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## Form 990-PF

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	calen	dar year 2013 or tax year beginning		, and ending		
		foundation			A Employer identification	number
М	ORI	ENO FAMILY FOUNDATION			86-0918198	
		nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
4	45!	EAST CAMELBACK ROAD,	SUITE D-145		(602) 667-	9500
		own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	ending, check here
		all that apply Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	s, check here
	,	Final return	Amended return			
		Address change	Name change		<ol><li>Foreign organizations me check here and attach co</li></ol>	eting the 85% test, imputation
H C	heck	type of organization: X Section 501(c)(3) ex	cempt private foundation		E If private foundation sta	tus was terminated
		· · · · · · · · · · · · · · · · · · ·	Other taxable private founda		under section 507(b)(1)	(A), check here
		rket value of all assets at end of year   J Accounting	•	X Accrual	F If the foundation is in a t	
-			ther (specify)	tania )	under section 507(b)(1)	(B), check here
	\$	34,203,908. (Part I, colu	Υ <del></del>			(d) Disbursements
[Pa	ırt I	(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 investment income	(c) Adjusted net income	for chantable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	7,401,000.		N/A	
	_	Check it is the foundation is not required to attach Sch. B. Interest on savings and temporary	4 404	4 404		COM & CONTROL 1
	3	cash investments	1,121.	1,121.		STATEMENT 1
	4	Dividends and interest from securities	223,652.	223,652.		STATEMENT 2
	Ι.	Gross rents		<u> </u>		
	l	Net rental income or (loss)				· <del>- · · · · · · · · · · · · · · · · · ·</del>
ĕ	Ь	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a				
Revenue	i	assets on line 6a  Capital gain net income (from Part IV, line 2)	CLIALD	0.		
æ	8	Net short-term capital gain	181		<del></del>	
	9	Income modifications 8 NO	V 2 6 2014 191			
	10a	Gross sales less returns and allowances	S			
	b	Less Cost of goods sold	3,,2000			
	C	Gross profit or (loss)	121310, 01			<u> </u>
	1	Other income	7 () = 772	224 772		
	<del></del>	Total. Add lines 1 through 11	7,625,773.	224,773.	<u>.                                    </u>	0.
	13	Compensation of officers, directors, trustees, etc Other employee salaries and wages	- 0.	· •		- 0.
	15	Pension plans, employee benefits			<del></del>	<del></del>
S S	16a	Legal fees				<del></del>
ens	Ь	Accounting fees STMT 3	3,200.	1,600.	<del></del>	1,600.
Expenses	C	Other professional fees				
		Interest	844.	0.		844.
2014 nistrati	18	Taxes STMT 4	4,097.	0.		0.
20 nist	19	Depreciation and depletion				
<u> </u>	20	Occupancy .				
€ĕ	21					<del> </del>
	22	Printing and publications Other expenses STMT 5	1,095.	0.	ļ	1,095.
E E	23		1,093.	0.		1,093.
『元』 DF.C. ① 月 2014 Operating and Administrative	24	Total operating and administrative expenses. Add lines 13 through 23	9,236.	1,600.		3,539.
<b>훷</b> 8	25	Contributions, gifts, grants paid	826,700.	2,000.	-	826,700.
SCANNED DEC		Total expenses and disbursements.			<u> </u>	T
S		Add lines 24 and 25	835,936.	1,600.		830,239.
<b>奶</b>	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	6,789,837.			
	1	Net Investment income (if negative, enter -0-)		223,173.		
<b>ह</b> त्रक		Adjusted net income (if negative, enter -0-)	<u> </u>	<u> </u>	N/A	<u> </u>
3235 10-1	01 0-13	LHA For Paperwork Reduction Act Notice, see	instructions.			Form <b>990-PF</b> (2013

Part II Balance

Net Assets or Fund Balances

٠,

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rt II Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	<del></del>
cotumn should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing	2,633,018.	2,000,840.	2,000,840.
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			
	<del></del>		
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			
b Investments - corporate stock STMT 7	11,146,344.	18,547,344.	32,203,068.
c Investments - corporate bonds			
11 Investments - land, buildings, and equipment basis			
Less accumulated depreciation			
12 Investments - mortgage loans			
13 Investments - other			
4 Land, buildings, and equipment; basis			
Less accumulated depreciation	,		
15 Other assets (describe ► )		·	
16 Total assets (to be completed by all filers - see the			
instructions. Also, see page 1, item 1)	13,779,362.	20,548,184.	34,203,908.
17 Accounts payable and accrued expenses	13,113,302.	20,340,104.	34,203,300.
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
18 Grants payable			
19 Deferred revenue	C F40		
20 Loans from officers, directors, trustees, and other disqualified persons	6,542.		
21 Mortgages and other notes payable			
22 Other liabilities (describe $ ightharpoonup$ DUE TO AFFILIATES )	64,173.	0.	
		_	
3 Total liabilities (add lines 17 through 22)	70,715.	0.	
Foundations that follow SFAS 117, check here			
and complete lines 24 through 26 and lines 30 and 31.			
24 Unrestricted			
25 Temporarily restricted			
26 Permanently restricted		<del></del>	
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31.		1	
27 Capital stock, trust principal, or current funds	0.	0.	
28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
	13,708,647.	20,548,184.	
Retained earnings, accumulated income, endowment, or other funds			
30 Total net assets or fund balances	13,708,647.	20,548,184.	
	12 550 260	00 540 404	
31 Total liabilities and net assets/fund balances	13,779,362.	20,548,184.	
rt III Analysis of Changes in Net Assets or Fund B	alances		
otal net assets or fund balances at beginning of year - Part II, column (a), line	30		<del></del> -
nust agree with end-of-year figure reported on prior year's return)	<del></del>		13,708,647
nter amount from Part I, line 27a		2	6,789,837
nor amount none art y mile are	· · · · · · · · · · · · · · · · · · ·		0,103,031

