

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990-PF Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

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.

OMB No 1545-0052

For calendar year 2013 or tax year beginning , and ending													
								ridentification	number				
MAOR FOUNDATION								1645906	;				
Number and street (or P O box number if mail is not delivered to street address) Room/suite								B Telephone number					
_	7701 FORSYTH BLVD 600							314-727-5550					
-			own, state or province, country, and ZIP or foreign $_{ m I}$	postal code	_		C If exemption	n application is p	pending, check here				
G			all that apply Initial return	initial return of a fo	ormer public charity		D 1. Foreign	n organizations	s check here				
			Final return	Amended return	, , , , , , , , , , , , , , , , , , ,			•					
_			Address change	Name change			2. Foreign check h	organizations me ere and attach or	eeting the 85% test, pmputation				
Н	Ch	eck	type of organization X Section 501(c)(3) e	xempt private foundation			E If private	foundation sta	tus was terminated				
_[Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation)(A), check here				
f			irket value of all assets at end of year 🚺 Account	•	Accrual		F If the four	idation is in a	60-month termination				
				ther (specify)	.		under sec	tion 507(b)(1))(B), check here				
Г		_	9,505,937. (Part I, cold				-		1 (4) -				
_	Par	<u>T I</u>	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investme income	nt		usted net ome	(d) Disbursements for chantable purposes (cash basis only)				
	1	1	Contributions, gifts, grants, etc., received	1,766,108.			N/	A					
		2	Check If the foundation is not required to attach Sch B										
		3	Interest on savings and temporary cash investments	528.		28.			STATEMENT 1				
		4	Dividends and interest from securities	84,864.	84,8	64.			STATEMENT 2				
	-		Gross rents				<u> </u>						
		_	Net rental income or (loss)	145,481.		***	<u> </u>	-,					
	ğ	va h	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 8a 145,481.	113,101.			¥+	***************************************	FNZEI				
	Revenue	7	assets on line 6a 143, 401. Capital gain net income (from Part IV, line 2)	· · · · · · · · · · · · · · · · · · ·	145,4	81.		1 11 11	19				
	œ	8	Net short-term capital gain				1		lõi				
	1	9	Income modifications	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			;	VC.6	1 9 2019 125				
	-	I O a	Gross sales less returns and allowances				,		,				
, >			Less Cost of goods sold			·		OGD	EN. UI				
<u>.</u>		C	Gross profit or (loss)										
3		11	Other income	1 006 001	220								
	-	12	Total Add lines 1 through 11	1,996,981.	230,8								
		3	Compensation of officers, directors, trustees, etc	J		0.			0.				
		14 15	Other employee salaries and wages Pension plans, employee benefits				<u> </u>						
	S		Legal fees										
	e l		Accounting fees				<u> </u>						
	Expense		Other professional fees			_							
	ا څ		Interest										
	ta .	8	Taxes STMT 3	5,000.		0.			0.				
	is.	19	Depreciation and depletion										
	וס	20	Occupancy						<u> </u>				
	غ قٍ		Travel, conferences, and meetings										
	a a		Printing and publications				<u> </u>						
	֓֞֝֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֞֜֞֜֓֓֓֓֓֓֡֡֡֡֝֡֡֡֝֡֡֝֡֡֡֡֡֝֡֡֡֡֡֝֡֡֡֝֡֡֡֡֝֡֡֝		Other expenses				<u> </u>						
	Operating	. 4	Total operating and administrative expenses. Add lines 13 through 23	5,000.		0.			0.				
	ة ة	25	Contributions, gifts, grants paid	307,700.				·····	307,700.				
	,		Total expenses and disbursements.			·····							
			Add lines 24 and 25	312,700.		0.	<u></u>		307,700.				
	2	27	Subtract line 26 from line 12										
		а	Excess of revenue over expenses and disbursements	1,684,281.			·····						
			Net investment income (if negative, enter -0-)		230,8	/3.		, <u></u>					
		C	Adjusted net income (if negative, enter -0-)				N/	Α	1				

323501 10-10-13 LHA For Paperwork Reduction Act Notice, see Instructions

Form **990-PF** (2013)

