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SCANNED SEP 2 7 2016

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.lrs.gov/form990of.

For	cale	ndar year 2014 or tax year beginning DEC	1, 2014	, and ending	NOV 30, 2015		
Na	me o	f foundation			A Employer identification	number	
			EXTENSION ATT	VCHED			
_		L MOON FOUNDATION			85-0406316		
		and street (or PO box number if mail is not delivered to street	address)	Room/suite	B Telephone number		
_		0 CORDOVA PLACE, #618			(505)984-3222		
		town, state or province, country, and ZIP or foreign p	ostal code		C if exemption application is p	ending, check here	
_		TA FE , NM 87505-1725 k all that apply: Initial return	I lasted setum of a fe	armar nublic abarits	D 1 Faraign arganizations	s shook hara	
u ,	HEC	k all that apply: Initial return Final return	Amended return	ormer public charity	D 1. Foreign organizations	s, check liefe	
		Address change	Name change		2. Foreign organizations me check here and attach co	eting the 85% test,	
H (:heck	k type of organization: X Section 501(c)(3) ex			1		
Ë	_	· · · · · · · · · · · · · · · · · · ·	Other taxable private founda	ation	E If private foundation sta under section 507(b)(1)		
I F	_		ng method: X Cash	Accrual	F If the foundation is in a	• •	
		Part II, col. (c), line 16)	ther (specify)		under section 507(b)(1)		
	-\$		mn (d) must be on cash i	basis)			
P	ırt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes	
		necessarily equal the amounts in column (a)	expenses per books	income	income	(cash basis only)	
	1	Contributions, gifts, grants, etc., received	0.		N/A		
	2	Check X if the foundation is not required to attach Sch. B Interest on savings and temporary					
	3	cash investments	21.	21.		STATEMENT 1	
	4	Dividends and interest from securities	13,988.	13,988.	<u> </u>	STATEMENT 2	
		Gross rents		-			
ne		Net rental income or (loss)	11 062				
	l ba	Ret gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line fa 419,655.	11,962.			<u> </u>	
Revenue	٦,	assets on line 6a 419,039. Capital gain net income (from Part IV, line 2)		11,962.			
Re	8	Net short-term capital gain		11,902.			
	9	Income modifications				<u> </u>	
	ı •	Gross sales less returns and allowances		 _			
		Less Cost of goods sold					
		Gross profit or (loss)					
	11	Other income					
	12	Total. Add lines 1 through 11	25,971.	25,971.			
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.	
	14	Other employee salaries and wages					
G		Pension plans, employee benefits					
Expenses		Legal fees STMT 3	9,360.	1,872.		7,488.	
Ç.		Accounting fees RECEIVEL	3,747.	3,747.		0.	
		Other professional lees STMT 4		3,747.		<u></u>	
αţį	17 18	Interest SEPSTMT 2816		149.		10.	
Operating and Administrative	19	Depreciation and depletion	12				
nin.	20						
Adr	21	Occupancy Travel, conferences, and meetings					
ď		Printing and publications					
g	23	Other expenses STMT 6	2.	2.		0.	
atir	24	Total operating and administrative					
per		expenses. Add lines 13 through 23	13,268.	5,770.		7,498.	
0	25	Contributions, gifts, grants paid	20,000.			20,000.	
	26	Total expenses and disbursements.	22.22	F 885		07 400	
		Add lines 24 and 25	33,268.	5,770.		27,498.	
			-7 207				
		Excess of revenue over expenses and disbursements	<7,297.	20,201.			
		Net investment income (if negative, enter -0-)		20,201.	N/A		
4235	1	Adjusted net income (if negative, enter -0-) LHA For Panerwork Reduction Act Notice, see	inetructions		41/ 🕰	Form 990-PF (2014)	

1

Fo	rm 99	90-PF (2014) FULL MOON FOUNDATION		85-	5-0406316 Page 2		
<u></u>	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of			
		column should be for end-or-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
		Cash - non-interest-bearing	10.106	40 554	40 774		
		Savings and temporary cash investments	40,126.	40,774.	40,774.		
	3	Accounts receivable	1				
	١.	Less: allowance for doubtful accounts					
	4	Pledges receivable ► Less: allowance for doubtful accounts ►	ŀ				
	_	Grants receivable					
	1 -	Receivables due from officers, directors, trustees, and other					
	ľ°	disqualified persons					
	٦,	Other notes and loans receivable					
	Ι΄	Less: allowance for doubtful accounts					
s	8	Inventories for sale or use					
Assets	1	Prepaid expenses and deferred charges					
As		Investments - U.S. and state government obligations			<u> </u>		
		Investments - corporate stock					
		: Investments - corporate bonds	***				
		Investments - land, buildings, and equipment basis					
		Less accumulated depreciation					
	12	Investments - mortgage loans					
	13	Investments - other STMT 7	730,574.	722,629.	722,330.		
	14	Land, buildings, and equipment basis ►					
		Less accumulated depreciation					
	15	Other assets (describe)					
	16	Total assets (to be completed by all filers - see the					
	L	ınstructions. Also, see page 1, item l)	770,700.	763,403.	763,104.		
		Accounts payable and accrued expenses					
	18	Grants payable					
es		Deferred revenue					
Liabilities		Loans from officers, directors, trustees, and other disqualified persons					
į	ı	Mortgages and other notes payable					
_	22	Other liabilities (describe)					
	١,,	Total link littles (add less 47 Messack 00)	0.	0.			
_	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here					
		•					
S		and complete lines 24 through 26 and lines 30 and 31. Unrestricted	770,700.	763,403.			
ances	ı	Temporarily restricted	770,700.	703,403.			
		Permanently restricted					
Net Assets or Fund Bal	20	Foundations that do not follow SFAS 117, check here					
₫		and complete lines 27 through 31.					
ğ	27	Capital stock, trust principal, or current funds					
sets	28	Paid-in or capital surplus, or land, bldg., and equipment fund					
As	29	Retained earnings, accumulated income, endowment, or other funds					
Ě	30	Total net assets or fund balances	770,700.	763,403.			
_			"				
	31	Total liabilities and net assets/fund balances	770,700.	763,403.			
F	art	Analysis of Changes in Net Assets or Fund B	alances				
=			20				
		net assets or fund balances at beginning of year - Part II, column (a), line ast agree with end-of-year figure reported on prior year's return)	30	1	770,700.		
	,	st agree with end-or-year figure reported on prior year's feturn) r amount from Part I, line 27a		2	<7,297.>		
		r increases not included in line 2 (itemize)		3	0.		
-		lines 1, 2, and 3		4	763,403.		
		eases not included in line 2 (itemize)		5	0.		
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	763,403.		
Ĺ					Form 000 DE (2014)		