## Part III Analysis

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30	Π	
•	(must agree with end-of-year figure reported on prior year's return)	1	13,708,647.
2	Enter amount from Part I, line 27a	2	6,789,837.
3	Other increases not included in line 2 (itemize) SEE STATEMENT 6	3	49,700.
4	Add lines 1, 2, and 3	4	20,548,184.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	20,548,184.
_			Form <b>990-PF</b> (2013)

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Part IV	Capital Gains	anu Lo	sses for Tax on it	ivesimeni	income						
			nd(s) of property sold (e.g or common stock, 200 sh			( <b>b</b> ) I P D	How ac - Purcl - Dona	quired hase ation	(c) Date a (mo., da		(d) Date sold (mo., day, yr)
1a											
b	NO	NE		•	-						
C											
d											
е						L					
(e)	Gross sales price	(f) [	Depreciation allowed (or allowable)		t or other basis expense of sale					in or (loss) (f) minus (	
a											·
b											
C											
đ										•	<u> </u>
е			······································								
Comp	ete only for assets showing	ig gain in	column (h) and owned by	the foundation	on 12/31/69			(1)	Gains (C	ol. (h) gaın	minus
(i) F.	M.V. as of 12/31/69	(	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), rf any			col.	(k), but n	ot less thar (from col. (	1 -0-) or
b					<del></del>						
C											* * * *
d	-		•	1							
e		-						•			
	<del></del>		C 16 anim alma anto			$\neg$					
2 Capital	gain net income or (net ca	pıtal loss)	$ \begin{cases} \text{ If gain, also enter} \\ \text{ If (loss), enter -0} \end{cases} $			}	2				
If gain,	also enter in Part I, line 8,		ned in sections 1222(5) ar c).	nd (6):		}	•				
Dart V	, enter -0- in Part I, line 8	nder S	ection 4940(e) for	Reduced	Tay on Net	Liny	oetn	ent Inc	ome		<del></del>
Was the fo	foundation does not qual	tion 4942 Ify under	ank. tax on the distributable an section 4940(e). Do not co nn for each year, see the i	mplete this pa	rt.		· 				Yes X No
	(a)	T	(b)			(c)		<del></del>	Τ-	<del></del>	(d) ution ratio
Calenda	Base periód years r year (or tax year beginni	na in)	Adjusted qualifying dis	tributions	Net value of no			use assets	1 4	Distrib col (b) div	utión ratio ided by col. (c))
Calcilua	2012	(19 III)		3,500.		12	13	9,487		COL (D) GIV	.040652
	2011	<del></del>		7,444.				0,437			.038068
<del></del>	2010			9,557.			<del></del>	6,598			.058456
	2009			3,610.				7,848			.310384
	2008			6,600.				9,534			.103988
	2000			.0,000	<del></del>	<u>~</u>	, , 2	J, JJ I	<del>†</del>		.103300
	f line 1, column (d)	E voor bo	se period - divide the total		or by the gumbe	r of us		••	2		.551548
	ndation has been in existe					i ui ye			3		.110310
4 Enter th	ne net value of noncharitat	ie-use as:	sets for 2013 from Part X,	line 5 .					4	2	1,769,026.
5 Multiph	/ line 4 by line 3				···				5		2,401,341.
6 Enter 1	% of net investment incon	ne (1% of	Part I, line 27b)				. •		6		2,232.
	es 5 and 6			•			•		7		2,403,573.
	ualifying distributions fron	n Part XII,	line 4			· ····			8		830,239.
If line 8 See the	is equal to or greater than Part VI instructions.	line 7, ch	eck the box in Part VI, line					rate.			
	_										

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Form 990	-PF (2013) MORENO FAMILY FOUNDATION				<u>86-09</u>			Page 4
Part \				Ю(e), or 4	948 - se	e instru	ıctio	ns)
1a Exe	mpt operating foundations described in section 4940(d)(2), check here 🕨 📖 and er	nter "N/	A* on line 1.	<u> </u>				
Date	e of ruling or determination letter: (attach copy of letter if nec	essary	-see instructions	i)				
<b>b</b> Dor	nestic foundations that meet the section 4940(e) requirements in Part V, check here	• <u> </u>	and enter 1%	þ	1		<u>4,4</u>	63.
	art I, line 27b							
c All c	other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Par	t I, line 12, col. (b	n). J				
2 Tax	under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Ot	hers er	nter -0-)		2			<u>0.</u>
3 Add	l lines 1 and 2				3		4,4	<u>63.</u>
4 Sub	title A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. O	thers e	nter -0-)		4			<u>0.</u>
5 Tax	based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	-			5		4,4	63.
6 Cre	dits/Payments:							
a 201	3 estimated tax payments and 2012 overpayment credited to 2013	6a		6,326.				
<b>b</b> Exe	mpt foreign organizations - tax withheld at source	6b						
c Tax	paid with application for extension of time to file (Form 8868)	6c			]			
d Bac	kup withholding erroneously withheld	6d			]			
7 Tot	al credits and payments. Add lines 6a through 6d				7		6,3	26.
8 Ent	er any penalty for underpayment of estimated tax. Check here 🔲 ıf Form 2220 is attaı	ched			8			
9 Tax	due. If the total of lines 5 and 8 is more than line 7, enter amount owed			🕨	9			
10 Ove	erpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			🕨	10		1,8	63.
11 Ent	er the amount of line 10 to be: Credited to 2014 estimated tax		1,863. R	efunded 🟲	11			0.
Part \	/II-A Statements Regarding Activities							
1a Dur	ing the tax year, did the foundation attempt to influence any national, state, or local legis	lation c	r did it participat	e or intervene	ın		Yes	No
any	political campaign?					1a		X
<b>b</b> Did	rt spend more than \$100 during the year (either directly or indirectly) for political purpos	ses (se	e instructions for	the definition	)?	1b		X
If ti	he answer is "Yes" to 1a or 1b, attach a detailed description of the activities an	d copi	es of any mate	nals publish	ed or			
dis	tributed by the foundation in connection with the activities.					ļ		
c Did	the foundation file Form 1120-POL for this year?					10		X
d Ent	er the amount (if any) of tax on political expenditures (section 4955) imposed during the	year:						
(1)	On the foundation. > \$ 0 • (2) On foundation managers	. <b>▶</b> \$		0.	_			ł
e Ent	er the reimbursement (if any) paid by the foundation during the year for political expendi	iture tax	imposed on fou	ndation	_			
ma	nagers. ► \$ 0 •							
2 Has	the foundation engaged in any activities that have not previously been reported to the If	RS?				2		X
lf "	Yes," attach a detailed description of the activities.					1		1
3 Has	the foundation made any changes, not previously reported to the IRS, in its governing i	ınstrum	ent, articles of in	corporation, (	or			
byl	aws, or other similar instruments? If "Yes," attach a conformed copy of the change	es				. 3		X
4a Did	the foundation have unrelated business gross income of \$1,000 or more during the year	ır?				4a	L	X
b If "	es, has it filed a tax return on Form 990-T for this year?			-	N/A	4b		<u> </u>
5 Wa	s there a liquidation, termination, dissolution, or substantial contraction during the year?	,				5		Х
lf "	Yes, attach the statement required by General Instruction T.						1	
6 Are	the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied en	rther:						
• E	ly language in the governing instrument, or						İ	
● 6	ly state legislation that effectively amends the governing instrument so that no mandator	y dırec	tions that conflic	with the stat	e law	<b>,</b>	ļ	
	nain in the governing instrument?					6	X	<u> </u>
7 Dic	the foundation have at least \$5,000 in assets at any time during the year? If "Yes," cor	nplete	Part II, col. (c),	and Part X	/	7	X	<u> </u>
						1	ļ	
8a Ent	er the states to which the foundation reports or with which it is registered (see instructio	ns) 🕨	·					
_ <u>A</u>						_		
b If t	ne answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorney	General (or des	gnate)				
of	each state as required by General Instruction G? If "No," attach explanation					85	X	
	he foundation claiming status as a private operating foundation within the meaning of se		*** *	2(j)(5) for cal	endar	1		
yea	r 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," o	comple	ete Part XIV			. 9		X
10 Dic	any persons become substantial contributors during the tax year? if "Yes," attach a schedu	ule listing	g their names and a	dresses		10		X
						Form <b>99</b> 0	)-PF	(2013)

