEGO CA 92101 CATHOLIC CHARITIES NONE PUBLIC CHARITY GENERAL SUPPORT P.O. BOX 17152 15,000, BALTIMORE, MD 21297 CATHOLIC CHARITIES PUBLIC CHARITY GENERAL SUPPORT NONE P.O. BOX 17152 3,500. BALTIMORE, MD 21297 PUBLIC CHARITY GENERAL SUPPORT CATHOLIC CHARITIES: THE TOMORROW NONE PROJECT P.O. BOX 17152 500, BALTIMORE MD 21297 CATHOLIC RELIEF SERVICES NONE PUBLIC CHARITY GENERAL SUPPORT 513 W. FULLERTON PARKWAY 3,000. CHICAGO, IL 60614-6428 PUBLIC CHARITY GENERAL SUPPORT CENACLE SISTERS NONE 5500 ST. MARY ST. 21,000, METAIRIE LA 70006 NONE PUBLIC CHARITY GENERAL SUPPORT CHRISTIAN COMMUNITY THEATER 1545 PIONEER WAY 10,000. EL CAJON, CA 92020 PUBLIC CHARITY GENERAL SUPPORT CHRISTIAN COMMUNITY THEATER NONE 4167 RAPPAHANNOCK 5,000. SAN DIEGO, CA 92117 NONE PUBLIC CHARITY GENERAL SUPPORT CHRISTIAN COMMUNITY THEATER 4167 RAPPAHANNOCK 5,000, SAN DIEGO, CA 92117 ECHO PARENTING & EDUCATION NONE PUBLIC CHARITY GENERAL SUPPORT 823 GATEWAY CENTER WAY SAN DIEGO, CA 92102 4,000. Total from continuation sheets 646,000.

