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EXTENDED TO NOVEMBER 15, 2 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.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

			R 1, 2015	, and ending	DEC 31, 2019	5
Na	me o	f foundation			A Employer identificatio	n number
1	'HE	PINO FAMILY FOUNDATION	1		47-3568874	1
Nu	nber	and street (or P O box number if mail is not delivered to stree	t address)	Room/suite	B Telephone number	
7	26	9 E MANZANITA DR	_		602-672-47	756
		town, state or province, country, and ZIP or foreign i			C If exemption application is	· · · · · · · · · · · · · · · · · · ·
_		TTSDALE, AZ 85258-2747				
G (Chec	k all that apply:		ormer public charity	D 1. Foreign organization	s, check here
		Final return	Amended return		2 Foreign organizations m	eating the 85% test
		X Address change	Name change		2. Foreign organizations m check here and attach c	omputation Size test,
H (_	k type of organization: X Section 501(c)(3) e			E If private foundation sta	
			Other taxable private found		under section 507(b)(1)(A), check here
		arket value of all assets at end of year J Account	-	Accrual	F If the foundation is in a	
		Part II, col. (c), line 16)	ther (specify)	hana l	under section 507(b)(1)(B), check here
	-\$ art l			1		(4)
Pč	art 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	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	210,900.		N/A	
	2	Check I if the foundation is not required to attach Sch. B				•
	3	Interest on savings and temporary cash investments	1.	1.		STATEMENT 1
	4	Dividends and interest from securities	2,364.	2,364.		STATEMENT 2
	5a	Gross rents				
	b	Net rental income or (loss)				
<u>o</u>	6a	Net gain or (loss) from sale of assets not on line 10	<1,374.	>		
enc	b	Gross sales price for all assets on line 6a 238,657.				
Revenue	7	Capital gain net income (from Part IV, line 2)		_0.		
_	8	Net short-term capital gain				
	9	Income modifications Gross sales less returns				
	10a					<u> </u>
	l	Less Cost of goods sold Gross profit or (loss)				
	11	<u> </u>				
	12	Total, Add lines 1 through 11	211,891.	2,365.		
	13	Compensation of officers, directors, trustees, etc	0.	2,303.		0.
	14	Other employee salaries and wages			<u>' </u>	- 0.
	15	Pension plans, employee benefits				
ses	160	Legal fees STMT 3	3,834.	0.		0.
ens	Ь	Accounting fees	•			
Administrative Expense	C	Other professional fees			RECEI	VED
ě	17	Interest			000000	
Irati	18	Taxes			40	S
IIS	19	Depreciation and depletion			NOV 22	2017
Ē	20	Occupancy	_		TILL THE	<u>E</u>
Ă	21	Travel, conferences, and meetings			OCOE	
and	22	Printing and publications				الــــــــــــــــــــــــــــــــــــ
ing	23	Other expenses STMT 4	1,923.	1,205.	<u> </u>	0.
rat	24	Total operating and administrative		.		
Operating	0.5	expenses Add lines 13 through 23	5,757.	1,205.		0.
_		Contributions, gifts, grants paid	18,600.			18,600.
	26	Total expenses and disbursements	24 257	1 005		10 600
	27	Add lines 24 and 25	24,357.	1,205.		18,600.
		Subtract line 26 from line 12:	107 534			
		Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	187,534.	1,160.		
		Adjusted net income (if negative, enter -0-)		1,100.	N/A	
5225/		- rejector not mounty (* nogativo, onto -o-)	L		14/A	

11-24-15 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2015)