42-1645906 MAOR FOUNDATION Page 2 Form 990-PF (2013) Beginning of year End of year Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (c) Fair Market Value (a) Book Value (b) Book Value Cash - non-interest-bearing 5,331,276. 5,029,904. 5,029,904. 2 Savings and temporary cash investments 3 Accounts receivable ► Less allowance for doubtful accounts 4 Pledges receivable ► Less allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations 4,476,033. 4,236,244. 2,250,591. STMT 4 b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated denreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation 15 Other assets (describe ► 16 Total assets (to be completed by all filers - see the 7,581,867. 9,266,148. 9,505,937. instructions Also, see page 1, item 1) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0. 0. 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. or Fund Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted $\triangleright X$ Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 1,003,534. 1,003,534 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 6,578,333. 8,262,614 29 Retained earnings, accumulated income, endowment, or other funds 9,266,148. 7,581,867. 30 Total net assets or fund balances 9,266,148 7,581,867. 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
1	(must agree with end-of-year figure reported on prior year's return)	1	7,581,867.
		1	1,684,281.
2	Enter amount from Part I, line 27a		1,004,201.
3	Other increases not included in line 2 (itemize)	3	0.
	Add lines 1, 2, and 3	4	9,266,148.
	Decreases not included in line 2 (itemize)	5	<u> </u>
	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	9,266,148.
<u>~</u>	Total not assets of tone salamose stone of year time		- 000 DE

Form **990-PF** (2013)

Part IV Capital Gains a	nd Losses for Tax on In	vestment	Income					
	 (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.) 						acquired day, yr)	(d) Date sold (mo , day, yr)
1a CAPITAL GAINS D	IVIDENDS							
_b						_		
<u> </u>								
<u>d</u>								
<u>e</u>	(f) Depreciation allowed	(a) Coc	t or other basis			(b) (ain or (loss	<u> </u>
(e) Gross sales price	(or allowable)		kpense of sale				s (f) minus (
a 145,481.								145,481
b	-							
С						_		
d				_				
e		h - 4 d - 4	10/01/60	- -				
Complete only for assets snowing	gain in column (h) and owned by the						Col (h) gain not less thai	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	V. ,	cess of col (i) col (j), if any				(from col (
a			3,,, - ,					145,481
b								
C				-				
d								
e								
2 Capital gain net income or (net capi	ital loss) { If gain, also enter if (loss), enter -0-	in Part I, line 7	, 7	} 2				145,481
3 Net short-term capital gain or (loss			•	<i>_</i>				
If gain, also enter in Part I, line 8, co		u (0)]				
If (loss), enter -0- in Part I, line 8				<u> </u>			<u> N/A</u>	
	der Section 4940(e) for			-	tment In	come		
(For optional use by domestic private f	oundations subject to the section 4	1940(a) tax on	net investment ind	come)				
If section 4940(d)(2) applies, leave this	s part blank							
Was the foundation liable for the section	on 4942 tay on the distributable am	ount of any ve	ar in the hase neri	ınd?				Yes X No
If "Yes," the foundation does not qualify			•					
1 Enter the appropriate amount in ea				ntries				
(a) Base period years	(b)			(c)			Distrib	(d) oution ratio
Calendar year (or tax year beginning			Net value of nor					rided by col (c))
2012		7,480.			52,11			.03708
2011		5,150. 4,000.		7,5	91,68	3 •		.03693
2010 2009		6,837.		3,5	25,51	-		.10137
2008		2,789.			56,48			.06826
		<u> </u>			<u> </u>			
2 Total of line 1, column (d)						2		.31237
3 Average distribution ratio for the 5-	year base period - divide the total o	n line 2 by 5,	or by the number	of years				
the foundation has been in existenc	e if less than 5 years					3		.06247
								~
4 Enter the net value of noncharitable	-use assets for 2013 from Part X, I	ine 5				4		7,782,576
								406 216
5 Multiply line 4 by line 3						5	ļ <u>-</u>	486,216
E Fater 19/ of not investment income	(19/ of Bort Line 27h)							2,309
6 Enter 1% of net investment income	(170 UI Fail I, IIIIE 270)					6	 	2,309
7 Add lines 5 and 6						7	ł	488,525
							†	
8 Enter qualifying distributions from	Part XII, line 4					8	<u> </u>	307,700
If line 8 is equal to or greater than li See the Part VI instructions	ne 7, check the box in Part VI, line	1b, and comp	ete that part using	g a 1% t	ax rate			

orm			16459			Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4)48	- see ir	stru	ctior	ıs)
	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%	1	ļ		1,6	17.
	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)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2				0.
3	Add lines 1 and 2	_3_			1,6	17.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	_4_	Ļ			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	_ 5	ļ		1,6	17.
6	Credits/Payments					
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 5,797.					
b	Exempt foreign organizations - tax withheld at source					
C	Tax paid with application for extension of time to file (Form 8868) 6c 20,000.					
d	Backup withholding erroneously withheld 6d 6d			٠.		
	Total credits and payments Add lines 6a through 6d	7		2	7,7	<u>97.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	ļ			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	ļ			
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10_	ļ	2.	L, 1	80.
	Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ 21,180. Refunded ▶	11	<u> </u>			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	ın	-		Yes	
	any political campaign?			1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)		ļ	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or	-	ļ		
	distributed by the foundation in connection with the activities.			-	- 1	
	Did the foundation file Form 1120-POL for this year?			10		<u>X</u>
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.			ļ		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		İ			
	managers ►\$O.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities					ı
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, o	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		}	3_		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		7/3	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	IN	I/A	4b		- 17
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		}	5		X
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
	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			v	ĺ
	remain in the governing instrument?		ŀ	<u>6</u>	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	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	MO					İ
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		ļ	٠.	v	ĺ
	of each state as required by General Instruction G? If "No," attach explanation			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 cale	ndar	ŀ			v
	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 persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses			_10_ n 990	DE	
			rorn	ココプ	-rr(∠UI3)