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient FAMILY HEALTH CENTERS OF SAN DIEGO NONE PUBLIC CHARITY GENERAL SUPPORT 3350 E STREET 4.000. SAN DIEGO, CA 92102 FAMILY HEALTH CENTERS OF SAN DIEGO NONE PUBLIC CHARITY GENERAL SUPPORT 3350 E STREET 1,000. SAN DIEGO, CA 92102 FATHER JOE'S VILLAGES NONE PUBLIC CHARITY GENERAL SUPPORT 3350 E STREET SAN DIEGO, CA 92102 50,000. FREE THE KIDS (THEO'S WORK) HAITI PUBLIC CHARITY GENERAL SUPPORT NONE 134 NORTH LA SALLE STREET, SUITE 500 CHICAGO, IL 60602 6,000. FRIENDS OF ORPHANS IN HAITI NONE PUBLIC CHARITY GENERAL SUPPORT 1 WORLD AVENUE LITTLE ROCK, AR 72202 6,000, HEIFER INTERNATIONAL FOUNDATION NONE PUBLIC CHARITY GENERAL SUPPORT 6461 EL APAJO ROAD RANCHO SANTA FE CA 92067 3,000. HELEN WOODWARD ANIMAL CENTER NONE PUBLIC CHARITY GENERAL SUPPORT 801 ST. PAUL STREET BALTIMORE MD 21202 5,000. HOMEBOY INDUSTRIES NONE PUBLIC CHARITY GENERAL SUPPORT 130 W. BRUNO ST. LOS ANGELES, CA 90012 2,500. PUBLIC CHARITY GENERAL SUPPORT HOMEBOY INDUSTRIES NONE 130 W. BRUNO ST. LOS ANGELES, CA 90012 1,000, IGNATIAN LAY VOLUNTEER CORPS NONE CHURCH GENERAL SUPPORT 2540 SAN DIEGO AVENUE SAN DIEGO, CA 92110 15,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, . Recipient Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor IMMACULATE CONCEPTION CHURCH NONE PUBLIC CHARITY GENERAL SUPPORT P.O. BOX 28491 AUSTIN, TX 78755-8491 10,000. INTERNATIONAL FOUNDATION FOR HOPE NONE PUBLIC CHARITY GENERAL SUPPORT P.O. BOX 68 LOS GATOS, CA 95031 4,000. JESUITS CALIFORNIA PROVINCE (FOR NONE PUBLIC CHARITY GENERAL SUPPORT SOCIAL MINISTRIES) 5200 CAMPANILE WAY SAN DIEGO, CA 92182 10,000. JESUITS CALIFORNIA PROVINCE (FOR NONE PUBLIC CHARITY GENERAL SUPPORT CAPITAL CAMPAIGN) 5200 CAMPANILE WAY SAN DIEGO, CA 92182 25,000. **KPBS** NONE PUBLIC CHARITY GENERAL SUPPORT 1142 ORANGE AVENUE CORONADO, CA 92118 10,000. PUBLIC CHARITY GENERAL SUPPORT **KPBS** NONE 1142 ORANGE AVENUE CORONADO CA 92118 1,000, **KPBS** NONE PUBLIC CHARITY GENERAL SUPPORT 1142 ORANGE AVENUE 1,000. CORONADO CA 92118 LAMBS PLAYERS THEATER NONE PUBLIC CHARITY GENERAL SUPPORT 1142 ORANGE AVENUE 10,000. CORONADO, CA 92118 LAMBS PLAYERS THEATER NONE PUBLIC CHARITY GENERAL SUPPORT 1142 ORANGE AVENUE CORONADO, CA 92118 1,000. ARTS COUNCIL OF SANTA CRUZ NONE PUBLIC CHARITY GENERAL SUPPORT 1070 RIVER ST SANTA CRUZ CA 95060 10,000, Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor MARYKNOLL FATHERS & BROTHERS NONE PUBLIC CHARITY GENERAL SUPPORT 4077 5TH AVENUE 2,000. SAN DIEGO, CA 92103-2105 NONE PUBLIC CHARITY GENERAL SUPPORT MERCY HOSPITAL FOUNDATION 4077 5TH AVENUE SAN DIEGO, CA 92103-2105 100,000, PUBLIC CHARITY GENERAL SUPPORT MERCY HOSPITAL FOUNDATION NONE 4077 5TH AVENUE SAN DIEGO, CA 92103-2105 15,000. PUBLIC CHARITY GENERAL SUPPORT NONE MERCY HOSPITAL FOUNDATION 4077 5TH AVENUE 5,000. SAN DIEGO, CA 92103-2105 PUBLIC CHARITY GENERAL SUPPORT MERCY OUTREACH SURGICAL TEAM NONE 2040 NASSAU DRIVE 2,000. SAN JOSE, CA 95122 PUBLIC CHARITY GENERAL SUPPORT MOST HOLY TRINITY SCHOOL NONE 3300 E. SUNRISE DRIVE 20,000. TUSCON, AZ 85718 PUBLIC CHARITY GENERAL SUPPORT MUSCULAR DYSTROPHY ASSOCIATION NONE 836 E J STREET 3,000. CHULA VISTA, CA 91910 NATIONAL ASSOCIATION OF PERINATAL NONE PUBLIC CHARITY GENERAL SUPPORT SOCIAL WORKERS 1145 17TH STREET N.W. 3,000. WASHINGTON, DC 20036 PUBLIC CHARITY SCHOLARSHIP NATIONAL GEOGRAPHIC NONE 2755 55TH STREET 3,000. SAN DIEGO, CA 92105 PUBLIC CHARITY GENERAL SUPPORT NONE NATIVITY PREP ACADEMY SAN DIEGO 2755 55TH STREET 12,000. SAN DIEGO CA 92105 Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) or substantial contributor recipient OUR LADY'S SCHOOL NONE PUBLIC CHARITY GENERAL SUPPORT 650 24TH STREET SAN DIEGO, CA 92102 3,000. RADY CHILDREN'S HOSPITAL FOUNDATION NONE PUBLIC CHARITY GENERAL SUPPORT 140 VALPARAISO AVE ATHERTON, CA 94027 4,000. SACRED HEART NATIVITY SCHOOL SAN JOSE NONE PUBLIC CHARITY GENERAL SUPPORT 4311 THIRD AVENUE SAN DIEGO, CA 92103 12,000. SAN DIEGO SYMPHONY NONE PUBLIC CHARITY GENERAL SUPPORT 4275 CAMPUS POINT COURT SAN DIEGO, CA 92121 3,000. SCRIPPS HEALTH FOUNDATION NONE PUBLIC CHARITY GENERAL SUPPORT 10550 NORTH TORREY PINES CT LA JOLLA, CA 92037 2,500. SCRIPPS RESEARCH INSTITUTE NONE PUBLIC CHARITY GENERAL SUPPORT 4822 DEL MAR AVENUE SAN DIEGO, CA 92107 5,000. SOCIETY OF SACRED HEART MINISTRY NONE PUBLIC CHARITY GENERAL SUPPORT CENTER 150 VALPARAISO AVE ATHERTON, CA 94027 15,000. SOCIETY OF SACRED HEART OAKWOOD NONE PUBLIC CHARITY GENERAL SUPPORT & P.O. BOX 712545 SCHOLARSHIP SAN DIEGO, CA 92171 5,000. SOCIETY OF SACRED HEART UGANDA/KENYA NONE CHURCH GENERAL SUPPORT SCHOOLS 1210 GOVERNOR NICHOLLS STREET NEW ORLEANS, LA 70116 15,000. SOCIETY OF SACRED HEART UGANDA/KENYA NONE CHURCH GENERAL SUPPORT SCHOOLS 1210 GOVERNOR NICHOLLS STREET NEW ORLEANS, LA 70116 4,000. Total from continuation sheets