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used exclusively for charitable purposes. This is an excepted

act of self dealing under IRC Section 4941(d)(2)(B).

Total. Add lines 1 through 3

Р	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	dations	, 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	19,867,841.
	Average of monthly cash balances	1b	19,867,841. 2,232,693.
C	Fair market value of all other assets	1c	
đ	Total (add lines 1a, b, and c)	1d	22,100,534.
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	22,100,534.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	331,508.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	21,769,026.
6	Minimum Investment return. Enter 5% of line 5	6	1,088,451.
Р	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	1,088,451.
2a	Tax on investment income for 2013 from Part VI, line 5 2a 4, 463.	ĺ	
b	Income tax for 2013. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	4,463.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,083,988.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,083,988.
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	1,083,988.
P	Qualifying Distributions (see instructions)		-
١.	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	4.	830,239.
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a   1b	0.00,239.
þ	Program-related investments - total from Part IX-B	2	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes		<del></del>
3	Amounts set aside for specific charitable projects that satisfy the:	3a	
a	Suitability test (prior IRS approval required)	3b	
b	Cash distribution test (attach the required schedule)		830,239.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	030,233.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	Λ
	Income. Enter 1% of Part I, line 27b	5	830,239.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	<del></del>
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	jualilies 1	or the section

# Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(¢) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI,				
line 7				1,083,988.
2 Undistributed income, if any, as of the end of 2013				1,003,3001
a Enter amount for 2012 only			0.	
b Total for prior years:				· <del></del>
g rotal for prior years.		0.		
3 Excess distributions carryover, if any, to 2013:		<u> </u>		<u> </u>
a From 2008   340,879.		-		
bFrom 2009 934,510.				
c From 2010 319,557.				
dFrom 2011				
e From 2012				
f Total of lines 3a through e	1,594,946.			
4 Qualifying distributions for 2013 from	1,331,3100			
Part XII, line 4: ►\$ 830, 239.				
a Applied to 2012, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior			- 0.	
years (Election required - see instructions)	j	0.		
c Treated as distributions out of corpus		0.		
(Election required - see instructions)	0.			
d Applied to 2013 distributable amount	•			830,239.
e Remaining amount distributed out of corpus	0.			030,237+
_ '	253,749.			253,749.
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a))	255,745.			255,145.
6 Enter the net total of each column as indicated below;			,	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,341,197.			
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			1	
be distributed in 2014				0.
7 Amounts treated as distributions out of				-
corpus to satisfy requirements imposed by			}	
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008				
not applied on line 5 or line 7	87,130.			
9 Excess distributions carryover to 2014.				
Subtract lines 7 and 8 from line 6a	1,254,067.			
10 Analysis of line 9:			1	
a Excess from 2009 934,510.				
b Excess from 2010 319,557.			1	
c Excess from 2011				
d Excess from 2012				
e Excess from 2013		· · · · · · · · · · · · · · · · · · ·		
202504				Form <b>990-PF</b> (2013)

### **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.		ousiness income		by section 512, 513, or 514	(e)
4.B	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code		
a b			+ +		<del>-</del>
<u> </u>	<del>                                     </del>		+ + + + + +		
d		·	1-1-		<del></del>
6		<del></del>	1		
f			1 1		
g Fees and contracts from government agencies					•
2 Membership dues and assessments					<del></del>
3 Interest on savings and temporary cash					
investments			14	1,121.	
4 Dividends and interest from securities			14	1,121.	*
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					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events				·	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:			1		
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>	0	•	224,773.	0
13 Total. Add line 12, columns (b), (d), and (e)				13	224,773
(See worksheet in line 13 instructions to verify calculations.)		<del></del>			
Part XVI-B Relationship of Activities to	o the Accon	plishment of E	xempt F	Purposes	
Line No.   Explain below how each activity for which incom		-1	A		t the second of
Abo to			A contribute	ed importantly to the accomp	DIISTIMENT OF
the foundation's exempt purposes (other than to	by providing failu	o tor sacri purposes;			
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323621 10-10-13				<del></del>	Form <b>990-PF</b> (2013