Form 990-PF (2013) MAOR FOUNDATION			42-16459	06 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to	4045(-)\0		[v]	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section		_	es X No	
(2) Influence the outcome of any specific public election (see section 4955),	or to carry on, directly or indir		es X No	
any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purpose:	. 2		es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization			S ZZ NU	
509(a)(1), (2), or (3), or section 4940(d)(2)?	Jii described iii section		s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	or educational nurnoses, or		,3 (22) 110	
the prevention of cruelty to children or animals?	, or obdotational purposso, or		es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described			
section 53 4945 or in a current notice regarding disaster assistance (see instri		•	N/A	5b
Organizations relying on a current notice regarding disaster assistance check	here		▶ □	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption	from the tax because it mainta	ined		
expenditure responsibility for the grant?	N	1/A 🔲 Ye	es 🔲 No	
If "Yes," attach the statement required by Regulations section 53.494	15-5(d)			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Y6	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.			(.	
7a At any time during the tax year, was the foundation a party to a prohibited tax		Y6	es X No N/A	
Part VIII Information About Officers, Directors, Trust		nogoro Highl		7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	iees, roundation wa	magers, nigni	,	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	to position	enter -0-)	compensation	allowances
CHERYL ANN FOX 7701 FORSYTH BLVD	TRUSTEE			
CLAYTON MO 63105	1.00	0.	0.	0.
AVIGAIL GOLDGRABER	TRUSTEE		0.	<u> </u>
7701 FORSYTH BLVD	TROBILE			
CLAYTON MO 63105	0.50	0.	0.	0.
				'
			L	<u></u>
2 Compensation of five highest-paid employees (other than those in	(b) Title, and average	enter "NONE."	(d) Contributions to	(a) Evacase
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deterred compensation	(e) Expense account, other allowances
NONE				
		<u> </u>		
			!	
		<u> </u>		
	4			
		 		
	-	1		
Total number of other employees paid over \$50,000	<u> </u>	<u> </u>		0
ι Ο ιστ παιτιώσε οι οιτίσε στεριογόσου ραίο ονό <u>ε φ</u> ου,υου				

Paid Employees, and Contractors (continued) If live highest-paid independent contractors for professional services. If none, enter "NONE." (a) Warms and address of each person paid more than \$50,000 (b) Type of service NONE (c) Compensation NONE (d) Compensation NONE (e) Compensation NONE (e) Compensation NONE (folial number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activites during the tax year include relevant statistical information such as the number of originations and other beneficiaries served, conferences convened, research papers produced, etc. N/A Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 N/A Amount All other program-related investments See instructions	Form 990-PF (2013) MAOR FOUNDATION 4:	2-1645906 Page 7
(e) Compensation NONE **Cotal number of others receiving over \$50,000 for professional services Part IX-8 Summary of Direct Charitable Activities Ust the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc N/A **Part IX-8 Summary of Program-Related Investments Describe the voltagest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount N/A **All other program-related investments See instructions** **Investments See instructions** **Total. Add lines 1 through 3 **Describe the transport of Program-Related Investments See instructions** **Total. Add lines 1 through 3 **Describe the transport of Program-Related Investments See instructions** **Total. Add lines 1 through 3	Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	
NONE Total number of others receiving over \$50,000 for professional services Part IX-B Summary of Direct Charitable Activities	3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	
Part IX-B Summary of Direct Charitable Activities Ust the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc N/A Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments. See instructions All other program-related investments. See instructions Cotal, Add lines 1 through 3		(c) Compensation
Part IX-B Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc N/A Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount N/A All other program-related investments See instructions Fotal. Add lines 1 through 3	NONE	
Part IX-B Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc N/A Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount N/A All other program-related investments See instructions Fotal. Add lines 1 through 3		
Part IX-B Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc N/A Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount N/A All other program-related investments See instructions Fotal. Add lines 1 through 3		
Part IX-B Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc N/A Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount N/A All other program-related investments See instructions Fotal. Add lines 1 through 3		
Part IX-B Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc N/A Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount N/A All other program-related investments See instructions Fotal. Add lines 1 through 3	Total number of others receiving over \$50,000 for professional services	▶ 0
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc N/A Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount N/A All other program-related investments See instructions Fotal. Add lines 1 through 3		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount N/A All other program-related investments See instructions	List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount N/A All other program-related investments See instructions Fotal. Add lines 1 through 3	1 <u>N/A</u>	
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 N/A All other program-related investments See instructions Fotal. Add lines 1 through 3	2	
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 N/A All other program-related investments See instructions Fotal. Add lines 1 through 3		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 N/A All other program-related investments See instructions Fotal. Add lines 1 through 3	3	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 N/A All other program-related investments See instructions Fotal. Add lines 1 through 3	4	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 N/A All other program-related investments See instructions Fotal. Add lines 1 through 3	Part IX-B Summary of Program-Related Investments	
All other program-related investments. See instructions Fotal. Add lines 1 through 3	Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
All other program-related investments. See instructions Fotal. Add lines 1 through 3	1 <u>N/A</u>	
Fotal. Add lines 1 through 3	2	
Fotal. Add lines 1 through 3		
	All other program-related investments. See instructions 3	
	Total. Add lines 1 through 3	Form 990-PF (2013