Part XV -Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to contribution Amount any foundation manager status of Name and address (home or business) or substantial contributor recipient ST. JUDE SCHOOL SOBOBA INDIAN NONE PUBLIC CHARITY SCHOLARSHIPS & REPAIRS RESERVATION 2119 EAST MADISON AVE EL CAJON, CA 92019 1,000. ST. MADELEINE SOPHIE'S CENTER NONE PUBLIC CHARITY GENERAL SUPPORT 675 41ST STREET 10,000. OAKLAND, CA 94609 ST. MARTIN DE PORRES SCHOOL OAKLAND NONE PUBLIC CHARITY GENERAL SUPPORT 675 41ST STREET OAKLAND, CA 94609 10,000. ST. MARTIN DE PORRES SCHOOL OAKLAND NONE PUBLIC CHARITY GENERAL SUPPORT 675 41ST STREET OAKLAND, CA 94609 1,000. ST. MARTIN DE PORRES SCHOOL OAKLAND PUBLIC CHARITY GENERAL SUPPORT NONE 675 41ST STREET OAKLAND, CA 94609 500. ST. VINCENT DE PAUL VILLAGE NONE CHURCH GENERAL SUPPORT 1501 IMPERIAL AVENUE SAN DIEGO, CA 92101 3,000. ST. VINCENT DE PAUL VILLAGE NONE CHURCH GENERAL SUPPORT 1501 IMPERIAL AVENUE SAN DIEGO CA 92101 1,000. THE SALVATION ARMY NONE PUBLIC CHARITY GENERAL SUPPORT 2130 FULTON STREET SAN FRANCISCO, CA 94117 3,000. UNIVERSITY OF SAN FRANCISCO NONE PUBLIC CHARITY GENERAL SUPPORT P.O. BOX 120551 SAN DIEGO, CA 92112 25,000. WHISPERING WINDS NONE PUBLIC CHARITY GENERAL SUPPORT 8186 COMMERCIAL STREET LA MESA, CA 91942 500. Total from continuation sheets

| Part XV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) Property Supplementary Information | | | | | | | | |
|---|--|---|----------------------------------|--------|--|--|--|--|
| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation | Purpose of grant or contribution | Amount | | | | |
| Name and address (home or business) | any foundation manager or substantial contributor | status of recipient | CONTIDUTION | Amount | | | | |
| | | | | | | | | |
| OOLOGICAL SOCIETY OF SAN DIEGO .O. BOX 120551 | NONE | PUBLIC CHARITY | GENERAL SUPPORT | | | | | |
| AN DIEGO, CA 92112 | | | | 100,00 | | | | |
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| Total from continuation sheets | | <u>, , , , , , , , , , , , , , , , , , , </u> | <u> </u> | | | | | |