		O FAMILY FOUN						4_	<u>/-3568</u>	<u> 38/4</u>	Page 3
		sses for Tax on Inv			/h\	How a	coured [
		ind(s) of property sold (e.g., or common stock, 200 shs.			\n^F	- Purc	equired hase ation	(c) Date a (mo., da	icquired av. vr.)	(d) Dat (mo., da	
			11120 00.7		+-υ	- Dona	ation		3,,,,		
b SEE ATTACHED	CTA	TEMENT			┼						
	SIA	I PMPN I			├				+		
d d					├		+				
e					┼						
		Depreciation allowed	(a) C	ost or other basis	٠			(h) Ga	ain or (loss)		
(e) Gross sales price	(1)	(or allowable)		expense of sale					(f) minus (g	3)	
a											
b											
C											
d											
e 238,657.				240,03	11.					<1	,374.
Complete only for assets showing	g gain in	column (h) and owned by th	e foundatio	on on 12/31/69					ol. (h) gaın r		
(:) E M V oc of 12/21/60		(j) Adjusted basis		xcess of col. (1)			co		ot less than (from col. (h		
(i) F.M.V. as of 12/31/69		as of 12/31/69	ove	er col. (j), if any					,110111 COL (11	<i>11</i>	
a											
<u>b</u>											
С											
<u>d</u>											
е										<1	<u>,374.</u> :
		If gain, also enter ii If (loss), enter -0- i	n Part I, line	e 7]					.1	274
Capital gain net income or (net cap	ortal loss)	ın Part I, lın	e 7	J	2_				<1	<u>,374.</u>
3 Net short-term capital gain or (loss			(6):		٦						
If gain, also enter in Part I, line 8, (column (c).			- } }				N/A		
If (loss), enter -0- in Part I, line 8 Part V Qualification Ui	nder S	Section 4940(e) for I	Reduce	d Tay on Net	Inv	estn	ent Inc	nme	N/A		
(For optional use by domestic private	foundati	ons subject to the section 49	940(a) tax o	in net investment ir	ome	e.)				N/A	
If section 4940(d)(2) applies, leave th	ic nart hi	ank									
iii section 4340(u)(2) applies, icave tri	is part bi	ann.							,		
Was the foundation liable for the secti				,	riod?				Į	Yes	L No
If "Yes," the foundation does not quali											
1 Enter the appropriate amount in e	ach colu		tructions o	efore making any e			 		 -	(4)	
(a) Base period years		(b) Adjusted qualifying distri	hutions	Net value of no	(C) Inchai		use assets		Distribu	(d) ition ratio	(a))
Calendar year (or tax year beginnin	g in)	riajustea quanting alout		14CE VALAGE OF THE	TIGITIA!	Tubic		<u> </u>	col. (b) divid	ied by coi.	(C))
2014 2013				<u> </u>		-4-		+-			
2012	-			 				+			
2011											
2010				<u> </u>				_			
											
2 Total of line 1, column (d)								2			
3 Average distribution ratio for the 5	-vear ba	se period - divide the total on	line 2 by 5	, or by the number	of ve	ars					
the foundation has been in existen			,	, ,	,-			3			
		•									
4 Enter the net value of noncharitable	e-use as	sets for 2015 from Part X, lir	ne 5					4			
		,									
5 Multiply line 4 by line 3								5			
6 Enter 1% of net investment incom	e (1% of	Part I, line 27b)						6			
	•	,								_	
7 Add lines 5 and 6								7			
8 Enter qualifying distributions from	Part XII,	, line 4						8			
If line 8 is equal to or greater than			b, and com	plete that part usin	g a 1'	% tax r	ate.				
See the Part VI instructions.											
523521 11-24-15				_					Fc	ırm 990-l	PF (2015)