For	m 990-PF (2013) MAOR FOUNDATION		42-1043	906	Page 8
P	Minimum Investment Return (All domestic foundations must	st complete this part. Foreign four	ndations, see inst	ructions)	
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 7	,901,	092.
b	Average of monthly cash balances		1b		
	Fair market value of all other assets		10		
d	Total (add lines 1a, b, and c)		1d 7	,901,	092.
	Reduction claimed for blockage or other factors reported on lines 1a and				
_	1c (attach detailed explanation)	e 0.			
2	Acquisition indebtedness applicable to line 1 assets		2		0.
3	Subtract line 2 from line 1d		3 7	7,901,	092.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, se	ee instructions)	4	118,	516.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on P		5 7	7,782,	576.
6	Minimum investment return Enter 5% of line 5	· · · · · · · · · · · · · · · · · · ·	6	389,	129.
P	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and foreign organizations check here	(j)(5) private operating foundations ar	id certain		
1	Minimum investment return from Part X, line 6		1	389,	129.
2a	Tax on investment income for 2013 from Part VI, line 5	a 4,617.			
b	Income tax for 2013 (This does not include the tax from Part VI)	b			
C	Add lines 2a and 2b		2c	4,	617. 512.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	<u>384,</u>	
4	Recoveries of amounts treated as qualifying distributions		4		0.
5	Add lines 3 and 4		5	384,	512.
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 XI	II, line 1	7	384,	512.
P	Part XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpor	ses			
а			1a	<u> </u>	<u>,700.</u>
b	and the second s		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			3a		
	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	307,	,700.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investigations.				_
	income Enter 1% of Part I, line 27b		5		0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6		,700.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years who 4940(e) reduction of tax in those years	en calculating whether the foundation	qualifies for the sec	tion	

Form **990-PF** (2013)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI,				
line 7	***************************************	<u> </u>	 	384,512.
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only	11 '', 1-4 1-1' 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		0.	that are a control of oil of
b Total for prior years		0.		
· · · · · · · · · · · · · · · · · ·	DI 1946-1	<u> </u>	. ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	
3 Excess distributions carryover, if any, to 2013				
a From 2008 b From 2009 48,743. 162,287.				
CE (02				
d From 2011 e From 2012				
f Total of lines 3a through e	276,637.			
4 Qualifying distributions for 2013 from	2,0,00.			······································
Part XII, line 4 ►\$ 307,700.				
a Applied to 2012, but not more than line 2a			0.	
b Applied to undistributed income of prior	· · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	1-11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	· // . I			
(Election required - see instructions)	0.			114
d Applied to 2013 distributable amount	., ., ., ., ., ., ., ., ., ., ., ., ., .			307,700.
e Remaining amount distributed out of corpus	0.		1.11.1	
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a))	76,812.			76,812.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	199,825.			
b Prior years' undistributed income Subtract	·	****		
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
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		,, lett		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	0.			
not applied on line 5 or line 7				
9 Excess distributions carryover to 2014	199,825.			
Subtract lines 7 and 8 from line 6a	1777023.		<u> </u>	
10 Analysis of line 9 a Excess from 2009 134,218.				
a Excess from 2009 b Excess from 2010 b Excess from 2010 65,607.				
c Excess from 2010				
d Excess from 2012				
e Excess from 2013				
G EAGGGG TIGHT EG TO	· · · · · · · · · · · · · · · · · · ·			Form 990-PF (2013)