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		N FOUNDATIO						8	35-040	6316	Page 3
Part IV Capital Gains a	ind Los	sses for Tax on In	vestmen	t Income							
(a) List and descri	be the kin	d(s) of property sold (e.g.	, real estate,		(p)	How a - Purc	cquired chase ation	(c) Date	acquired day, yr.)	(d) Dat	
		r common stock, 200 shs	·		Ď	- Don		(1110.,	Jay, yr.)	(mo., d	ay, yr.)
1a SALE OF PUBLICE			TIES		<u> </u>		P				
b CAPITAL GAINS I	TATD	ENDS			-						
d					<u> </u>						
<u>u</u>			-								
	(f) D	epreciation allowed	(n) Co	st or other basis	┪			(h) (Sain or (loss)		
(e) Gross sales price		(or allowable)		expense of sale					s (f) minus (
a 406,861.			,	407,69	3.						<832.
b 12,794.				· · · · · · · · · · · · · · · · · · ·						12	,794.
C											
<u>d</u>											
е			<u> </u>								
Complete only for assets showing							(1)	Gains (C	Col. (h) gain r not less than	ninus	
(i) F.M V. as of 12/31/69 (j) Adjusted basis (k) Excess of col. (i) over col. (j), if any				ÇUI.	Losses	(from col. (h	-0-) 01 1))				
								-022			
a b					\dashv						<832. ,794.
C					\dashv					12	, 194.
d											
e											
		C If som also setes	on Don't Live		╮┤		ĺ				
2 Capital gain net income or (net cap	ital loss)	If gain, also enter If (loss), enter -0-	in Part I, line in Part I, line	7	- [2				11	,962.
3 Net short-term capital gain or (loss	,		-	•	7					-	<u>- </u>
If gain, also enter in Part I, line 8, c			1 (0).		1						
If (loss), enter -0- in Part I, line 8					Ŋ	3			N/A		
Part V Qualification Un	ider Se	ction 4940(e) for	Reduced	Tax on Net	lnv	estn	nent Inc	ome		-	
(For optional use by domestic private f	oundation	is subject to the section 4	940(a) tax on	net investment in	come	.)					-
If section 4940(d)(2) applies, leave this	e nart hlar	lv									
in Section 4340(a)(2) applies, leave the	s part blar	N-									
Was the foundation liable for the section				•	od?					Yes	X No
If "Yes," the foundation does not qualify 1 Enter the appropriate amount in ea											
/a\	ich colum	<u></u>	structions de	iore making any er				т—		(d)	
Base period years	\	(b) Adjusted qualifying distr	ributions	Net value of nor	(c) nchar	ıtable-	use assets		Distribution (col. (b) divid	(d) ition ratio	(c))
Calendar year (or tax year beginning 2013))	, tajaotoa quamjing aloti	10.	100 100 07 1101			1,705		(col. (b) divid	<u>.</u>	00013
2013			L,758.	-			$\frac{1,705}{2,225}$				02434
2011			5,575.				1,636				86820
2010			7,558.				0,939				$\frac{11611}{11611}$
2009	- -		5,906.				7,972				36949
	······										
2 Total of line 1, column (d)								2		.33	37827
3 Average distribution ratio for the 5-	year base	period - divide the total or	ı line 2 by 5,	or by the number	of yea	ırs					
the foundation has been in existence	e if less th	ian 5 years						3		.06	<u> 67565</u>
4 Enter the net value of noncharitable	-use asse	ts for 2014 from Part X, III	ne 5					4		781	<u>,455.</u>
											500
5 Multiply line 4 by line 3								5		52	<u>,799.</u>
											202
6 Enter 1% of net investment income	(1% of Pa	art I, line 27b)						6	_		202.
								,		53	,001.
7 Add lines 5 and 6								7		33	, 001.
9 Enter qualifican distributions from I	Dart VII I	na <i>1</i>						8		27	,498.
8 Enter qualifying distributions from F			lb and s	lata that namt	404	tov -	nta	ــــــــــــــــــــــــــــــــــــــ			
If line 8 is equal to or greater than li See the Part VI instructions.	π υ /, CΠ Θ (sk uie pox in Part VI, line 1	ы, ани сотр	iete mat batt using	ja 17	ا الملا آ	atc.				
423521 11-24-14		 			-				Fo	rm 990-l	F (2014)
· · · - · · · ·											,