| FORM 990-PF INTERE | ST ON SAVING | S AND T | EMPOR | ARY C | ASH I | NVES | TMENTS | ST | ATEMENT | 1 |
|--|--------------------|-------------------------|--------------------------------|----------------------|---------------------------------|--------------------|------------------------------|-------------------|------------------------------|---|
| SOURCE | | | (A) REVENUE NE PER BOOKS | | (B) NET INVESTMENT INCOME | | (C) ADJUSTED NET INCOM | | ₹. | |
| CHARLES SCHWAB | | | | 6. | | | 6. | _ | , | |
| TOTAL TO PART I, LI | NE 3 | | | 6. | | | 6. | | | |
| FORM 990-PF | DIVIDENDS | AND INT | EREST | FROM | SECU | JRITI | ES | ST | ATEMENT | 2 |
| SOURCE | GROSS AMOUNT | CAPIT GAIN DIVIDE | IS | REV | A) ENUE BOOKS | | (B) T INVES NT INCO | | (C) ADJUSTI NET INCO | |
| BANK OF NEW YORK BANK OF NEW YORK BANK OF NEW YORK - | 64,859. 91,279. | | 0. | | 4,859 1,279 | | 64,85 91,27 | | | |
| MUNICIPAL BOND INTEREST FROM K-1 RHJ | 6,000. | | 0. | | 6,000 | | | 0. | | |
| PARAMO FUND, LP | 7,191. | | 0. | | 7,191 | · • | 7,19 | 1. — - | <u> </u> | |
| TO PART I, LINE 4 | 169,329. | | 0. | 16 | 9,329 |) . = == | 163,32 | 9 . — = | | |
| FORM 990-PF | | OTHER | INCO | ME | | | | ST | ATEMENT | 3 |
| DESCRIPTION | | | RE | (A) VENUE BOOK | | NET | (B) INVEST- INCOME | | (C) ADJUSTEI NET INCON | |
| FROM K-1 RHJ PARAMO | FUND, LP | | | -19, | 034. | | -19,034 | • | | |
| TOTAL TO FORM 990-P | F, PART I, I | LINE 11 | · | -19, | 034. | | -19,034 | | - | |

| FORM 990-PF | ACCOUNTI | NG FEES | S | TATEMENT 4 |
|---|----------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| ACCOUNTING | 7,000. | 3,500. | | 3,500. |
| TO FORM 990-PF, PG 1, LN 16B | 7,000. | 3,500. | | 3,500. |
| FORM 990-PF (| OTHER PROFES | SIONAL FEES | S | TATEMENT 5 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| INVESTMENT MANAGEMENT FEES CUSTODIAN FEE | 54,082. 8,775. | | | 0. |
| TO FORM 990-PF, PG 1, LN 16C | 62,857. | 62,857. | | 0. |
| FORM 990-PF | TAX | ES | S | TATEMENT 6 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| EXCISE TAX FRANCHISE TAX BOARD FOREIGN TAX PAID PAYROLL TAXES | 30,000. 10. 365. 8,451. | 0. 365. | | 0. 10. 0. 4,225. |
| TO FORM 990-PF, PG 1, LN 18 | 38,826. | 4,591. | | 4,235. |

8

STATEMENT

| FORM 990-PF | OTHER E | XPENSES | STATEMENT 7 | | | |
|--|---|---|-------------------------------|--|--|--|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | | |
| OFFICE EXPENSE BANK FEES FILING FEES FROM K-1 PARAMO FUND LP INSURANCE PAYROLL FEES SUPPLIES | 17. 242. 75. 7,207. 33,342. 1,026. 375. | 121. 0. 7,207. 16,671. 513. | | 9. 121. 75. 0. 16,671. 513. 187. | | |
| TO FORM 990-PF, PG 1, LN 23 | 42,284. | 24,708. | | 17,576. | | |

FOOTNOTES

FORM 990-PF, PART VII-B, QUESTION 1(A)(4)

COMPENSATION OR REIMBURSED EXPENSES PAID TO A DISQUALIFIED PERSON

THE FOUNDATION COMPENSATED BARBARA MENARD AND MARCEL MENARD FOR THEIR WORK FOR THE FOUNDATION. COMPENSATION WAS BASED ON SALARY SURVEYS FOR SIMILARLY SIZED ORGANIZATIONS AND WAS DETERMINED TO BE REASONABLE BY THE TRUSTEES. THIS IS AN EXCEPTED ACT OF SELF-DEALING UNDER IRC SECTION 4941(D)(2)(C).