Part XIV Private Operating Fo	oundations (see ins	tructions and Part VII	A, question 9)	N/A	43300 Tago 10
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for			.		
b Check box to indicate whether the found	•	=	n section	4942(J)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	g roundation dosonious ii	Prior 3 years		
income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
investment return from Part X for				, ,	<u> </u>
each year listed b 85% of line 2a					
					
c Qualifying distributions from Part XII,					
line 4 for each year listed d Amounts included in line 2c not		-			
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 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)					
(3) Largest amount of support from					
an exempt organization		<u></u> .			<u></u>
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	had \$5,000 or mo	ore in assets
at any time during t	he year-see instr	uctions.)			
1 Information Regarding Foundatio	_				
a List any managers of the foundation wh	o have contributed more t	than 2% of the total cont	ributions received by the	foundation before the clos	se of any tax
year (but only if they have contributed in	iore man \$5,000) (See Se	sction 507(a)(2))			
CHERYL ANN FOX					
b List any managers of the foundation wh other entity) of which the foundation has			or an equally large portion	on of the ownership of a pa	artnership or
• •	s a 10 % of greater interes	•			
NONE	O O:# 1	Cabalarahin ata Da			
2 Information Regarding Contribution Check here In the foundation of the foundation makes gifts, grants, etc.	nly makes contributions t	o preselected charitable	organizations and does n	ot accept unsolicited requ	ests for funds If
a The name, address, and telephone num $CHERYL\ FOX,\ 314-889-$	O S O C M M O C O C C C C C C C C C C C C C	ne person to whom appil FOXFAMTT.VOF	CAUDIIS SITUUIU DE AUDIES	SOU	
7701 FORSYTH BLVD SU					
b The form in which applications should be SEE ATTACHED GRANT A					
c Any submission deadlines	T D T O T T			<u></u> .	
, 50555i0ii 6000i00					
d Any restrictions or limitations on awards	s, such as by geographica	il areas, charitable fields,	kinds of institutions, or o	other factors	
•					
					Form 990-PF (2013
323601 10-10-13					- ruiiii 330"FF (2013

3 Grants and Contributions Paid During the		Pavment		
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
		:		
SEE ATTACHED LIST				
				307,700.
			,	
)		
				·
Total		L	▶ 3a	307,700.
b Approved for future payment				
NONE				
NONE				
				
	 			
Total			▶ 3b	0.

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income			ed by section 512, 513, or 514	(e)
-	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue	code		code		
a					
b	ļ				
C					
d		<u> </u>	-		
e	<u> </u>			···	
1	ļ. 				
g Fees and contracts from government agencies			ļ <u>ļ</u>		
2 Membership dues and assessments					
3 Interest on savings and temporary cash	i l				
investments			14	528.	·
4 Dividends and interest from securities			14	84,864.	
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			1		
7 Other investment income					
8 Gain or (loss) from sales of assets other		· · · · · · · · · · · · · · · · · · ·			-
than inventory	}		14	145,481.	
9 Net income or (loss) from special events	 		 		
10 Gross profit or (loss) from sales of inventory	 		 -		~
11 Other revenue			 		
	 		 -		
			+		
<u> </u>					
d	l		1		
8		0.	 -	230,873.	0.
12 Subtotal Add columns (b), (d), and (e)	<u> </u>	0.	<u> </u>	13	230,873.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations)				13 <u>—</u>	230,073.
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor the foundation's exempt purposes (other than to	ne is reported ii	n column (e) of Part XVI-A			olishment of
323621 10-10-13					Form 990-PF (2013)

Pai	t XVII	Information Re Exempt Organi		fers To a	and Transactions	and Relation	ships With No	ncharitable	•	
1	Did the o	rganization directly or indire		f the following	g with any other organiza	tion described in sec	ction 501(c) of		Yes	No
		(other than section 501(c)								
		from the reporting founda								
	(1) Cast	•						1a(1)	L _ '	Х
	(2) Othe	r assets						1a(2)		X
b	Other tra	nsactions								
	(1) Sale	s of assets to a noncharitat	ole exempt organizati	on				1b(1)		X
		hases of assets from a non		rganization				1b(2)		X
		al of facilities, equipment, o	or other assets					1b(3)	-	X
	•	nbursement arrangements						1b(4)		X
		is or loan guarantees	mbarahin ar fundraia	ina caliaitatia				1b(5)		X
		ormance of services or mer of facilities, equipment, mai		-				1b(6) 1c		X
	-	wer to any of the above is '	-		•	always show the fair	market value of the o		ets	
	or servic	es given by the reporting fo	oundation. If the foun	dation receive					,010,	
		d) the value of the goods, o			avamet arganization	(4) 0				
(a) ∟ı	1е по	(b) Amount involved	(c) Name of	N/A	exempt organization	(u) Description	on of transfers, transaction	ons, and sharing ar	rangeme	ents
				IV/ A						
	_									
	_									
							1			
				 						