Define segentation describy or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)) organizations) or in section 527, relating to political organizations?   1a(1)   X   Tarialist's flow the reporting foundation in a noncharitable exempt organization of.   1a(1)   X   X   X   X   X   X   X   X   X		Exempt Organ		5,0,0,0	and managemen		<b>-</b> 110.4	po	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organization of:  1 Transfers from the reporting foundshoot to a noncharitable exempt organization of:  1 (2) Other sessets  1 (3) Other sessets  1 (4) Sales of assets from a noncharitable exempt organization  (2) Purchases of assets from a noncharitable exempt organization  (3) Rental of facilities, equipment, er other assets  1 (4) Reinhousement arrangements  (4) Reinhousement arrangements  (5) Loans or loan guarantees  (6) Performance of services or membership or fundasing solicitations  (5) Performance of services or membership or fundasing solicitations  (6) Performance of services or membership or fundasing solicitations  (7) Sales of assets from a noncharitable exempt organization  (8) Performance of services or membership or fundasing solicitations  (9) Performance of services or membership or fundasing solicitations  (10) In the company of the other services organization or sharing arrangement, show in column (g) the value of the goods, other assets, or paid employees  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization or sharing arrangement, show in column (g) the value of the goods, other assets, or paid employees  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 301(c) of the Code (other than section 501(c)(3) or in section 527?  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3) or in section 527?  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization described in section 501(c) of the Code (other than section 501(c)(3) or in section 527?  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization described in the following	1 Did the or			of the followin	no with any other organi	zation	described in sec	tion 501(c) of		Yes	No
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in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  □ Yes X No  b If "Yes," complete the following schedule.  (a) Name of organization  N/A  Under penalties of Payary, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and believ, it is true darrest and complete Declaration of prepare (other-than taxpayer) is based on all information of which prepare has any knowledge shown below (see inst)?  Yes X No  Way the IRS discuss the return with the prepare shown below (see inst)?  Yes X No  No  Paid  Print/Type preparer's name  Preparer's signature  Date  Title  Print/Type preparer's name  Preparer's signature  Date  U7-14  Firm's name ▶ DELOITTE TAX LLP  Firm's address ▶ 2901 N. CENTRAL AVENUE, SUITE 1200  PHOENIX, AZ 85012-2799  Phone no. (602) 234-5100											
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Sign   Under penalties of Description of relationship	2a Is the fou	ndation directly or indirect	tly affiliated with, or r	elated to, one	or more tax-exempt or	ganızat	tions described				
(a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Under penalties of Decary, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and beligh, it is truer dyness, and complete Declaration of preparer (other-than taxpayer) is based on all information of which preparer has any knowledge shown below (see inst;)?  Yes X No  Print/Type preparer's name  Preparer's signature  JESSICA A. DUFF  Firm's name ▶ DELOITTE TAX LLP  Firm's address ▶ 2901 N. CENTRAL AVENUE, SUITE 1200  PHOENIX, AZ 85012-2799  Phone no. (602) 234-5100	in section	501(c) of the Code (other	r than section 501(c)	(3)) or in sec	tion 527?				Yes	X	] No
N/A  Sign   Under penalties of Desury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and believ, it is true dones, and complete Declaration of prepare (other than taxpayer) is based on all information of which preparer has any knowledge and believ, it is true dones, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge return with the preparer shown below (see instriction). No  Print/Type preparer's name   Preparer's signature   Date   Check   if   PTIN   Self- employed   P00179255    Prim's name   DELOITTE TAX LLP   Firm's EIN   86-1065772    Prim's address   2901 N. CENTRAL AVENUE, SUITE 1200   Phone no. (602) 234-5100	b if "Yes," c	omplete the following sch	edule.		•						
Sign Here    Under penalties of Deputy, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and being it is truly done and complete Declaration of preparer (either with the preparer shown below (see inst.)   Ves				<u>-</u>	(b) Type of organizat	on	•	(c) Description of re	elationship		
Sign Here    Under penalties of Deputy, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and being it is truly done and complete Declaration of preparer (either with the preparer shown below (see inst.)   Ves	•	N/A									
Sign Here Signature of control of trustee Date Title  Paid Print/Type preparer's name Preparer's signature Use Only  Prim's name ▶ DELOITTE TAX LLP  Firm's address ▶ 2901 N. CENTRAL AVENUE, SUITE 1200 PHOENIX, AZ 85012-2799  Phone no. (602) 234-5100											
Sign Here Signature of control of trustee Date Title  Paid Print/Type preparer's name Preparer's signature Use Only  Prim's name ▶ DELOITTE TAX LLP  Firm's address ▶ 2901 N. CENTRAL AVENUE, SUITE 1200 PHOENIX, AZ 85012-2799  Phone no. (602) 234-5100		· · · · · · · · · · · · · · · · · · ·				_		<del></del>			
Sign Here Signature of control of trustee Date Title  Paid Print/Type preparer's name Preparer's signature Use Only  Prim's name ▶ DELOITTE TAX LLP  Firm's address ▶ 2901 N. CENTRAL AVENUE, SUITE 1200 PHOENIX, AZ 85012-2799  Phone no. (602) 234-5100				•			·				
Sign Here Signature of control of trustee Date Title  Paid Print/Type preparer's name Preparer's signature Use Only  Prim's name ▶ DELOITTE TAX LLP  Firm's address ▶ 2901 N. CENTRAL AVENUE, SUITE 1200 PHOENIX, AZ 85012-2799  Phone no. (602) 234-5100		<del></del>									
Here    Comparison of the control o	Unde	r penalties of persury, I declare	that I have examined this	s return, includii	ng accompanying schedules	and sta	atements, and to th	e best of my knowledge			
Here Sign Sture of Officer or trustee  Paid Preparer Use Only  Firm's name ▶ DELOITTE TAX LLP  Firm's address ▶ 2901 N. CENTRAL AVENUE, SUITE 1200 PHOENIX, AZ 85012-2799  Phone no. (602) 234-5100	Sign and b	elief, it is true, oprrect, and cor	mplete Declaration of pro	eparer (other tha	an taxpayer) is based on all i	nformati	ion of which prepar	er has any knowledge	return with th	e prepar	er
Paid Preparer Use Only  Firm's address ▶ 2901 N. CENTRAL AVENUE, SUITE 1200 PHOENIX, AZ 85012-2799  Pate Title    Date   Check   if   PTIN   self- employed   P00179255		1 1 6	129		11/-17-1	4					
Paid Preparer Use Only  Print/Type preparer's name  Preparer's signature  Proparer's si	Sig	nature of officer or trustee			Date	<del>/_</del>	Title				J 110
Paid Preparer Use Only         JESSICA A. DUFF         JESSICA A. DUFF         Production of the producti		<del></del>		Preparer's s	signature	16		Check   I if	PTIN		
Paid Preparer Use Only         JESSICA A. DUFF         JUMIN A. DUFF         P00179255           Firm's name ► DELOITTE TAX LLP         Firm's EIN ► 86-1065772           Firm's address ► 2901 N. CENTRAL AVENUE, SUITE 1200         Phone no. (602) 234-5100		, , , , , , , , , , , , , , , , , , ,			· .						
Preparer Use Only  Firm's name ▶ DELOITTE TAX LLP  Firm's address ▶ 2901 N. CENTRAL AVENUE, SUITE 1200 PHOENIX, AZ 85012-2799  Phone no. (602) 234-5100	Paid	JESSTCA A	ਬਕਸ਼ਹ	Ju.	m 4. luft	- [ -	61-7-14		D00170	255	
Use Only   Firm's address ▶ 2901 N. CENTRAL AVENUE, SUITE 1200   PHOENIX, AZ 85012-2799   Phone no. (602) 234-5100		L		T.I.P				Firm's EIN ► Ω			
Firm's address > 2901 N. CENTRAL AVENUE, SUITE 1200 PHOENIX, AZ 85012-2799 Phone no. (602) 234-5100	-		CIIII IAA					Ling S EIM P O	0T0071	14	
PHOENIX, AZ 85012-2799 Phone no. (602) 234-5100		I .	01 N CEN	יי זגקייי	VENITE CIT	ጥኮ	1200				
						TŢ	1200	Dhana 16	02/ 224	_ E 1	0.0
		ΙΕΠ	CHITA, AL	0.5012	4133	—–		Truone no. ( 0			