Exempt operating foundations discursed in section 4940(g), 4940(g), 4940(g), 4940(g), or 4946 - see instructions) Exempt operating foundations discursed in section 4940(g); check here		85-040			Page 4
Domestic foundations that meet the section 4940(e) requirements in Part V, check here	Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 - se	<u>e instru</u>	<u>ıctio</u>	ns)
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	1a Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1.				
of Part I, Ine 27b o All other domestic foundations enter 2% of Ine 27b, Exempt foreign organizations enter 4% of Part I, Ine 12, col. (b). 2 Tax under actions 511 (comestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add fines 1 and 2 3 Jubitia 5 (notione) lax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Substitia 5 (notione) lax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from Ima 3 If zero or less, enter -0- 5 Cedets-Payments: a 2014 estimated tax payments and 2013 overpayment credited to 2014 5 Exempt foreign organizations -1xx withheld at source 5 Tax pad with application for extension of time to file (Form 8569) 6 Exempt foreign organizations -1xx withheld at source 5 Tax double with adaptive and payments. Adult lines 5 thirt ough 6 6 Enter any penalty for underpayment of estimated tax. Check here in 16 Form 2220 is attached 7 Tax due. If the folial clinis 5 and 8 smore than in 7, enter amount own 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Enter the amount of line 10 to be credited to 2015 estimated tax. 11 Enter the amount of line 10 to be credited to 2015 estimated tax. 12 Exempt foreign of line 10 to be credited to 2015 estimated tax. 13 Exempt foreign of line 10 to be credited to 2015 estimated tax. 14 Exempt foreign of line 10 to be credited to 2015 estimated tax. 15 If Yes, and the foundation attempt to effect enterty or indirectly) for political purposes (see instructions for the definition)? 15 If the answer is Yes's to age or p ₁ , a stack a declared description of the activities and coppes of any materials published or distributed by the foundation in connection with the activities 16 Enter the remitious energy of the changes 18 Exempt foreign in struments? If Yes, a	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
c All other domestic foundations enter 2% of thin 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-) 3 404.4 4 Subultie A (microme) tax (domestic section 4947(a)(1) trusts and taxable foundations only, Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3 it zero riess, enter -0- 6 Credisc,Payments: a 2014 estimated tax payments and 2013 overpayment credided to 2014 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) 6 E 6 E 6 E 6 Beckup withholding erroneously withheld 7 Total credits and payments. Add lines 6 at though 6d 7 Interest organization of time to file (Form 8868) 6 E 7 Interest organization of time 10 file (Form 8868) 7 Interest organization of time 10 file (Form 8868) 8 E 8 E Inter any pearly for underspayment of estimated tax. Check here I if Form 2220 is attached 9 Tax dee. If the total of lines 5 and 8 is more than line 0, cetter amount overpaid 1 Interest have a series of the total of lines 5 and 8 is more than line 0, cetter amount overpaid 1 Interest have a series of the form 10 to be; Credited to 2015 estimated tax ► 1 Interest have a series of the form 10 to be; Credited to 2015 estimated tax ► 1 Interest have a series of the form 10 to be; Credited to 2015 estimated tax ► 1 Interest have a series of the form 10 to 10 trends of the series of the	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%	1		4	04.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 4 Subititie A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on Investment Income. Subtract line 4 from line 3 il zero or less, enter -0- 5 Tax based on Investment Income. Subtract line 4 from line 3 il zero or less, enter -0- 5 Tax based on Investment Income. Subtract line 4 from line 3 il zero or less, enter -0- 5 Tordis credits and payments. Add lines 6 a through 60 6 Exempt foreign organizations -1 with lines 6 a through 60 6 Exempt foreign organizations -1 with lines 6 a through 60 7 Total credits and payments. Add lines 6 a through 60 8 Enter any peasity for underpayment of estimated tax. Check here	of Part I, line 27b				
3 A 404. Solubla R (normon) kax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on lines and 2013 overpayment credited to 2014 Exempt foreign organizations - Lax withheld at source Tax pad with appocitant or settinson of time to the (Form 8868) G Baskup withholding erroneously withheld Total credits and payments. And lines 6a through 6d Enfor any pearly for underpayment of estimated tax. Check here in firm 2220 is attached Find a payments. And lines 6a through 6d Enfort any pearly for underpayment of estimated tax. Check here in firm 2220 is attached Find a payments. And lines 6a through 6d Enfort any pearly for underpayment of estimated tax. Check here in 10 overpayment. If the 7s more than the total of lines 5 and 6, enter the annount overpaid 11. 1. 41. Refunded in 10 overpayment. If the 7s more than the total of lines 5 and 6, enter the annount overpaid 11. 1. 41. Refunded in 10. 1. 1. 1. 1. Refunded in 10. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				
4 Subtile A (innorme) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on Investment Income. Subtract line 4 from line 3 if zero or less, enter -0- 6 Gredder-Pyments; a 2014 estimated tax payments and 2013 overpayment credited to 2014 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld f Total credits and payments. Add lines 6a through 6d 6 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 7 Total credits and grayments. Add lines 6a through 6d 6 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8, enter the amount owed 9 Tax due. If the total of lines 5 and 8, enter the amount owed 9 Tax due. If the total of lines 5 and 8, enter the amount owed 10 overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount ower paid 11 Enter the amount of line 10 to be: Credited to 2015 estimated tax 1	2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			
5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter-0- 6 Cedist-Payments: 2 2014 estimated tax payments and 2013 overpayment credited to 2014 b Exempt foreign organizations - tax withheld at source 1 Tax paid with application for extension of time to file (Form 8669) 6 Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6 air brough 64 6 Enter any penalty for undersyment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment, lift me 7 is more than the total of lines 5 and 8, enter the amount overpald 11 Enter the amount of line 10 to be: Credited to 2015 estimated tax ► 1,141. Refunded ► 11 0. Part VII-A Statements Regarding Activities 1 During the tax year, did the foundation attempt to influence any and the activities and copies of any materials published or distributed by the foundation in connection with the activities 1 During the tax year, due the foundation attempt to influence any and the activities and copies of any materials published or distributed by the foundation in Connection with the activities 1 During the tax PoPOL, for this year? 2 In the answer is "Yes" to 7 ₈ O" 1 ₈ , attach a detailed description of the activities 3 Use the termination of the activities 4 During the tax flied a tax return of PoPOL, for this year? 5 In the foundation in Form 190-10 Life this year? 6 Enter the remiburisement (if any) paid by the foundation diving the year (political purposes (see instructions for the definition)? 8 Enter the remiburisement (if any) paid by the foundation diving the year (1) on foundation managers ► \$ 0. 9 Enter the remiburisement (if any) paid by the foundation advantage to year or political expenditure tax imposed on foundation managers ► \$ 0. 1 Enter the remiburisement (if any) paid by the foundation of the activities 1 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	3 Add lines 1 and 2	3		4	
6 Credits/Payments: a 2014 estimated tax payments and 2013 overpayment credited to 2014 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed 10 overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed 10 overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed 11 tenter the amount of line 10 to be Credited to 2015 estimated tax 1	4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			
a 2014 estimated tax payments and 2013 overpayment credited to 2014 b Exempt forcing or organizations - tax withheld at source c Tax paid with application for extension of time to life (form 8858) d Backup withholding eroneously withheld 7 Total credits and payments. Add these 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here I form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owner. If her is more than line 10 lines 5 and 8, enter amount owner. If her is more than line 10 lines 5 and 8, enter the amount of lines 11 in line 10 lines 5 and 8, enter the amount of lines 5 and 8, enter the amount of lines 11 in line 10 lines 5 and 8, enter the amount of lines 5 and 8, enter the amount of line 10 lines 5 and 8, enter the amount of line 10 lines 5 and 8, enter the amount of line 10 lines 5 and 8, enter the amount of line 10 lines 5 and 8, enter the amount of line 10 lines 5 and 8, enter the amount of line 10 lines 5 and 8, enter the amount of line 10 lines 5 and 8, enter the amount of line 10 lines 5 and 8, enter the amount of line 10 lines 5 and 8, enter the amount of line 10 lines 5 and 8, enter the amount of line 10 lines 5 and 8, enter the amount of line 10 lines 5 and 8, enter the amount of line 10 lines 5 and 8, enter the amount of line 10 lines 5 and 8, enter the amount of lines 10 lines 5 and 8, enter the lines 10 lines 5 and 8, enter the amount of lines 10 lines 5 and 8, enter the amount of lines 10 lines 10 lines 5 and 8, enter the activities 1 bill 4 septiments 10 lines 5 and 8, enter the amount of lines 10 lines 5 and 8, enter the activities 2 bill 4 lines answer is "Yes" to 1 for 11, statish a detailed description of the activities 3 bill 4 lines 10 lines 5 lines 10 lines 5 and 8, enter the statish lines 10 lines	5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5		4	04.
b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6 at brough 6d 8 Enter any penalty for underpayment of estimated tax. Check here form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than the rot total of lines 5 and 8, enter the amount owed 10 Overpayment. If her 2 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 lot be: Credited to 2015 estimated tax. Part VIII-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 interview in any obtical campaign? b Did it spend more than 5100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? If the answer is "Yes" to 1 ₈ or 1 ₁₀ , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities c Did the foundation his Form 1120-PDL for this year? 1 Tyes, "attach a detailed description of the activities 1 Has the foundation made any changes, not previously reported to the IRS? If "Yes," attach a detailed description of the activities 1 Has the foundation have metaled business gross is income of \$1,000 or more during the year? If "Yes," attach the statement required by General Instruction 7. 8 Has the foundation have metaled business gross is income of \$1,000 or more during the year? If "Yes," tatach the statement required by General Instruction 7. 8 Has the foundation have metaled business gross is income of \$1,000 or more during the year? If "Yes," tatach the statement required by General Instruction 7. 8 Has the foundation have metaled business gross is income of \$1,000 or more during the year? If "Yes," tatach the statement required by General Instruction 7. 8 Has the foundati					
c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld T Total credits and payments. Add thes 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here	a 2014 estimated tax payments and 2013 overpayment credited to 2014 6a 1,545.				
d Backup withholding erroneously withheld 7 Total credits and payments. Add lines & at through 64 8 Enter any penalty for underpayment of estimated fax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If the 7 is more than the total of lines 5 and 8, enter the amount overpald 11 Enter the amount of line 10 to be. Credited to 2015 estimated tax ▶ 1, 141. Refunded ▶ 10 11 T., 141. 11 Enter the amount of line 10 to be. Credited to 2015 estimated tax ▶ 1, 141. Refunded ▶ 11 10 C. Part VIII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation intempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1b Id it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b If the answer is Yes' to 1 ₁₀ or 1 ₁₀ to 1 ₁₀ t	b Exempt foreign organizations - tax withheld at source 6b				
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	The pile any persons decome substantial continuous during the tax year. It res, attach a schedule listing their names and addresses	F		-PF	

orn	1 990-PF (2014) FULL MOON FOUNDATION 85-	-0406316		Page 5
	art VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			[
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileg	es?		
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► LAWRENCE TAUB, ESQ Telephone no. ► 50)5-98 4 -3	222	
	Located at ► 1000 CORDOVA PLACE, #618 ZIP+	4 ► 87505	<u> </u>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	_	▶	•
	and enter the amount of tax-exempt interest received or accrued during the year	<u> </u>	[/A	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,	,	Yes	
	securities, or other financial account in a foreign country?	16	<u> </u>	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the	e		
_	foreign country			Щ.
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		15.7	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	a During the year did the foundation (either directly or indirectly)	₌₁		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	NO P		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes	ភ │		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes 2			
	(4) - 3)	NO		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	77 No.		
	,	NO		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) Yes 2	77 u.a.		
		- 00 F		
	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	N/A 1b		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A 1b	 -	├─
_	Organizations relying on a current notice regarding disaster assistance check here	-		
(Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	10		x
•	before the first day of the tax year beginning in 2014? There are follows to distribute groups (costing 4040) (does not each far years the foundation was a private exerciting foundation.	16		
Z	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)). At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
•	before 2014?	Z No		
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
,	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
٠	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions)	1/A 2b		
	to the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
-	during the year?	☑ No		
ŧ	o If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	, [
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	1		
	Form 4720, to determine if the foundation had excess business holdings in 2014)	N/A 3b		
48	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
į	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tay year beginning in 2014?	4b		Х