or <u>m</u>	1 990-PF (2015) THE PINO FAMILY FOUNDATION 47-356	<u> 874</u>		Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%			<u>23.</u>
	of Part I, line 27b			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u>0.</u>
	Add lines 1 and 2			23.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-			23.
6	Credits/Payments:			
а	2015 estimated tax payments and 2014 overpayment credited to 2015			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
đ	Backup withholding erroneously withheld			_
	Total credits and payments. Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 8			<u>23.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be: Credited to 2016 estimated tax			
	rt VII-A Statements Regarding Activities	-	Vaa	NIa
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	<u> </u>	res	No
	any political campaign?	1a		X
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b		<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities			
	Did the foundation file Form 1120-POL for this year?	10		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. ► \$0.			₹.
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			v
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	4a		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			
	olf "Yes," has it filed a tax return on Form 990-T for this year? N/A	4b_5		Х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	-3		1
_	If "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 either:	1	ŀ	
	 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law 			
		6		x
,	remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	Х	
′	Did the loundation have at least \$5,000 in assets at any time during the year in thes, complete Part in, con. (c), and Part XV	- ' -		
0-	Enter the states to which the foundation reports or with which it is registered (see instructions)			
oa				
L	WY If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
D	of each state as required by General Instruction G? If "No," attach explanation	8b	X	
Δ	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	"		
J	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		_x_
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
10		orm 99 0)-PF	

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X

3b

4a

Yes X No

N/A

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2015)

had not been removed from jeopardy before the first day of the tax year beginning in 2015?

b if "Yes," did it have excess business holdings in 2015 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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

during the year?

	0-PF (2015) THE PINO FAMILY FOUND	ATION	Required (control	47-35688	374	Page 6
5a Dui (1) (2) (3) (4) (5) b If a sec Org c If the exp	VII-B Statements Regarding Activities for Where the year did the foundation pay or incur any amount to: Carry on propaganda, or otherwise attempt to influence legislation (influence the outcome of any specific public election (see section 4st any voter registration drive? Provide a grant to an individual for travel, study, or other similar pure Provide a grant to an organization other than a charitable, etc., orgat 4945(d)(4)(A)? (see instructions) Provide for any purpose other than religious, charitable, scientific, lift the prevention of cruelty to children or animals? In yanswer is "Yes" to 5a(1)-(5), did any of the transactions fail to qual stron 53.4945 or in a current notice regarding disaster assistance (see ganizations relying on a current notice regarding disaster assistance of the answer is "Yes" to question 5a(4), does the foundation claim exemple that the statement required by Regulations section 5a(1) the foundation, during the year, receive any funds, directly or indirecters on the benefit contract?	(section 4945(e))? (955); or to carry on, directly or indirectly or indi	rectly, Ye Ye for In Regulations Anned N/A Ye	47-35688 ued) es X No es X No es X No N/A N/A N/A N/A N/A N/A	5b	Page 6
•	ersonarbenent contract. I the foundation, during the year, pay premiums, directly or indirectly,	on a personal benefit contract?		is LALINU	6Ь	X
7a Ata		attributable to the transaction?		es X No N/A	7b	
List	Paid Employees, and Contractors all officers, directors, trustees, foundation managers and	their compensation.				
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deterred compensation	(e) acco all	Expense ount, other owances
SEE	STATEMENT 11		0.	0.		0.
2 Com	npensation of five highest-paid employees (other than tho	se 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	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) acco all	Expense ount, other owances
	umber of other ampleyage and over \$50,000					
otai iil	umber of other employees paid over \$50,000			Form	990-	O PF (2015)

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▶

Total. Add lines 1 through 3

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: a Average monthly fair market value of securities 143,708. 1a 27,282. b Average of monthly cash balances 1b c Fair market value of all other assets 7.564. 10 178,554. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 178,554. Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 2,678. 4 175,876. Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD 6,625. Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain and do not complete this part.) foreign organizations check here 6,625. Minimum investment return from Part X, line 6 1 1 23. Tax on investment income for 2015 from Part VI, line 5 Income tax for 2015. (This does not include the tax from Part VI.) c Add lines 2a and 2b 2c Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 6,602. 5 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 6,602 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes; 18,600. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a **b** Cash distribution test (attach the required schedule) 3b Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 18,600. 4 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 18,600. Adjusted qualifying distributions. Subtract line 5 from line 4 6 Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,	00,400			
line 7				6,602.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010				
b From 2011				(
c From 2012				
d From 2013				
e From 2014	_			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ► \$ 18,600.				
a Applied to 2014, 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				i
(Election required - see instructions)	0.			6 600
d Applied to 2015 distributable amount	11 000			6,602.
e Remaining amount distributed out of corpus	11,998.	 		
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	11,998.			
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 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				_
be distributed in 2016				
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 2010	,	J		
not applied on line 5 or line 7	0.	 		
9 Excess distributions carryover to 2016	11 000			
Subtract lines 7 and 8 from line 6a	11,998.			_
10 Analysis of line 9:				
a Excess from 2011		1		
b Excess from 2012				
c Excess from 2013 d Excess from 2014				
e Excess from 2015 11,998.				
E LAUCSS HOITI 2013 11, 330 •				5 000 DE (0045)