#### 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 <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No 1545-0047

Name of the organization

Employer identification number

86-0918198 MORENO FAMILY FOUNDATION Organization type (check one): Filers of: Section: \_\_\_\_ 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete 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. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, chantable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on 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 certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

MOREN	O FAMILY FOUNDATION	86	0-0318138
Part I	Contributors (see instructions). Use duplicate copies of Part I if additi	onal space is needed.	·
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ARTURO & CAROLE MORENO  4455 E CAMELBACK ROAD, SUITE D-145  PHOENIX, AZ 85018	\$7,401,000.	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 Noncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		_	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
323452 10-2	4-13	Schedule B (Form	990, 990-EZ, or 990-PF) (2013)

Employer identification number

### MORENO FAMILY FOUNDATION

86-0918198

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	120,000 SHS OF CBS STOCK		
		\$ 7,401,000.	12/24/13
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a)		(c)	
No. from Part I	(b)  Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
		   \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY C	ASH IN	VESTMENTS	STATEMENT 1
SOURCE		(A REVE PER BO	NUE	NET IN	(B) VESTMENT COME	(C) ADJUSTED NET INCOME
WEDBUSH #3054			1,121.		1,121.	
TOTAL TO PART I, LI	NE 3		1,121.		1,121.	
FORM 990-PF	DIVIDEND	S AND INTER	EST FROM	SECUR	ITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REV	A) ENUE BOOKS	(B) NET INVES MENT INCO	
WEDBUSH #3054	223,652	•	0. 22	23,652.	223,65	2.
TO PART I, LINE 4	223,652	•	0. 22	23,652.	223,65	2.
FORM 990-PF		ACCOUNTI	NG FEES		· · · · · · · · · · · · · · · · · · ·	STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	ÆST-	(C) ADJUSTED NET INCOM	
ACCOUNTING FEES		3,200.	1	L,600.	<del></del>	1,600.
TO FORM 990-PF, PG	1, LN 16B	3,200.	1	1,600.		1,600.
FORM 990-PF		TAX	ES	<del></del>		STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET IN MENT IN	/EST-	(C) ADJUSTED NET INCOM	
FEDERAL TAXES	_	4,097.	·	0.		0.
TO FORM 990-PF, PG	1, LN 18	4,097.		0.	-	0.

FORM 990-PF	OTHER EXPENSES			STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM			
AZ CORP FEE BANK CHARGES MISCELLANEOUS EXPENSES	10. 85. 1,000.	0.		10 85 1,000	5.	
TO FORM 990-PF, PG 1, LN 23	1,095.	0.		1,095	5 <b>.</b>	
FORM 990-PF OTHER INCREASES	IN NET ASS	ETS OR FUND B	ALANCES	STATEMENT	6	
DESCRIPTION				AMOUNT		
TIMING DIFFERENCES RELATED TO	EXPENSES			49,700	ο.	
TOTAL TO FORM 990-PF, PART II	I, LINE 3			49,700	0.	
FORM 990-PF	CORPORAT	E STOCK		STATEMENT	7	
DESCRIPTION		вс	OK VALUE	FAIR MARKET VALUE		
VIACOM INC - CL B CBS CORP -CL B		1	4,472,000. 4,075,344.	8,734,000 23,469,068		
TOTAL TO FORM 990-PF, PART II	, LINE 10B	1	8,547,344.	32,203,068	8.	
FORM 990-PF	PART XV - L	INE 1A ON MANAGERS		STATEMENT	8	