423541 11-24-14

If Yes' to 66, the Form 8870. Yes X No	Form 990-PF (2014) FULL MOON FOUNDATION			<u>85-04063</u>	316	Page 6
(1) Carry on propaganda, or otherwise alternat to entituence legislation (section 4956); or to carry on, directly or indirectly, any voter registration dive? (2) Influence the outcame of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration dive? (3) Provide a grant to an individual for travel, study, or other smalar purposes? (4) Provide a grant to an individual for travel, study, or other smalar purposes? (5) Provide for any purpose other than religious, charloble, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (5) Provide for any purpose other than religious, charloble, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (5) Provide for any purpose other than religious, charloble, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (5) Provide for any purpose other than religious, charloble, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (6) Provide for any purpose other than religious, charloble, scientific, literary, or educational purposes, or for the prevention of the scientific or the crue of the company of the scientific or the crue of the c		Form 4720 May Be	Required (conti	nued)		
(a) Inflaence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter reparation of three reparations of the reparation of the reparat						Į
any voter registration drive? (3) Provide a grant to an organization other than a charitable, etc., organization described in section (4) Provide a grant to an organization other than a charitable, etc., organization described in section (5) Provide a grant to an organization other than a charitable, etc., organization described in section (6) Provide a grant to an organization other than a charitable, scientific, iterary, or educational purposes, or for the prevention of cruelty to children or animals? If any answer six vest to 5(1)-(5) dut any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions?) Organizations exhipm on a current notice regarding disaster assistance (see instructions?) Organizations exhipm on a current notice regarding disaster assistance (see instructions?) N/A Ves \(\text{No} \) N/A Ves \(\text{No} \) If the answer is "ves' to question 53(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If Yes, "affacts the statement netured by Regulations section 53.4945-5(d) 8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If Yes \(\text{No} \) If Yes \(\text{No} \) If the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If Yes \(\text{No} \) If Yes \(\text{No} \) If If Yes \(\text{No} \) If If year to fail, the form 870? If Yes \(\text{No} \) If If Y				'es LXJNo		ı
(3) Provide a grant to an organization other than a chanishe, etc., organization described in section 495(c)(4)(4)(7) (See instructions) (5) Provide to grant to an organization other than a chanishe, etc., organization described in section 495(c)(4)(4)(7) (See instructions) (6) Provide for any prospec other than religious, charistole, scentinic, letrary, or educational purposes, or for the prevention of cruelty to Address or a district of the formation of the provision of the p		or to carry on, directly or indir				
(4) Provide a grant to an organization other than a chantable, etc., organization described in section 4945(6)(4)(4)(2 (centifications) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of crulely to children or animals? 10 If any answers "Yes 150 3(1)(5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding desister assistance (see instructions)? Organizations (Paylon on a current notice regarding desister assistance dese instructions)? Organizations (Paylon on a current notice regarding desister assistance dese instructions)? Organizations (Paylon on a current notice regarding desister assistance) I all the answers "Yes to question 54(4), does the foundation deam exemption from the tax because it maintained expenditure responsibility for the grant? If Yes a statistic the statement required by Regulations section 53.4945-5(d) 8a Dot the foundation, during the year, reserve any funds, circlety or indirectly, to pay premums on a personal benefit contact? If Yes ' 106, the Form 887. I a tray time during the tax year, was the foundation a party to a prohibited tax sheller transaction? If Yes I No By If Yes, and the foundation region any process for ware any net necessity and attributable to the transaction? If Yes I No By If Yes and the foundation region any process for ware any net necessity and attributable to the transaction? If I stall all officers, directions, trustees, foundation managers and their compensation. (a) Name and address (b) Titis, and average foundation for the properties of the						-
4945(d)(4)(A)(A)(exe matructions) (S) Provided for any purpose other than retigious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? It is any answer is "se' to \$54(1)-(5), did any of the transactions fail to quality under the exceptions described in Regulations section \$53 495 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here It the answer is "se' to question \$44(1), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "ses," attach the statement required by Regulations section \$3.4945-5(d) B obt the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If "ses," to 6b, hie Form 8870. B obt 40 the foundation during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If "ses," to 6b, hie Form 8870. B obt 19 Yes, "did the foundation exceived any proceeds or have any net mome attributable to the transaction? If I set all officers, directors, trustees, foundation managers and their compensation. Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly I list all officers, directors, trustees, foundation managers and their compensation (if not paid, entirely) and entirely of the property promition of the property promition of the property promition of the property promition of the first of the property of the property property promition of the first of the property promition of the first property promition of the first property promition of the property promition of the			L Y	es X No	i	İ
(s) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? b If any answer is "to 50 (1/45), did any of the transactions fall to quality under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? If we assist the statement required by Regulations section 53.4945-5(d) 6a Ib dite foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If wes' to 6b, the Form 8877. To At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? To Be any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? I list all officers, directors, trustees, foundation managers and their compensation. List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Transaction (C) Compensation	(4) Provide a grant to an organization other than a charitable, etc., organizat					
b I day answers "Yes to SL(1)-(i), do any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here if the answers "Yes to question Sd(4), does the foundation claim verificial for the statement required by Regulations section 53.4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes," after the statement required by Regulations section 53.4945-5(d) 6a Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes," to 6b, the Form 870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes, "I No. 1b It "Yes," did the foundation receive any proceeds or have any net ancome attributible to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Take I and officers, directors, trustees, foundation managers and their compensation (if not plan). (a) Name and address PRES, SEC, TREAS, DIR TOBI TRAVIS PO BOX 213 PRES, SEC, TREAS, DIR PRES, SEC, TREAS, DIR SIN VALLEY, ID 83353 1.00 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	, , , , , , , , , , , , , , , , , , , ,		es X No	- 1	ļ	
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c It the answer is Yes to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes to 6b, file Form 8870. 7 At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If "Yes to 6b, file Form 8870. 7 At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If I list all officers, directors, trustees, foundation managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Title, and average hours per week devoted (Intel paid, compensation) (Intel paid, c	section 53 4945 or in a current notice regarding disaster assistance (see inst		N/A	5b	1	
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## Yes, 'attach the statement required by Regulations section 33.494-5(g) 8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ## Yes * Cob, the Form \$870. 7a Att any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7b I * Yes * Cob, the Form \$870. 7a Att any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 1 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Tills, and average hous general transaction? PRES, SEC, TREAS, DIR TOBI TRAVIS PRES, SEC, TREAS, DIR PRES, SEC, TREAS, DIR 1.00 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0	c If the answer is "Yes" to question 5a(4), does the foundation claim exemption	from the tax because it mainta	uned			
Sa Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If 'Yes' to bb, file Form 8870. 7 At At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If 'Yes' to bb, file Form 8870. 7 At at any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If 'Yes' to bb, file Form 8870. 7 At at any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Tills, and average of the transaction? (c) Compensation (find total) of the foundation from the discount of the file of the transaction? PRES, SEC, TREAS, DIR TOBI TRAVIS PRES, SEC, TREAS, DIR PRES, SEC, TREAS, DIR 1.00 0.0.0.0 0.0.0	expenditure responsibility for the grant?	Ŋ	1/A □ Y	es . No	- }	
Sa Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If 'Yes' to bb, file Form 8870. 7 At At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If 'Yes' to bb, file Form 8870. 7 At at any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If 'Yes' to bb, file Form 8870. 7 At at any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Tills, and average of the transaction? (c) Compensation (find total) of the foundation from the discount of the file of the transaction? PRES, SEC, TREAS, DIR TOBI TRAVIS PRES, SEC, TREAS, DIR PRES, SEC, TREAS, DIR 1.00 0.0.0.0 0.0.0	If "Yes," attach the statement required by Regulations section 53.49	45-5(d)	,		į	
a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? if Yes's 10 6b, the Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If Yes's 10 6b, the Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Part Viii Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (a) Name and address (b) Title, and average hours per week devolved in the position of the position of the position of the position of the position of the position of the position of the position of the position of the position of the position of the position of the highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 D) D) D) D) D) D) D) D				1	l l	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If a transport the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (a) Name and address (b) Title, and average of the position of the position of the position of the file of the transaction? (a) Name and address (b) Title, and average of the transaction of the highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) TIRECTOR, V.P. (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (b) Title, and average devoted to position of the highest-paid employees (other than those included on line 1). If none, enter "NONE." (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Title, and average devoted to position of the highest-paid employees paid over \$50,000		, , , , , , , , , , , , , , , , , , , ,	Y	es X No		
If Yes' to 6b, life Form 8870. Yes X No	b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6b	x
b If Yes,* did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII		p		F	-	+
b If Yes,* did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII	7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?		as X No		
Intermation About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. Contractors					7h	
Toble Travis (a) Name and address (b) Title, and average hours per week devoted position (f) not paid, enter -0) Toble Travis FO BOX 213 SUN VALLEY, ID 83353 SUN VALLEY, ID 83353 1.00 0.0 0.0 0.0 0.0 0.0 0.0 0			nagers Highl			
(a) Name and address (b) Title, and average hours per week devoted by position (c) Compensation (if not paid, enter -0-)	Paid Employees, and Contractors	toos, i oundation me	inagers, riigin	y		
(a) Name and address (b) Title, and average hours per week devoted by position (c) Compensation (if not paid, enter -0-)	1 List all officers, directors, trustees, foundation managers and their	r compensation.				
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FO BOX 213 SUN VALLEY, ID 83353 1.00 0.0.0 PHILLTP AARON HALEEN PO BOX 213 SUN VALLEY, ID 83353 1.00 0.0.0 0	TOBI TRAVIS			compensation	allov	ances
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SUN VALLEY, ID 83353 1.00 0.0 0.0 0.0 0.0 0.0 0.0 0				U •		
SEAN HALEEN PO BOX 21.3 SUN VALLEY, ID 83353 1.00 0.0.0 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours give week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deterred account, other allowances (e) Compensation (f) Compensation (o) Compensatio		DIRECTOR, ASS	pr. sec.]	
DIRECTOR, V.P. PO BOX 213 SUN VALLEY, ID 83353 1.00 0.0 0 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (c) Compensation (d) Contributions to employee benefit plans and defense account, othe allowances (e) Expense devoted to position Fotal number of other employees paid over \$50,000		1 00	_	م ا	ì	0
SUN VALLEY, ID 83353 1.00 0.0 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position NONE (c) Compensation (d) Contributions to employee breefit plans and deferred compensation allowances (c) Compensation (d) Contributions to employee breefit plans and deferred compensation (e) Expense account, other allowances				0.		
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours prevek devoted to position (c) Compensation (d) Community part employee benefit plans and deterred compensation (e) Expense devoted to position		DIRECTOR, V.P]•	l	}	
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Compensation employee paid more than \$50,000 (e) Expense account, other allowances (o) Compensation		1 1 1		,	1	•
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans account, othe allowances (e) Expense account, othe allowances (f) Compensation (h) Title, and average hours per week devoted to position (h) T	SUN VALUEI, ID 03333	1.00	0.	<u> </u>		0.
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(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans account, othe allowances (e) Expense account, othe allowances (f) Compensation (h) Title, and average hours per week devoted to position (h) T			<u> </u>			
NONE Total number of other employees paid over \$50,000	2 Compensation of five nignest-paid employees (other than those in		enter "NONE."	C76V2		
NONE Total number of other employees paid over \$50,000	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans	accoul	ot, other
Fotal number of other employees paid over \$50,000		devoted to position	(0)	compensation	allow	rances
	NONE					
]				
]				
]				
		1 .				
	Total number of other employees paid over \$50,000	,		I		0
				Form	990-PI	(2014)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) C	ompensation
NONE (B) 1/ypc of solution	- 1075	
140/41		
	- 	
	1	
		