| FORM 990-PF . U.S. AND STATE/CITY GOVERNMEN | T OBLIGATIONS | STATEMENT 9 |
|--|---------------|----------------------|
| DESCRIPTION GOV'T GOV'T | | FAIR MARKET VALUE |
| MUNICIPAL GOVERNMENT OBLIGATIONS X | 147,168. | 152,300. |
| TOTAL U.S. GOVERNMENT OBLIGATIONS | | |
| TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS | 147,168. | 152,300. |
| TOTAL TO FORM 990-PF, PART II, LINE 10A | 147,168. | 152,300. |
| FORM 990-PF CORPORATE STOCK | | STATEMENT 10 |
| DESCRIPTION | BOOK VALUE | FAIR MARKET VALUE |
| CORPORATE STOCK | 8,091,714. | 12,943,131. |
| TOTAL TO FORM 990-PF, PART II, LINE 10B | 8,091,714. | 12,943,131. |
| FORM 990-PF CORPORATE BONDS | | STATEMENT 11 |
| DESCRIPTION | BOOK VALUE | FAIR MARKET VALUE |
| CORPORATE BONDS | 387,180. | 384,005. |
| TOTAL TO FORM 990-PF, PART II, LINE 10C | 387,180. | 384,005. |
| FORM 990-PF OTHER INVESTMENTS | , | STATEMENT 12 |
| VALUATION DESCRIPTION METHOD | BOOK VALUE | FAIR MARKET VALUE |
| LIMITED PARTNERSHIPS COST | 1,041,528. | 1,094,515. |
| LIMITED FARTNERSHIPS COST | | |

| FORM 990-PF. | DEPRECIATION | OF A | SSETS N | OT HELD | FOR | INVESTMENT | STATEMENT | 13 |
|----------------------------------|---------------|-------|---------|-------------------|-------------------|-----------------------------|-----------|----------------|
| DESCRIPTION | | | _ | OST OR ER BASI | S | ACCUMULATED DEPRECIATION | BOOK VALU | E |
| FURNITURE COMPUTER PRINTER | | | | 2,1 | 10. 30. 61. | 1,110. 2,130. 261. | | 0. 0. 0. |
| TOTAL TO FM 9 | 90-PF, PART I | I, LN | 14 | 3,5 | 01. | 3,501. | | 0. |

2013 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF PAGE 1

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| Current Year Deduction | 0. | 0 | 0 | 0 | | | | | | | | | |
|-----------------------------|-----------------|-----------------|---------------------------------|----------------|---|--|------|-----|-------------|-------------|------|---|----------------|
| Current Sec 179 | | | | 0 | - | | · | | | | | | |
| Accumulated Depreciation | 1,110. | 2,130. | 261. | 3,501. | | | | | | | | | |
| Basis For Depreciation | 1,110. | 2,130. | 261. | 3,501. | | | | | | | | | |
| Reduction In Basis | | | | 0 | | | | | | | | | |
| Bus % Excl | | <u></u> | | | | | | | | | • | | |
| Unadjusted Cost Or Basis | 1,110. | 2,130. | 261. | 3,501. | | | | | | | | | |
| No | 17 | 17 | 17 | | | | | | | | | | |
| Lıfe | _ | _ | _ | | | | | | | | | | |
| Method | 200DB | 200DB | 200DB | | | | | | | • | | • | ••• |
| Date Acquired | 090705200DB7.00 | 122706200DB5.00 | 111206200DB5.00 | | | | | | | | | - | |
| Description | 1FURNITURE | 2COMPUTER 1 | 3PRINTER * TOTAL 990-PF PG 1 | 9 11 000 | | | | | | | | | |
| Asset | ਜ | 2 | m | - - | | | | . — | _ | | | | |
| | | | | | | | | | | | | | |