										
	-+						- 			
	 Is the for		lv affiliated with or re	elated to one	or more tax-exempt orga	nizations described		**		
		n 501(c) of the Code (other	-					Yes	X	No
		complete the following sche		, ,						
		(a) Name of org			(b) Type of organization	1	(c) Description of re	elationship		
		N/A								
			_			<u> </u>	 -			
				**						
	Linds	er penalties of penury, I declare	that I have examined this	return, includin	g accompanying schedules at	nd statements, and to the	ne best of my knowledge			
Sig		pelief it is true, correct, and con						May the IRS return with the	e prepar	rer
He	re	Kkirgl G.	(Last)		11.10.14	Trust	<u></u>	shown below X Yes		itr)? No
	 	nature of officer or trustee			Date	Title				
	`	Print/Type preparer's na	ime	Preparer's si		Date	Check X If	PTIN		
Paid JOHN M. HILL HOUSE JOHN MI KOlhouse 1							self- employed			
						10/7/14		P00389		
	parer	11111101101110	N M HILLH	OUSE C	PA LLC		Firm's EIN ► 2	0-03432	29	
Us	e Only	1	4 0 7-00-	aw===	<u> </u>				_	
		Firm's address ► 42			RD SUITE 32	Э	31	1 226 A	560	
		Сн	ESTERFIEL	ש, MO	0301/		Phone no 31	4-336-0		
								Form 99 6	ソーアト	(2013)

323622 10-10-13

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, or 990-PF) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2013

Name of the organization Employer identification number

MAOR FOUNDATION 42-1645906

Organization type (check one)						
Filers of:		Section:				
Form 990 or 990-EZ		501(c)() (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 99	0-PF	X 501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
Note. O	nly a section 501(c)	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions				
General	l Rule					
X	For an organization contributor Comp	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one lete Parts I and II.				
Special	Rules					
	For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II					
	total contributions	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or cruelty to children or animals. Complete Parts I, II, and III.				
	contributions for u If this box is check purpose. Do not c	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 ked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., omplete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions of \$5,000 or more during the year				
but it m	ust answer "No" or	hat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), I Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to It the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization

Employer identification number

MAOR FOUNDATION

42-1645906

IAUR	FOUNDATION	42	-1645906
Part I	Contributors (see instructions). Use duplicate copies of Part I	If additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHERYL FOX 7701 FORSYTH BLVD #600 ST LOUIS, MO 63105	\$ 628,063.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	CHERYL FOX 7701 FORSYTH BLVD #600 ST LOUIS, MO 63105	\$ 420,805.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	CHERYL FOX 7701 FORSYTH BLVD #600 ST LOUIS, MO 63105	\$\$.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	CHERYL FOX 7701 FORSYTH BLVD #600 ST LOUIS, MO 63102	\$ 287,141.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
123452 10.4		\$Schadula R (Form	Person Payroll Complete Part II for noncash contributions 990, 990-EZ, or 990-PF) (2013

Name of organization

Employer identification number

MAOR FOUNDATION

42-1645906

rt II	Noncash Property (see instructions). Use duplicate copies of Part II		-1645906
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_1	7210 SHS AMERICAN EXPRESS	\$\$628,063.	12/20/13
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_2	6140 SHS EXPRESS SCRIPTS HOLDING CO	\$\$\$	12/20/13
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	3040 SHS FED EX CORP	\$\$\$	12/20/13
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	2608 SHS UNITED TECHNOLOGIES CORP	\$\$\$	12/20/13
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_ _ _ _	

Name of organ	nization		Employer identification number					
MAOR FO	OUNDATION Exclusively religious charitable etc. individe	fust contributions to section 501 (c	42-1645906 (7), (8), or (10) organizations that total more than \$1,000 for t					
ran n	year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if additional	following line entry. For organization, contributions of \$1,000 or less for	ons completing Part III, enter r the year (Enter this information once)					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
- -		(e) Transfer of gift	ft					
-	Transferee's name, address, and		Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	(e) Transfer of gift							
-	Transferee's name, address, and		Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
		(e) Transfer of giff	ft					
-	Transferee's name, address, and	d ZIP + 4	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
		(e) Transfer of gift	it .					
-	Transferee's name, address, and		Relationship of transferor to transferee					