·····		
		0
Total number of others receiving over \$50,000 for professional services Part X-A Summary of Direct Charitable Activities	>	<u> </u>
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.	Expen	ses
	 	
1N/A	4	
	4	
	<u> </u>	
2	1	
	1	
3	1	
	1	
	ļ <u>.</u>	
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amou	int
1 N/A	_]	
]	
	<u> </u>	
2		
All other program-related investments. See instructions		
3		
	j	
Total. Add lines 1 through 3		0.
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For	m 990-PF (2014) FULL MOON FOUNDATION	85-0406316	Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, see instructions.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a 748	<u>,719.</u>
b	Average of monthly cash balances		,636.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d 793	,355.
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		,355.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)		,900.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		,455.
6	Minimum investment return Enter 5% of line 5		,073.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here ▶ ☐ and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1 39	,073.
2a			
b			
C	Add lines 2a and 2b	2c	404.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3 38	,669.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5 38	,669.
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 38	,669.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	27	400
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a 27	,498. 0.
b	Program-related investments - total from Part IX-B		<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)		
b	Cash distribution test (attach the required schedule)	3b	100
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4 27	,498.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		^
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		<u>,498.</u>
	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	qualifies for the section	

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	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
Distributable amount for 2014 from Part XI,	Сограз	rears prior to 2013	2013	2014
line 7				38,669
2 Undistributed income, if any, as of the end of 2014		·		30,003
a Enter amount for 2013 only			0.	
b Total for prior years.				
, ,		0.		
3 Excess distributions carryover, if any, to 2014:				
aFrom 2009 85,191.				
b From 2010				
c From 2011 27,501.			i	
d From 2012				
e From 2013				
f Total of lines 3a through e	112,692.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: ►\$ 27,498.			_	
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		İ		
(Election required - see instructions)	0.			05 400
d Applied to 2014 distributable amount				27,498
e Remaining amount distributed out of corpus	11,171.			11 171
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	11,1/10			11,171
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	101,521.			
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			ĺ	
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 2013. Subtract line		ļ	_ 1	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014 Subtract				
lines 4d and 5 from line 1. This amount must				0
be distributed in 2015				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2009	· · ·			
not applied on line 5 or line 7	74,020.			
9 Excess distributions carryover to 2015.	74,020			
Subtract lines 7 and 8 from line 6a	27,501.			
10 Analysis of line 9:	2773021			
a Excess from 2010	į			
b Excess from 2011 27,501.				
c Excess from 2012				
d Excess from 2013				
e Excess from 2014		[
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	ON FOUNDATI			85-04	06316 Page 1
Part XIV Private Operating F				N/A	
1 a If the foundation has received a ruling of	or determination letter tha	t it is a private operating	T	•	
foundation, and the ruling is effective fo			▶		
b Check box to indicate whether the foun	d <u>ation is a private operati</u>	ng foundation described	in section	4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
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		ĺ			
exempt activities					
e Qualifying distributions made directly			1		
for active conduct of exempt activities		1			
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	ļ				
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			1		
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public			 	<u> </u>	
and 5 or more exempt			ĺ		
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from		 -	-	<u> </u>	
an exempt organization		•			
(4) Gross investment income					*
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during t				***************************************	
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation who	have contributed more t	han 2% of the total cont	ributions received by the	foundation before the clos	e of any tax
year (but only if they have contributed m	iore than \$5,000) (See se	ection 507(d)(2).)			
SEE STATEMENT 8					
b List any managers of the foundation who			or an equally large portion	on of the ownership of a pa	rtnership or
other entity) of which the foundation has	a 10% or greater interes	τ.			
NONE					
2 Information Regarding Contributi					
Check here X if the foundation of the foundation makes gifts, grants, etc.	nly makes contributions to	o preselected charitable	organizations and does n	iot accept unsolicited requi	ests for funds. If
	 				u.
a The name, address, and telephone numb	er or e-mail address of th	ie person to whom appli	cations should be addres	ssed:	
b The form in which applications should be	e submitted and informati	on and materials they sl	nould include:		
c Any submission deadlines:					
- , ary outstitution avacimies					
d Any restrictions or limitations on awards	, such as by geographica	l areas, charitable fields,	kınds of institutions, or o	other factors:	

Form 990-PF (2014) FULL MOON FOUNDATION 85-0406316 Page 11 Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation status of recipient Purpose of grant or contribution Amount Name and address (home or business) a Paid during the year EDUCATION WITHOUT BORDERS NONE PUBLIC CHARITY GENRAL SUPPORT 19716 NEFLANDERS PORTLAND, OR 97230 20,000. **▶** 3a 20,000. Total b Approved for future payment NONE Ō. **▶** 3b Total