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Part XIV Private Operating Form	O FAMILY FO		A guestion (I)		68874 Page 10
 _			A, question s)	N/A	
1 a If the foundation has received a ruling or foundation, and the ruling is effective for					
b Check box to indicate whether the found	•	-	n control] 4942(j)(3) or 4	942(J)(5)
2 a Enter the lesser of the adjusted net	Tax year	ng touridation described i	Prior 3 years) 4342(J)(3) UI 4	542(J)(3)
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for	(4) 20 10	(4) 2011	(6) 20 10	(4) 25 12	(5) (5)
each year listed b 85% of line 2a		 		 	
- · · · · · · · · · · · · · · · · · · ·		 		 	
c Qualifying distributions from Part XII,		1			
line 4 for each year listed				 	
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the		 		 	
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets		 		 	
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter				 	
2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed				 	
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)		<u> </u>			
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from		}			1
an exempt organization					
(4) Gross investment income				<u> </u>	L
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during the	ne year-see insti	ructions.)	<u> </u>		
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation who			ributions received by the	e foundation before the clo	se of any tax
year (but only if they have contributed m	ore than \$5,000). (See s	section 507(d)(2).)			
NONE					
b List any managers of the foundation who			or an equally large port	ion of the ownership of a p	partnership or
other entity) of which the foundation has	a 10% or greater intere	St.			
NONE					
2 Information Regarding Contribution					
Check here ► ☐ if the foundation of					
the foundation makes gifts, grants, etc. (d d
a The name, address, and telephone number	er or e-mail address of	the person to whom appli	cations should be addre	essed:	
SEE STATEMENT 12		 			
b The form in which applications should be	e submitted and informa	ition and materials they sh	iould include:		
					
c Any submission deadlines:					
d Any restrictions of limitations on available	auch as hy assess-bi-	al arana, abasitable first-t-	lundo of motivitions as	other factors:	
d Any restrictions or limitations on awards	, such as by geographic	ai areas, charitable fields,	kinds of institutions, of	other factors:	
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					()

Form	990-PF	(ZU	15)

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	Idiletion meonie
a					
b					
C	_				
d	_				
e	_				
					-
g Fees and contracts from government agencies					
2 Membership dues and assessments			 		
3 Interest on savings and temporary cash			18	1	
Investments 4 Dividends and interest from securities			18	2,364.	
5 Net rental income or (loss) from real estate:			1 10	2,304.	
, ,					
a Debt-financed propertyb 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			18	<1,374.>	
9 Net income or (loss) from special events		,			
O Gross profit or (loss) from sales of inventory					• •
1 Other revenue:					
a					
b					
C	1 1				
d	1 1				
e					
2 Subtotal. Add columns (b), (d), and (e)		C) .	991.	
3 Total Add line 12, columns (b), (d), and (e)				13	991
See worksheet in line 13 instructions to verify calculations.)				
Part XVI-B Relationship of Activities	to the Accor	nplishment of	Exempt F	urposes	
Line No. Explain below how each activity for which in				d importantly to the accomp	lishment of

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
-	

12

Form **990-PF** (2015)