NAME OF MANAGER

ARTURO MORENO CAROLE MORENO

#### MORENO FAMILY FOUNDATION 86-0918198 12/31/2013 PART XV - GRANTS PAID DURING THE YEAR

RECIPIENT	ADDRESS		PURPOSE	STATUS	AMOUNT
AMERICAN HEART ASSOCIATION	2929 S 48TH ST	TEMPE, AZ 85282	HEALTH	501(c)(3)	15,000
ANGELS BASEBALL FOUNDATION ARIZONA ANIMAL WELFARE LEAGUE	2000 E GENE AUTRY WAY 25 N 40TH ST	ANAHEIM CA 92808 PHOENIX AZ 85034	CHILDREN	501(c)(3) 501(c)(3)	250,000 200
ARIZONA FOUNDATION FOR WOMEN	2828 NORTH CENTRAL AVENUE	PHOENIX AZ 85004	COMMUNITY	501(c)(3)	1,000
ARIZONA SCIENCE CENTER	600 E WASHINGTON ST	PHOENIX AZ 85004	ARTS	501(c)(3)	2,500
ARIZONA WOMEN'S BOARD	5921 E INDIAN BEND RD	PARADISE VALLEY AZ 85253	HEALTH	501(c)(3)	1,000
AUXILIARY OF THE BOYS & GIRLS CLUBS OF SCOTTSDALE	10515 E. LAKEVIEW DR	SCOTTSDALE AZ 85258	CHILDREN	501(c)(3)	5,000
BALLET ARIZONA	3845 E INDIAN SCHOOL RD	PHOENIX AZ 85018	ARTS	501(c)(3)	25,000
BARROW NEUROLOGICAL FOUNDATION	350 W THOMAS RD PO BOX 590	PHOENIX, AZ 85013 COOPERSTOWN NY 13326	HEALTH COMMUNITY	501(c)(3) 501(c)(3)	500 5,000
BASEBALL HALL OF FAME BICYCLES FOR KIDS	4275 EXECUTIVE SQ, STE 400	LA JOLLA, CA 92037	CHILDREN	501(c)(3)	1,000
BIG BROTHERS BIG SISTERS OF CENTRAL ARIZONA	1010 E. MCDOWELL RD, STE 400	PHOENIX AZ 85006	CHILDREN	501(c)(3)	6,000
B'NAI B'RITH INTERNATIONAL	333 \$ 132ND ST	OMAHA, NE 68154	COMMUNITY	501(c)(3)	5,000
BOYS AND GIRLS CLUBS OF ANAHEIM	311 E BROADWAY	ANAHEIM CA 92805	CHILDREN	501(c)(3)	15,000
BOYS AND GIRLS CLUBS OF METROPOLITAN PHOENIX	2645 N 24TH ST	PHOENIX AZ 85008	CHILDREN	501(c)(3)	25,000
BOYS HOPE GIRLS HOPE OF ARIZONA	3443 N CENTRAL, SIDE 713	PHOENIX AZ 85012	CHILDREN	501(c)(3)	2,500
BLAIR FUND	PO BOX 27208	WASHINGTON, DC 20038	EDUCATION	501(c)(3)	5,000
COURT APPOINTED SPECIAL ADVOCATES CHILDHELP USA	100 WEST HARRISON STREET, NORTH TOWER STE 500 15757 N 78TH ST, STE B	SEATTLE, WA 98119 SCOTTSDALE, AZ 85260	CHILDREN CHILDREN	501(c)(3) 501(c)(3)	2,500 2,500
CHILDREN'S LIGHTHOUSE OF MN	PO 80X 52088	MINNEAPOLIS, MN 55402	CHILDREN	501(c)(3)	500
CYSTIC FIBROSIS FOUNDATION	5055 E WASHINGTON ST, STE 130	PHOENIX AZ 85034	HEALTH	501(c)(3)	1,000
DANCING CLASSROOMS	23 WEST 31 ST, 4TH FLOOR	NEW YORK CITY, NY 10001	COMMUNITY	501(c)(3)	2,500
FLORENCE CRITTENTON	715 W MARIPOSA ST	PHOENIX AZ 85013	CHILDREN	501(c)(3)	5,000
FRESH START WOMEN'S FOUNDATION	1130 E MCDOWELL RD	PHOENIX AZ 85006	COMMUNITY	501(c)(3)	30,000
FRIENDS OF CRISIS NURSERY	2334 E POLK ST	PHOENIX AZ 85006	CHILDREN	501(c)(3)	5,000 10,000
GRAND CANYON UNIVERSITY SCHOLARSHIP FOUNDATION	5025 N CENTRAL AVE STE 407 55 SECOND STREET, STE 1500	PHOENIX, AZ 85012 SAN FRANCISCO, CA 94103	EDUCATION EDUCATION	501(c)(3)	75,000
HISPANIC SCHOLARSHIP FUND	2302 W COLTER ST	PHOENIX AZ 85015	COMMUNITY	501(c)(3) 501(c)(3)	1,000
HOMEWARD BOUND HOSPICE OF THE VALLEY	1510 E FLOWER ST	PHOENIX AZ 85014	HEALTH	501(c)(3)	1,000
JOE TORRE SAFE AT HOME FOUNDATION	483 10TH AVE RM 410	NEW YORK, NY 10018	CHILDREN	501(c)(3)	10,000
KIPP LA SCHOOLS	4800 E CESAR CHAVEZ AVE	LOS ANGELES, CA 90022	EDUCATION	501(c)(3)	5,000