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Enter gross amounts unless otherwise indicated.	Unrelated	business income		d by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a	Code		1	· · · · · · · ·	
b				-	
G			 -		
d			 		
e					
f					
g Fees and contracts from government agencies		•			
2 Membership dues and assessments					·
3 Interest on savings and temporary cash					
investments			14	21.	
4 Dividends and interest from securities			14	13,988.	
5 Net rental income or (loss) from real estate:	1		<u> </u>		
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal	1				
property			ļ ļ		
7 Other investment income					
8 Gain or (loss) from sales of assets other				11 000	
than inventory			18	11,962.	
9 Net income or (loss) from special events	ļ		 -		
10 Gross profit or (loss) from sales of inventory					·
11 Other revenue					
a b			-		
	1		-		
d			 		
	, i		 		
			1 i		
e		0.	\vdash	25.971.	0
e 12 Subtotal. Add columns (b), (d), and (e)		0.		25,971.	0 25,971
e		0.		25,971. 13	25,971
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie	es to the Accon	nplishment of Ex	kempt f	13	25,971
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie	es to the Accon	nplishment of Exolumn (e) of Part XVI-A	kempt f	13	25,971
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e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which i	es to the Accon	nplishment of Exolumn (e) of Part XVI-A	kempt f	13	25,971
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which i	es to the Accon	nplishment of Exolumn (e) of Part XVI-A	kempt f	13	25,971
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which i	es to the Accon	nplishment of Exolumn (e) of Part XVI-A	kempt f	13	25,971
2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which i	es to the Accon	nplishment of Exolumn (e) of Part XVI-A	kempt f	13	25,971
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which i	es to the Accon	nplishment of Exolumn (e) of Part XVI-A	kempt f	13	25,971
2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which i	es to the Accon	nplishment of Exolumn (e) of Part XVI-A	kempt f	13	25,971
2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which i	es to the Accon	nplishment of Exolumn (e) of Part XVI-A	kempt f	13	25,971

Form 99			MOON FOUND						0406316	Page 1	13
Part	XVII		egarding Trans	fers To	and Transactions	and	Relations	ships With No	ncharitable	!	
the	e Code	rganization directly or indi	rectly engage in any of	n section 5	ng with any other organiza 27, relating to political organization of			tion 501(c) of		Yes N	<u>-</u>
(1 (2) Cash) Othe			o oxompt o	gamzation of				1a(1) 1a(2)	X	
(1 (2) Sale:) Purc	isactions. s of assets to a noncharita hases of assets from a no al of facilities, equipment,	ncharitable exempt org						1b(1) 1b(2) 1b(3)	X X X	_
(4 (5	(4) Reimbursement arrangements(5) Loans or 'oan guarantees(6) Performance of services or membership or fundraising solicitations								1b(4) 1b(5) 1b(6)	X	
d If t	he ans	s given by the reporting f	"Yes," complete the fol oundation. If the found	lowing sch ation receiv	edule. Column (b) should a red less than fair market va	always alue in	show the fair i	market value of the g n or sharing arranger	oods, other asse	ts,	_
(a)Line r		d) the value of the goods, (b) Amount involved			e exempt organization		(d) Description	n of transfers, transaction	ns, and sharing arra	ngements	_
			NONE CONTRACTOR			+		 			<u>-</u>
	-										_
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			<u></u>			_					<u>-</u>
											<u>-</u>
ın s	ection	501(c) of the Code (other	than section 501(c)(3)		or more tax-exempt organition 527?	nızatıor	ns described		Yes	X No	-
NONE		mplete the following scho (a) Name of org			(b) Type of organization			(c) Description of rela	ationship		<u>-</u>
- "											- -
						+-					_
Sign Here	and be				ng accompanying schedules and naxpayer) is based on all information of the particular of the particula	mation F		has any knowledge	May the IRS dis return with the p shown below (s X Yes	oreparer	<u> </u>
Paid		Print/Type preparer's na Lawrence Ta	1	reparer's s		Date		self- employed	PTIN P000286		_
Prepa Use C					llor at Law P(Firm's EIN ► 85	-035200	5	_
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11-24-14

FULL MOON FOUNDATION

85-0406316

FORM 990-PF INTERES	T ON SAVI	NGS AND TEM	IPORARY CASH	INVESTMENTS	STATEMENT 1
SOURCE		(A REVE PER B	NUE NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
1ST NATIONAL BANK - WELLS FARGO ACCOUNT	CHECKING		17. 4.	17. 4.	
TOTAL TO PART I, LIN	Е 3	-	21.	21.	
FORM 990-PF	DIVIDEND	S AND INTER	EST FROM SEC	URITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE		
WELLS FARGO ACCOUNT	26,782	. 12,79	4. 13,98	8. 13,988	8.
TO PART I, LINE 4 ==	26,782	. 12,79	13,98	13,988	В.
FORM 990-PF		LEGAL	FEES		STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE E PURPOSES
LEGAL FEES		9,360.	1,872	•	7,488.
TO FM 990-PF, PG 1,	LN 16A ==	9,360.	1,872	•	7,488.
FORM 990-PF	O'	THER PROFES	SIONAL FEES		STATEMENT 4
DESCRIPTION	-	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MANAGEMENT FEES		3,747.	3,747	•	0.
TO FORM 990-PF, PG 1		3,747.	3,747	•	0.
		·			

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FORM 990-PF	XAT	ES			STATEM	ENT	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTEI NET INCOM		(D) RITA IRPOS	
CORPORATION COMMISSION FOREIGN TAX	10. 149.		0. 149.				10.
TO FORM 990-PF, PG 1, LN 18	159.		149.				10.
FORM 990-PF	OTHER E	XPENSES			STATEM	ENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE		(C) ADJUSTEI NET INCOM		(D) RITA RPOS	
FEES	2.		2.				0.
TO FORM 990-PF, PG 1, LN 23	2.		2.				0.
FORM 990-PF	OTHER INV	ESTMENTS		=	STATEM	ENT	7
DESCRIPTION		LUATION ETHOD	вос	OK VALUE	FAIR M VAL		T
STOCKS - SEE ATTACHED MONEY MKT - SEE ATTACHED		COST COST		672,448. 50,181.		72,1 50,1	
TOTAL TO FORM 990-PF, PART II	, LINE 13	-		722,629.	7	22,3	30.
	PART XV - L OF FOUNDATION				STATEM	ENT	8

NAME OF MANAGER

TOBI TRAVIS
PHILLIP AARON HALEEN
SEAN HALEEN

FULL MOON FOUNDATION

EIN: 85-0406316

FYE 30 NOVEMBER 2015

FORM 990PF, PAGE 2, PART II, LINE 13

ATTACHMENT TO STATEMENT 7

(consisting of 9 pages – Wells Fargo – Asset Detail)

- November 30, 2015

Period Covered:



ASSET DETAIL

Asser Descurnon Cash & Equivalents	QUANTITY	Price	Market Value as of 11/30/15	Cost Basis	Unrealized Gain/Loss	ESTIMATED ANNUAL INCOME	CURRENT
CASH			\$13765	\$13765	\$0.00		
Total Cash			\$137.65	\$137.65	\$0.00		
MONEY MARKET							
WELLS FARGO GOVERNMENT	20,764120		\$20,764.12	\$20,764.12	\$0.00	\$2.08	001%
INSTITUTE AND A STATE OF THE ST							
WELLS FARGO GOVERNMENT	29,279570		29,27957	29,27957	000	2 93	0.01
MONEY MARKET FUND INSTL CLASS - #1751							
Total Mongy Market			\$50,043.69	\$50,043.69	\$0.00	\$5.01	0.01%
Total Cash & Equivalents			\$50,181.34	\$50,181.34	\$0.00	\$5.01	0.01%