FORM 990-PF INTERE	ST ON SAVIN	IGS AND TE	MPOR	ARY CA	ASH IN	VESTMENTS	STATEMEN	т 1
SOURCE	REV	(A) REVENUE NI PER BOOKS		(B) NET INVESTMENT INCOME		(C) ADJUSTED NET INCOME		
JPMORGANCHASE			5	28.	528.			·
TOTAL TO PART I, LI	NE 3		528.		528.			
FORM 990-PF	DIVIDENDS	AND INTE	REST	FROM	SECUR	ITIES	STATEMEN	т 2
SOURCE	GROSS AMOUNT	CAPITA GAINS DIVIDEN		(<i>F</i> REVE PER E	ENUE	(B) NET INVES MENT INCO		STED
JP MORGANCHASE	10,800.		0.	10	,800.	10,80	00.	
TIFF MULTI ASSET FUND	219,545.	145,4	81.	74	1,064.	74,06	54.	
TO PART I, LINE 4	230,345.	145,4	81.	84	864.	84,86	54.	
FORM 990-PF		TA	XES				STATEMEN	т 3
DESCRIPTION		(A) EXPENSES PER BOOKS	NE ME	(B) T INVE	EST- COME	(C) ADJUSTEI NET INCON		TABLE
EXCISE TAX 2012 EXT	ENSION	5,000.		0.				0.
TO FORM 990-PF, PG	1, LN 18 =	5,000	 - =		0.			0.
FORM 990-PF		CORPORA	TE S	TOCK			STATEMEN	т 4
DESCRIPTION					В00	K VALUE	FAIR MAR VALUE	
TIFF MULTI ASSET FU VANGUARD MSCI EMERG AMERICAN EXPRESS EXPRESS SCRIPTS HOI FEDEX CORP UNITED TECHNOLOGIES	GING MKTS					,073,632. 396,504. 628,063. 420,805. 430,099. 287,141.	654 431 437 296	,944. ,163. ,274. ,061. ,790.
TOTAL TO FORM 990-F	F, PART II,	, LINE 10B			4	,236,244.	4,476	,033.

Maor Foundation Schedule of Appropriations & Payments 12/31/2013

Recipient	Foundation Status of Recipient	Purpose of Grant or Contribution	Amount Paid 2013
P E F Israel Endowment Funds Inc 317 Madison Ave, Suite 607, New York, NY 10017	501c(3) Public Charity	Educational	76,300.00
American Friends of Lekat Israel Inc 960 Teaneck Road, Teaneck, NJ 07666	501c(3) Public Charity	Food Bank Support	50,000.00
Tal Torah Foundation 245 W 99th St. Apt 8B, New York, NY 10025	501c(3) Public Charity	Educational	50,000.00
New Israel Fund 703 Market Street, Suite 1503, San Francisco, CA 94103	501c(3) Public Charity	Educational	52,000.00
St. Louis Hillel at Washington University 6300 Forsyth Bwd., St. Louis, MO 63105	501c(3) Public Charity	Educational & Religious	25,000.00
Global Foodbanking Network 203 N Lasalle Street, Chicago, IL 60601	501c(3) Public Charity	Food Bank Support	20,000.00
Kesher Israel 2801 N Street, NW, Washington, DC 20007	501c(3) Public Charity	Educational & Religious	15,000.00
American University Hillel 4400 Massachusetts Avenue, Washington, DC 20016	501c(3) Public Charity	Educational	10,000.00
Washington University in St. Louis Campus Box 1192 One Brookings Drive, St. Louis, MO 63130	501c(3) Public Charity	Educational	3,400.00
University of Chicago 5841 S. Maryland Ave., Chicago, IL 60637	501c(3) Public Charlty	Educational	2,500.00
Solomon Schechter Day School of St Louis 125 Wells Avenue, Newton, MA 02459	501c(3) Public Charity	Educational	2,000 00
Gann Academy The New Jewish High School of Greater Boston Inc 333 Forest Street, Waltham, MA 02452	501c(3) Public Charity	Educational	1,500 00
			307,700.00

Maor Foundation

7701 Forsyth Boulevard, Suite 600 • St. Louis, Missouri 63105 Phone: 314/889-0890 • Fax: 314/727-7314 • e-mail: maor@foxfamilyoffice.com

GRANT APPLICATION

Date:	
Name of Organization: (The legal name according to	the IRS)
Address:	
Mailing Address:	
(if different) E-mail Address:	
Phone Number:	Fax Number:
Executive Director:	
Board Chairperson:	
Amount Requested:	Total Budget for Project:
Project Name:	
In no more than seven (7) pa	ages, answer the following questions (not including your budget or

- 1. Describe why the organization was founded and what is does.
- 2. Provide a summary of the project for which you are seeking funding, including its goals and objectives, content, methods and timetable. Make sure you define the problem and explain what you are trying to accomplish with the program. If you are applying for operating funds, describe the need for operating funds.
- 3. Detail how the Foundation funds will be utilized.
- 4. Describe what your evaluation will assess and how you will evaluate the project. If you are applying for funding for the same project as last year, attach a copy of your evaluation from last year.
- 5. Attach a full project budget and a full organizational budget.