KU ENDOWMENT	PO BOX 928	LAWRENCE, KS 66044	EDUCATION	501(c)(3)	10,000
LIBERTY WILDLIFE	PO BOX 14345	SCOTTSDALE AZ 85267	ENVIRONMENT	501(c)(3)	5,000
LOS DESCENDIENTES	PO BOX 50871	TUCSON, AZ 85703	COMMUNITY	501(c)(3)	1,000
NOTRE DAME PREPARATORY	9701 E BELL RD	SCOTTSDALE AZ 85260	EDUCATION	501(c)(3)	2,500
PHOENIX ART MUSEUM	1625 N CENTRAL AVE	PHOENIX, AZ 85004	ARTS	501(c)(3)	6,000
PHOENIX CHILDREN'S HOSPITAL	1919 E THOMAS RD	PHOENIX, AZ 85016	CHILDREN	501(c)(3)	5,000
PHOENIX SYMPHONY	ONE NORTH 1ST ST, STE 200	PHOENIX, AZ 85004	ARTS	501(c)(3)	25,000
PHOENIX THEATRE	100 E MCDOWELL RD	PHOENIX, AZ 85004	ARTS	501(c)(3)	10,000
PROSTATE CANCER FOUNDATION	1250 FOURTH ST	SANTA MONICA, CA 90401	HEALTH	501(c)(3)	25,000
PUJOLS FAMILY FOUNDATION RICHARD SABALA MEMORIAL GOLF CLASSIC	111 WESTPORT PLZ, STE 255 PO BOX 869	ST LOUIS, MO 63146 MCCALL, ID 83638	COMMUNITY EDUCATION	501(c)(3) 501(c)(3)	10,000 500
SARRC	300 N 8TH ST	PHOENIX AZ 85006	HEALTH	501(c)(3)	1,000
SAN MIGUEL HIGH SCHOOL	6601 S SAN FERNANDO AVE	TUCSON AZ 85756	EDUCATION	501(c)(3)	5,000
SPECIAL OLYMPICS ARIZONA	1850 N CENTRAL AVE, STE 900	PHOENIX AZ 85004	CHILDREN	501(c)(3)	5,000
ST MARY'S FOOD BANK ST MATTHEWS SCHOOL	2831 N 31ST AVE 3316 SANDRA LN	PHOENIX AZ 85009 VIRGINIA BEACH, VA, 23484	COMMUNITY	501(c)(3) 501(c)(3)	25,000 5,500
ST PATRICK'S CATHEDRAL LANDMARK FOUNDATION	1011 FIRST AVE 17TH FL	NEW YORK, NY 10022	CHURCH	501(c)(3)	1,000
ST SEBASTIEN SPORTS PROJECT	PO BOX 1711	MANHATTAN BEACH, CA 90267		501(c)(3)	1,000
ST THOMAS THE APOSTLE (SCHOOL)	2312 E CAMPBELL AVE	PHOENIX AZ 85016	EDUCATION	501(c)(3)	10,000
ST THOMAS THE APOSTLE (CHURCH)	2312 E CAMPBELL AVE	PHOENIX AZ 85016	CHURCH	501(c)(3)	5,000
ST VINCENT DE PAUL TEACH FOR AMERICA	PO BOX 13600 3030 N CENTRAL AVE	PHOENIX, AZ 85002 PHOENIX AZ 85012	COMMUNITY	501(c)(3)	25,000 5,000
TGEN FOUNDATION	445 N 5TH ST. STE 120	PHOENIZ AZ 85004	HEALTH	501(c)(3) 501(c)(3)	28,000
TRENDS CHARITABLE FUND	5921 E. INDIAN BEND RD	PARADISE VALLEY AZ 85253	COMMUNITY	501(c)(3)	7,500
UNIVERSITY OF ARIZONA CANCER CENTER	1515 N CAMPBELL AVE., P O BOX 245024	TUCSON, AZ 85724-5032	HEALTH	501(c)(3)	1,000
UMOM NEW DAY CENTERS	333 E VAN BUREN ST	PHOENIX AZ 85008	COMMUNITY	501(c)(3)	30,000
UNC CHAPEL HILL	910 RALEIGH RD BOX 2688	CHAPEL HIII NC 27514	EDUCATION	501(c)(3)	10,000
UNIVERSITY OF ARIZONA FOUNDATION MENS CLUB	1111 N CHERRY AVE	TUCSON, AZ 85721	EDUCATION	501(c)(3)	500
WASHINGTON UNIVERSITY IN ST LOUIS	1 BROOKINGS DR, BOX 1210	SAINT LOUIS, MO 63130	EDUCATION	501(c)(3)	10,000
WOMEN'S BOARD - BARROW NEUROLOGICAL INSTITUTE	350 W THOMAS RD	PHOENIX AZ 85013	HEALTH	501(c)(3)	25,500
XAVIER COLLEGE PREPARATORY - FOUNDATION	4710 N 5TH ST 350 NORTH 1ST AVENUE	PHOENIX AZ 85012 PHOENIX AZ 85003	EDUCATION COMMUNITY	501(c)(3)	10,000 1,000
YMCA YWCA MARICOPA COUNTY	755 E WILLETTA ST	PHOENIX AZ 85006	CHILDREN	501(c)(3) 501(c)(3)	1,000
THE THE SHOOT A COUNTY	TOO E THEREITH OF	I I I CENTAL COOL	O. IICDNOT	30 I(C)(3)	826,700