■ November 30, 2015



Asser Descuption Fixed Income	QUANTITY	Pace	Market Value as of 11/30/15	Cost Basis	Unrealized Gain/Loss	ESTIMATED ANNUAL INCOME	CURRENT VIELD
DOINES I.C. MOTORE FONDS DODGE & COX INCOME FD COM #147 SYMBOL: DODIX CUSIP: 256210105	2,258 582	\$13520	\$30,536.03	\$30,752.25	-\$21622	\$85149	2 79%
JPMORGAN HIGH YIELD FUND SELECT SHARES #3580 SYMBOL: OHYFX CUSIP: 4812C0803	2,130115	7 050	15,017.31	16,20940	- 1,19209	888 26	591
METROPOLITAN WEST TOTAL RETURN BOND FUND CLASS I #512 SYMBOL: MWTIX CUSIP: 592905509	2,832.573	10 790	30,563,46	30,96012	- 396 66	555 18	1,82
T ROWE PRICE INSTRUTIONAL FLOAT RATE FUND #170 SYMBOL: RPIFX CUSIP: 77958B402	593 635	9830	5,835 43	5,948.90	-11347	251 70	431
T ROWE PRICE SHORT TERM BOND FUND #55 SYMBOI: PRWRX CLISIP, 779572P105	2,101 294	4 730	9,939 12	76 766'6	- 58 85	140 01	141
Total Domestic Mutual Funds			\$91,891.35	\$93,868.64	- \$1,977.29	\$2,686.64	2.92%
INTERNATIONAL MUTUAL FUNDS DREYFUS EMERGING MARKETS DEBT LOCAL	647 993	\$10.690	\$6.927 05	\$8.60104	-\$1.673.99	\$44.71	0.64%
CURRENCY FUND CLASS I #6083 SYMBOL: DDBIX CUSIP: 261980494						•	! :
FIDELITY ADVISORS EMERGING MARKETS INCOME FUND CLASS I SYMBOL: FMKIX CUSIP: 315920702	1,627510	12 920	21,027 43	21,720.79	- 693 36	1,061 14	5.05
Total International Mutual Funds			\$27,954.48	\$30,321.83	- \$2,367.35	\$1,105.85	3.96%
Total Fixed Income			\$119,845.83	\$124,190.47	- \$4,344.64	\$3,792.49	

November 30, 2015



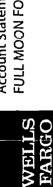
Asset Description	Qилипт	Price	MARKET VALUE AS OF 11/30/15	Cost Basis	Unrealized Gain/Loss	ESTIMATED Annual Income	CURRENT VIELD
Equiles							
CONSUMER DISCRETIONARY							
COMCAST CURP CLASS A SYMBOL: CMCSA CUSIP: 20030N101	85 000	\$60.860	\$5,173 10	\$4,012.71	\$1,16039	\$93.50	181%
JOHNSON CONTROLS INC SYMBOL: JCI CUSIP: 478366107	100 000	46 000	4,600 00	4,560 64	3936	11600	252
LAS VEGAS SANDS CORP COM SYMBOL: LVS CUSIP: 517834107	105 000	44 060	4,626 30	6,030 01	- 1,403 71	302 40	654
TARGET CORP SYMBOL: TGT CUSIP: 87612E106	65 000	72 500	4,71250	4,148.38	564.12	145 60	308
TJX COMPANIES INC SYMBOL: TJX CUSIP: 872540109	25 000	70 600	1,765 00	1,363 60	401 40	2600	147
WALT DISNEY CO SYMBOL: DIS CUSIP. 254687106	40 000	113 470	4,538.80	3,20647	1,33233	5280	116
Total Consumer Discretionary			\$25,415.70	\$23,321.81	\$2,093.89	\$736.30	2.90%
CONSUMER STAPLES							
CVS HEALTH CORPORATION SYMBOL: CVS CUSIP: 126650100	30 000	\$94 090	\$2,822 70	\$1,74266	\$1,08004	\$5100	181%
Total Consumer Staples			\$2,822.70	\$1,742.66	\$1,080.04	\$51.00	1.81%

► November 30, 2015



Asset Descuendon Follities (continued)	QUANTITY	Price	MARKET VALUE AS OF 11/30/15	Cost Basis	UNREALIZED GAIN/LOSS	ESTIMATED ANIUAL INCOME	Current Vield
FINANCIALS							
AFFILIATED MANAGERS GROUP, INC COM SYMBOL: AMG CUSIP: 008252108	4 000	\$177.230	\$70892	\$85907	-\$15015	\$0.00	0.00%
AMERIPRISE FINL INC SYMBOL: AMP CUSIP: 03076C106	20 000	112.950	2,25900	2,45802	- 19902	00 09	266
BERKSHIRE HATHAWAY INC. SYMBOL: BRK,B. CUSIP: 084670702	10 000	134 090	1,34090	1,12098	21992	000	000
BLACKROCK INC SYMBOL: BLK CUSIP: 09247X101	15 000	363 720	5,45580	4,71504	740 76	137 40	252
CITIGROUP INC SYMBOL: C CUSIP: 172967424	25 000	54 090	1,352 25	1,381.71	- 29 46	1600	118
CME GROUP INCE SYMBOL: CME CUSIP: 12572Q105	20 000	97 650	4,882,50	3,59524	1,287.26	12000	246
GOLDMAN SACHS GROUP INC SYMBOL: GS CUSIP: 38141G104	15 000	190 050	2,85030	2,32269	52761	39 00	137
JPMORGAN CHASE & CO SYMBOL: JPM CUSIP: 46625H100	80.000	089 99	5,334.40	4,209.50	1,124.90	140.80	2.64
PNC FINANCIAL SERVICES GROUP SYMBOL: PNC CUSIP: 693475105	55 000	95 510	5,253 05	5,232.25	20.80	121 00	230
Total Financials			\$29,437.12	\$25,894.50	\$3,542.62	\$634.20	2.15%
HEALTH CARE							
GILEAD SCIENCES INC SYMBOL: GILD CUSIP: 375558103	15 000	\$105 960	\$1,58940	\$1,63829	- \$48 89	\$2820	1.77%
MCKESSON CORP SYMBOL: MCK CUSIP: 58155Q103	10 000	189350	1,893 50	2,13726	- 243 76	11 20	0.59
THERMO FISHER SCIENTIFIC INC SYMBOL: TMO CUSIP: 883556102	10 000	138 400	1,38400	1,29940	8460	009	043
UNITEDHEALTH GROUP INC SYMBOL: UNH CUSIP: 91324P102	40.000	112710	4,508 40	3,44299	1,065 41	80 00	177
Total Health Care			\$9,375.30	\$8,517.94	\$857.36	\$125.40	1.34%

November 30, 2015



ASSET DETAIL (continued)

2.41% 203% 3.04% %000 2.16% 3 00% CURRENT YIELD 389 303 193 382 2.65 154 227 262 \$617.00 ESTIMATED ANNUAL INCOME \$15260 \$219.60 \$0.00 18240 24440 151.20 3900 \$10080 11880 97 50 14040 \$511.50 12100 UNREALIZED GAIN/LOSS 2,808.19 \$631.52 33098 385.22 \$5,958.27 -57937 \$473.53 -86665 205 62 1,992.97 \$1,05290 \$73604 55651 \$44091 3,37590 6,65581 6,072.77 2,14783 \$9,712.77 \$16,221.18 3,713.78 \$19,634.48 5,81317 Cost Basis 4,41163 4,07894 \$1,04429 \$3,89960 \$4,35471 \$16,852,70 \$25,592.75 \$10,186.30 MARKET VALUE AS OF 11/30/15 \$4,95250 5,23380 \$1,485 20 9,46400 6,403 75 5,706.75 2,533 05 \$5,090 75 4,635 45 2,509 25 4,617.25 95 160 PRICE 118300 27 250 54350 38970 \$70.750 100370 83 950 \$145 450 103 010 \$742 600 2 000 80 000 235.000 05.000 65.000 70 000 55 000 35.000 25 000 55 000 45 000 QUANTITY INFORMATION TECHNOLOGY ALPHABET INC CL C SYMBOL: GOOG CUSIP: 02079K107 MONSANTO CO NEW SYMBOL: MON CUSIP: 61166W101 CISCO SYSTEMS INC SYMBOL: CSCO CUSIP: 17275R102 MICROSOFT CORP SYMBOL: MSFT CUSIP: 594918104 ORACLE CORPORATION SYMBOL: ORCL CUSIP: 68389X105 SYMBOL: AAPL CUSIP: 037833100 UNION PACIFIC CORP SYMBOL: UNP CUSIP: 907818108 **Total Information Technology** UNITED PARCEL SERVICE-CL B SYMBOL: UPS CUSIP: 911312106 CUMMINS INC SYMBOL: CMI CUSIP: 231021106 CELANESE CORP SYMBOL: CE CUSIP: 150870103 BOEING CO SYMBOL: BA CUSIP: 097023105 Equities (continued) **Total Industrials Total Materials NDUSTRIALS** Asset Description MATERIALS