- 6. If your grant application includes a request for computer hardware and/or software, please attach a.) a letter from a computer consultant (including the individual's credentials) explaining how he/she has analyzed your needs and describing in detail the specific hardware and/or software to be purchased, and b.) written estimates from at least three vendors showing the cost of each component to be purchased.
- 7. Explain how you plan to raise additional monies.
- 8. If the project is expected to continue beyond the period of this grant proposal, please explain your plans for the ongoing funding/sustainability of the project.
- 9. Attach a copy of your most recent audit or financial statement, prepared by your accountant, preferably in English.
- 10. List here <u>by name</u> all sources of funding for this project. Include only funds which have been/are being raised for the grant year in question. Include all applications which have been submitted to government agencies, corporations, foundations, etc., the date applied, the amount requested and the status of the grant. If the funds are from a specific event, list the event, its date and amount raised after expenses. If the funds are from general fund raising, indicate how much your Board has agreed to commit to the project and the date of the Board decision. If necessary, please attach an additional page.

SOURCE (Agency/Foundation/Event)	<u>DATE</u>	<u>AMOUNT</u>	STATUS
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
•			
TOTAL AMOUNT RAISED TO DATE:	\$	as of	

I have read the completed application and it is being submitted to the MAOR Foundation with my approval.

Signatures

(Applicant)

(Director of Organization)

Form 8868 (Rev. 1-2014)					Page 2		
If you are filing for an Additional (Not Automatic) 3-Month E	xtension, c	complete only Part II and check this	box		▶ X		
Note. Only complete Part II if you have already been granted an	automatic	3-month extension on a previously fi	led Form 8	868.			
 If you are filing for an Automatic 3-Month Extension, compl 							
Part II Additional (Not Automatic) 3-Month	Extension	n of Time. Only file the origin	al (no co	pies ne	eded).		
		Enter filer's	identifyin	g number	, see instructions		
Type or Name of exempt organization or other filer, see insti	ructions.		Employer	mployer identification number (EIN) or			
rint							
File by the MAOR FOUNDATION		42-1645906					
due date for Number, street, and room or suite no If a P.O. box, filing your	see instruc	ee instructions.			ber (SSN)		
return See //UI FORSYTH BLVD, NO. 600		l					
City, town or post office, state, and ZIP code. For a	foreign add	iress, see instructions.					
CLAYTON, MO 63105							
					0 4		
Enter the Return code for the return that this application is for (ile a separa	ite application for each return)			0 4		
		TA 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10			Return		
Application	Return	Application			Code		
Is For	Code	Is For			Code		
Form 990 or Form 990-EZ	01	Form 1041-A			08		
Form 990·BL	02_	Form 4720 (other than individual)			09		
Form 4720 (Individual) Form 990-PF	03	Form 5227			10		
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069			11		
Form 990-T (sec 401(a) of 400(a) (tost)	06	Form 8870			12		
STOP! Do not complete Part II if you were not already grante			iously file	d Form 8			
DAVE ARNOLD							
• The books are in the care of ▶ 7701 FORSYTH	SUITE	600 - CLAYTON, MO	6310	5			
Telephone No ► 314-889-0885		Fax No. ▶					
If the organization does not have an office or place of business.	ess in the Ui	nited States, check this box			▶ □		
If this is for a Group Return, enter the organization's four dig			f this is fo	r the whole	e group, check this		
box ▶ . If it is for part of the group, check this box ▶		ach a list with the names and EINs of					
4 I request an additional 3-month extension of time until	NOVEM	BER 15, 2014.					
5 For calendar year 2013, or other tax year beginning		, and endin	 				
6 If the tax year entered in line 5 is for less than 12 months	, check reas	son: Initial return	i Fınal r	eturn			
Change in accounting period							
7 State in detail why you need the extension							
ADDITIONAL TIME IS NECESSARY	TO AS	SEMBLE THE INFORMA	TION	TO PR	EPARE A		
PROPER RETURN							
				 -			
8a If this application is for Forms 990-BL, 990-PF, 990-T, 472	20, or 6069,	enter the tentative tax, less any			20 000		
nonrefundable credits. See instructions.			8a	\$	20,000.		
b If this application is for Forms 990-PF, 990-T, 4720, or 60							
tax payments made Include any prior year overpayment	allowed as	a credit and any amount paid			20,000.		
previously with Form 8868.			8b	\$	20,000.		
Balance due. Subtract line 8b from line 8a. Include your		ith this form, if required, by using	0.		0.		
EFTPS (Electronic Federal Tax Payment System). See ins	structions.	et he completed for Doct II	8c	\$			
		st be completed for Part II		of my knowl	adae and helief		
Under penalties of perjury, I declare that I have examined this form, incit is true, correct, and complete, and that I am authorized to prepare this	idding accom s form	ipanying screedules and statements, and t	ט נווס טפטנ נ	A ATTY KITOWI	euge and bellet,		
Signature Title			Date	•			

323842 12-31-13 Form 8868 (Rev. 1-2014)