## Form 8868

(Rev. January 2014)

## Application for Extension of Time To File an **Exempt Organization Return**

OMB No. 1545-1709

Department of the Treasury Internal Revenue Service

File a separate application for each return.

Internal Reven		► Information about Form 886	8 and its	Instructions is at www.irs.gov/form	18868 •			
● If you ar	re filing for an Aut	omatic 3-Month Extension, complet	e only Pa	rt I and check this box		<b></b>	X	
-		litional (Not Automatic) 3-Month Ext				***************************************		
Do not coi	molete Part II unle	ss you have already been granted a	an automa	tic 3-month extension on a previous	sly filed Form	8868.		
Electronic	c filing <sub>(e-file)</sub> . Yo	u can electronically file Form 8868 if y	ou need a	3-month automatic extension of tir	ne to file (6 m	onths for a corp	oration	
		or an additional (not automatic) 3-mor						
of time to	file any of the form	ns listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for	Transfers Ass	oclated With Ce	rtain	
Personal E	Benefit Contracts,	which must be sent to the IRS in pap	er format	(see instructions). For more details	on the electro	onic filing of this	form,	
visit www.		lick on e-file for Charities & Nonprofits.						
Part I		c 3-Month Extension of Time						
A corporal	tion required to file	e Form 990-T and requesting an auton	natic 6-mo	onth extension · check this box and	complete			
Part I only	,					<b>&gt;</b>	· []	
		ding 1120-C filers), partnerships, REM	ICs, and t	rusts must use Form 7004 to reques	st an extensio	n of time		
to file inco	me tax returns.				Enter filer's identifying number		nber	
Type or print	Name of exemp	t organization or other filer, see instru	her filer, see Instructions. Employer Identification		entification num	atlon number (EIN) or		
	MORENO F	'AMILY FOUNDATION			] (	86-091819	198	
File by the due date for filing your		and room or sulte no. If a P.O. box, s T CAMELBACK ROAD,				rlty number (SSN	۷)	
return. Ses instructions.		ost office, state, and ZIP code. For a fo			<u> </u>			
Application	00		Return	Application	<del></del>		Return	
Is For	Oli		Code	Is For			Code	
	or Form 990-EZ		01	Form 990-T (corporation)			07	
Form 990			02	Form 1041-A			08	
	0 (individual)		03	Form 4720 (other than Individual)			09	
Form 990			04	Form 5227			10	
Form 990	T (sec. 401(a) or	408(a) trust)	05	Form 6069			11	
Form 990	T (trust other tha		06	Form 8870			12	
• The ho	ooks are in the car	JEREL CAMPBELL e of ▶ 4455 EAST CAME	LBACK	ROAD SUITE D-145	- PHOE	NIX, AZ	85018	
Teleph	none No. ► (6	02) 667-9500		Fax No. ▶				
		not have an office or place of busines	s In the U	nited States, check this box		<b>&gt;</b>	• 🗀	
		urn, enter the organization's four digit					check this	
		rt of the group, check this box						
1 ire	quest an automat AUGUST 1!	lc 3-month (6 months for a corporation 5, 2014 to file the exemp		to file Form 990-T) extension of timation return for the organization name		ne extension		
is fo	or the organization							
	X calendar yea							
Ĭ	tax year begi		, ar	nd ending				
						•		
2 If th	he tax year entere	d In line 1 is for less than 12 months, o	check reas	son: Initial return	Final return			

Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

LHA 323841 12-31-13 For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any

If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and

estimated tax payments made. Include any prior year overpayment allowed as a credit.

Form 8868 (Rev. 1-2014)

За

Зb

6,326.

6,326.

Instructions.

Change in accounting period

nonrefundable credits. See instructions.

Form 8	868 (Rev. 1-2014)					Page 2		
	u are filing for an Additional (Not Automatic) 3-Month Ex	tension, o	complete only Part II and check this	s box		► LX.		
	Only complete Part II if you have already been granted an a				3868.			
	u are filing for an Automatic 3-Month Extension, complete	te only Pa	rt I (on page 1).					
Part	II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no co	pies needed	<u>).                                    </u>		
			Enter filer's	identifyin	g number, see	Instructions		
Type o	pe or Name of exempt organization or other filer, see instructions.  Employer identification numbers							
print						06 0010100		
File by the MORENO FAMILY FOUNDATION					86-0918198			
filing you	the date for liting your liting your 4455 EAST CAMELBACK ROAD, SUITE D-145				Social security number (SSN)			
Instructio	City, town or post office, state, and ZIP code. For a for PHOENIX, AZ 85018	oreign add	lress, see instructions.					
	PHOENIA, AZ 03010							
Enter t	he Return code for the return that this application is for (fik	e a separa	te application for each return)			04		
Applic	ation	Return	Application			Return		
Is For		Code	ls For			Code		
Form 9	90 or Form 990-EZ	01						
Form 9	90-BL	02	Form 1041-A			08		
Form 4	720 (individual)	03	Form 4720 (other than individual)			09		
Form 990-PF 04 Form :			Form 5227			10		
	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11		
	90-T (trust other than above)	06				12		
STOP!	Do not complete Part II if you were not already granted	an autor	natic 3-month extension on a pre	riously file	d Form 8868.			
	JEREL CAMPBELL books are in the care of ▶ 4455 EAST CAME	ייי ארט ד	DOND CITTUR D-145	מער	א באודע	95019		
• The	books are in the care of $\triangleright$ 4455 EAST CAPTED	PDACY		- Pho	ENIA, AL	03010		
	phone No. ► (602) 667-9500	_ :_ 44 1 1-	Fax No. >					
	e organization does not have an office or place of busines is is for a Group Return, enter the organization's four digit					n check this		
		7	ach a list with the names and EINs o					
<u>box</u> ▶			BER 17, 2014.	T COT THOUT LO	ers pie exteriore	17.6 101.		
	or calendar year 2013, or other tax year beginning		, and endir	nσ		_		
	f the tax year entered in line 5 is for less than 12 months, of	check reas	<del></del>	Final r	etum			
•	Change in accounting period							
7 :	State in detail why you need the extension							
	ADDITIONAL TIME IS NEEDED TO	GATHE	R THE INFORMATION	REQUI	RED TO F	ILE A		
	COMPLETE AND ACCURATE TAX RET	URN.						
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	\$	6,326.		
b	b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated							
,	tax payments made. Include any prior year overpayment al	llowed as	a credit and any amount paid		ļ			
	previously with Form 8868.			8b	\$	6,326.		
	Balance due. Subtract line 8b from line 8a. Include your pa	•	th this form, if required, by using	1		^		
	EFTPS (Electronic Federal Tax Payment System). See Instr	uctions.			\$	0.		
			st be completed for Part II			d		
Under the true	penalties of pergusy, I declare that I have examined this form, include, correct, and complete, and that I am authorized to prepare this fi	orm, orm,	panying schedules and statements, and l	io the best o				
Signati	ire > princi A. Duff Titte >	(	PA	Date		3-14_		
	<i>(</i> /				Form 886	B (Rev. 1-2014)		