Account Statement For: FULL MOON FOUNDATION - AGY

ASSET DESCRIPTION	Qилипт	Puce	Market Value as of 11/30/15	Cost Basis	UNREALIZED GAIN/LOSS	ESTIMATED Anitual Income	CURRENT YIELD
Equities (continued) INTERNATIONAL EQUITIES							
ANHEUSER-BUSCH INBEV SPN CUSIP: 03524A108	30 000 \$	\$128460	\$3,853 80	\$2,88163	\$97217	\$9672	251%
DIAGEO PLC - ADR SPONSORED ADR CUSIP: 25243Q205	30 000	114560	3,43680	3,584.46	- 147 66	102 42	298
EATON CORP PLC CUSIP: G29183103	110 000	58 160	6,397.60	7,040 60	- 643 00	25080	3 92
HSBC - ADR SPONSORED ADR CUSIP: 404280406	175 000	39 900	6,982.50	8,28469	- 1,302 19	43750	627
NESTLE S.A. REGISTERED SHARES - ADR SPONSORED ADR CUSIP: 641069406	000 59	73 940	4,806 10	4,57534	23076	12415	258
ROCHE HOLDINGS LTD - ADR SPONSORED ADR CUSIP: 771195104	200 000	33 490	00 869'9	7,041.19	- 343 19	165 20	247
SCHLUMBERGER LTD CUSIP: 806857108	25 000	77 150	4,243.25	4,724.54	- 481,29	11000	259
SUNCOR ENERGY INC NEW F CUSIP: 867224107	180 000	27 600	4,968.00	4,862.37	105.63	156 78	3 16
TOTAL S.A ADR SPONSORED ADR CUSIP: 89151E109	125 000	49450	6,181 25	6,65197	- 470 72	293 88	4 7 5
Total International Equities			\$47,567.30	\$49,646.79	- \$2,079.49	\$1,737.45	3.65%



Account Statement For: FULL MOON FOUNDATION - AGY

Asset Description Equities (continued)	Qилипт	Price	Market Value as of 11/30/15	Cost Basis	Unrealized Gain/Loss	ESTIMATED ANNUAL INCOME	CURRENT YIELD
AMERICAN CENTURY SMALL CAF GROWTH FUND INSTITUTIONAL CLASS #336 SYMBOL: ANONX CUSIP: 025083320	1,742 601	\$13620	\$23,73423	\$25,88900	- \$2,15477	\$0.00	%000
ARTISAN MID CAP FUND CLASS INS #1333 SYMBOL: APHMX CUSIP: 04314H600	652 469	43 690	28,506 37	31,287.96	- 2,781 59	0000	000
JP MORGAN MID CAP VALUE FUND-CLASS I #758 \$\$\$\$\$01. \$1802 Clicib. 330139100	875 570	37 050	32,43987	30,65572	1,784.15	351 10	1 08
STERLING CAPITAL STRATTON SMALL CAP VALUE FUND CLASS I #328 SYMBOL: STSCX CUSIP: 85917K546	315881	74910	23,662 65	24,14809	- 485 44	2436	0,10
Total Domestic Mutual Funds			\$108,343.12	\$111,980.77	- \$3,637.65	\$375.46	0.35%
INTERNATIONAL MUTUAL FUNDS							
ARTISAN INTERNATIONAL FUND INSTITUTIONAL CLASS INS #662 SYMBOL: APHIX CUSIP: 04314H402	1,317.587	\$29.460	\$38,81611	\$37,195.34	\$1,62077	\$27669	071%
DODGE & COX INTERNATIONAL STOCK FUND #1048 SYMBOL: DODFX CUSIP: 256206103	977 918	39 240	38,373 50	39,006.00	- 632.50	948 58	247
OPPENHEIMER DEVELOPING MARKETS FUND CLASS I #799 SYMBOL: ODVIX CUSIP: 683974604	1,586 489	30 930	49,070 10	55,261 16	- 6,19106	47119	96'0
Total International Mutual Funds			\$126,259.71	\$131,462.50	- \$5,202,79	\$1,696.46	1.34%
Total Equities			\$401,852.70	\$398,135.40	\$3,717.30	\$6,704.37	1.67%









ASSET DETAIL (continued)							
Asser Description Alternative Investments	QUANTITY	Pace	MARKET VALUE AS OF 11/30/15	Cost Basis	Unrealized Gain/Loss	ESTIMATED Annual Income	CURRENT VIELD
OTHER AQR MANAGED FUTURES STRATEGY FUND CLASS I #15213	657.170	\$11 050	\$7,261.73	\$6,990.63	\$271.10	\$30033	414%
SYMBOL: AQMIX CUSIP: 00203H859 ASG GLOBAL ALTERNATIVES FUND CLASS Y #1993	1,704838	10870	18,531.59	19,47692	- 945 33	000	000
SYMBOL: GAFYX CUSIP: 63872T885 BLACKROCK GLOBAL LONG/SHORT CREDIT FUND CLASS INS #1833	1,697 404	10380	17,61905	17,65300	- 33 95	000	000
SYMBOL: BGCIX CUSIP: 091936/32 BOSTON PARTNERS LONG/SHORT RESEARCH FUND CLASS INS	475.790	15.610	7,427.08	6,397.91	1,029,17	00:00	0.00
SYMBOL; BPIRX CUSIP; 74925K581 EATON VANCE GLOBAL MACRO ABSOLUTE RETURN FUND CLASS I #0088	770852	9170	7,06871	7,06100	771	38774	5 48
STMBOL: FIGURA COST: 27/925/28 NEUBERGER BERMAN LONG SHORT FUND CLASS INS #1880	1,360193	12610	17,15203	17,630.86	- 47883	245	001
STMBOL: NESIA COSIF: 941Z6NB06 THE MERGER FUND CLASS INST #301 SYMBOL: MERIX CUSIP: 589509207	400 195	15 470	6,19102	6,41189	- 22087	17929	290
Total Other			\$81,251.21	\$81,622.21	-\$371.00	\$869.81	1.07%
Total Alternative Investments			\$81,251.21	\$81,622.21	-\$371.00	\$869,81	1.07%



- November 30, 2015



Asset Description Real Assets	Quantity	Pace	MARKET VALUE AS OF 11/30/15	Cost Basis	Unrealezed Gain/Loss	ESTIMATED (ANIUAL INCOME	Current Vield
REAL ASSET FUNDS CREDIT SUISSE COMMODITY RETURN STRATEGY FUND CLASS-1#2156	2,893 814	\$4 660	\$13,485.17	\$16,651.03	- \$3,165 86	\$0.00	0.00%
SYMBOL: CRSOX CUSIF: 223441505 SPDR DJ WILSHIRE INTERNATIONAL REAL ESTATE ETF	693 000	40 070	27,768.51	28,509.74	- 741 23	862 09	310
SYMBOL: RWX CUSIP: 78463X863 VANGUARD REIT VIPER SYMROI : VNO CHSIP: 922908553	352 000	79 390	27,945 28	23,338 70	4,606 58	1,10141	3.94
Total Real Asset Funds			\$69,198.96	\$68,499.47	\$699.49	\$1,963.50	2.84%
Total Real Assets			\$69,198.96	\$68,499.47	\$699.49	\$1,963.50	2.84%
TOTAL ASSETS			Account Value As of 11/30/15 \$722,330.04	Cost Basis \$722,628.89	Unrealized Gain/Loss -\$298.85	ESTIMATED ANJUAL INCOME \$13,335.18	