⁽D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

| Form 8868 (Rev 1-2014) | | | | | Page 2 | | | |
|---|--------------------|--|-------------|------------|---------------------------------------|--|--|--|
| If you are filing for an Additional (Not Automatic) 3-Month Ex | tension, | complete only Part II and check this | box | | ▶ X | | | |
| Note. Only complete Part II if you have already been granted an a | automatic | 3-month extension on a previously fi | ed Form | 8868 | | | | |
| If you are filing for an Automatic 3-Month Extension, comple | | | | | | | | |
| Part II Additional (Not Automatic) 3-Month E | xtensio | n of Time. Only file the origin | al (no c | opies n | eeded). | | | |
| | | Enter filer's | identıfyı | ng numb | er, see instructions | | | |
| Type or Name of exempt organization or other filer, see instru | Employe | Employer identification number (EIN) or | | | | | | |
| print MENARD FAMILY FOUNDATION | | | | | | | | |
| File by the C/O LINDSAY & BROWNELL, LLP | | | | 33-0 | 0834790 | | | |
| due date for filing your | ee instruc | tions | Social se | curity nu | mber (SSN) | | | |
| return See 4225 EXECUTIVE SQUARE, SUITE | E 115 | 0 | | | | | | |
| Instructions City, town or post office, state, and ZIP code For a fo | oreign add | fress, see instructions | | | | | | |
| LA JOLLA, CA 92037 | | | | | | | | |
| | | | | | | | | |
| Enter the Return code for the return that this application is for (file | e a separa | te application for each return) | | | 0 4 | | | |
| | ····· | | | | | | | |
| Application | Return | Application | | | Return | | | |
| ls For | Code | Is For | | | Code | | | |
| Form 990 or Form 990-EZ | 01 | | | | | | | |
| Form 990-BL | 02 | Form 1041-A | | | | | | |
| Form 4720 (individual) | 03 | Form 4720 (other than individual) | | | 09 | | | |
| Form 990-PF | 04 | Form 5227 | | | | | | |
| Form 990-T (sec 401(a) or 408(a) trust) | 05 | Form 6069 | | | 11 | | | |
| Form 990-T (trust other than above) | 06 | Form 8870 | | | 12 | | | |
| STOP! Do not complete Part II if you were not already granted | | | ously file | ed Form 8 | 3868 | | | |
| LINDSAY AND BRO | | | | | | | | |
| The books are in the care of ► 4225 EXECUTIVE | SQUA | | | LA, (| CA 92037 | | | |
| Telephone No ▶ <u>(858) 558-9200</u> | | Fax No ▶ <u>(858) 558-8</u> | 3225 | | - | | | |
| If the organization does not have an office or place of business | | | | | | | | |
| If this is for a Group Return, enter the organization's four digit (| • | | | | | | | |
| box ▶ ☐ If it is for part of the group, check this box ▶ ☐ | | ich a list with the names and EINs of | all memb | ers the e | xtension is for | | | |
| | NOVEM | BER 15, 2014 | | | | | | |
| 5 For calendar year 2013, or other tax year beginning | | , and ending | <u> </u> | | · ··· · · · · · · · · · · · · · · · · | | | |
| 6 If the tax year entered in line 5 is for less than 12 months, cl | heck reas | on Initial return | Final r | eturn | | | | |
| Change in accounting period | | | | | | | | |
| 7 State in detail why you need the extension | | | | | | | | |
| ADDITIONAL TIME IS REQUIRED TO | | HER THE INFORMATION | NEC | ESSA | RY TO FILE | | | |
| A COMPLETE AND ACCURATE RETURN | 1. | | | | | | | |
| | | | | | | | | |
| 8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, | or 6069, | enter the tentative tax, less any | | | | | | |
| nonrefundable credits See instructions | | | 8a | \$ | 0. | | | |
| b If this application is for Forms 990-PF, 990-T, 4720, or 6069 | | | | | | | | |
| tax payments made Include any prior year overpayment all | owed as a | a credit and any amount paid | <u> </u> | - | 26.600 | | | |
| previously with Form 8868 | | | 8b | \$ | 36,698. | | | |
| Balance due. Subtract line 8b from line 8a Include your pa | = | h this form, if required, by using | | 1 | • | | | |
| EFTPS (Electronic Federal Tax Payment System) See instru | | | <u> 8c</u> | \$ | 0. | | | |
| _ | | st be completed for Part II o | - | | dadas and hall f | | | |
| Under penalties of perjury, I declare that I have examined this form, includi it is true, correct, and complete, and that I am authorized to prepare this fo | ing accomp irm. | panying schedules and statements, and to | the best o | it my know | rieage and belief, | | | |
| | | | D-: | | | | | |
| Signature ► Title ► C | _PA | ·· ···· | Date | | m 8969 (Pov. 1 2014) | | | |