Part XVII	Information Re Exempt Organ		and Transactions ar	nd Relationships With Nonc	haritable		
1 Did the or		rectly engage in any of the followi	ng with any other organization	n described in section 501(c) of		Yes	No
_		(3) organizations) or in section 5					
		ation to a noncharitable exempt o					
(1) Cash	· -	·			1a(1)		X
(2) Other	rassets				1a(2)		X
b Other tran	sactions:						
(1) Sales	of assets to a noncharita	ble exempt organization			1b(1)		_X_
(2) Purc	hases of assets from a no	ncharitable exempt organization			1b(2)		<u> X</u>
` '	al of facilities, equipment,				1b(3)		<u>X</u>
` '	bursement arrangements				1b(4)		<u>X</u>
	s or loan guarantees				1b(5)		X
• •		mbership or fundraising solicitati			1b(6)	-	<u> </u>
_		iling lists, other assets, or paid en		ays show the fair market value of the good	de other seed	l	
or service	s given by the reporting fo		ved less than fair market value	e in any transaction or sharing arrangemen		,,,	
(a) Line no	(b) Amount involved	(c) Name of noncharitable		(d) Description of transfers, transactions,	and sharing arra	angeme	nts
		N/A					
	·						
-							
		-					
							
in section		tly affiliated with, or related to, on r than section 501(c)(3)) or in sec edule.	ction 527?		Yes	X] No
	(a) Name of org	anization	(b) Type of organization	(c) Description of relation	onship		
	N/A						
Sign Here		nplete Declaration of preparer (other th.		statements, and to the best of my knowledge atton of which preparer has any knowledge. Title	May the IRS direturn with the shown below (prepare	er
	Print/Type preparer's na			Date Check If PT	IN		
	EDWARD A.	JA 1	nax aa	self- employed			
Paid	VILLANUEVA	Mill	1900 1		200539!		
Preparer	Firm's name ► VIL			Firm's EIN ► 86-			
Use Only							
	Firm's address ► 37						
	PHPH	OENIX, AZ 85014	<u> </u>	Phone no. (602	2)235-9		
					Form 990	-PF	(2015)

THE PINO FAMILY		47-356	8874	PAGE	1 OF 1
	sses for Tax on Investment Income		(h) Howers	aurad -	
2-story br	describe the kind(s) of property sol lick warehouse; or common stock, 2	00 shs. MLC Co.	P - Purch D - Dona		(1110., day, y1.)
1a AMEX TECHNOLOG			D		504/27/15
	Y SELECT SPDR 35		D		506/17/15
	VELPG MRKT 341.2		P		509/28/15
	NT'L STJ FD 267.		P		510/01/15
	RE INT'L REAL 12	0 SHS	P	06/17/1	511/10/15
CAPITAL GAINS	DIVIDENDS				
<u>g</u>					
<u>h</u>					
<u> </u>			_+		
					
1	· · · · · · · · · · · · · · · · · · ·				
 		<u> </u>			
n					-
0					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (loss) (e) plus (f) minus (g	
a 63,555.		63,270.			285.
b 149,832.		147,630.			2,202.
c 9,815.		12,000.			<2,185.
d 9,906.	·	12,000.			<2,094·
e 4,912.		5,131.			<u> <219.</u> :
f 637.					637.
9					
h					
<u>'</u>					
k					
I					
m					
<u>n</u>					
0		10/04/00			
Complete only for assets showin	ig gain in column (h) and owned by		Gaine (ev	(I) Losses (from col. (I cess of col. (h) gain o	i)) ver col (k)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	dams (c)	but not less than "-0-	
a					285.
b					2,202.
C					<2,185.
d					<2,094.
е					<219.
<u>f</u>					637.
g					
<u>h</u>		-			
1					
k					
<u> </u>					
m					- -
n					
0					
	e If nam also enter	in Part L line 7			
2 Capital gain net income or (net ca	pital loss) { If gain, also enter "-0	-" in Part I, line 7	2		<1,374.
3 Net short-term capital gain or (los	s) as defined in sections 1222(5) an	d (6):	1		

If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8

3 Grants and Contributions Paid During the Y				
. Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	-
JOHN P. BELL FOUNDATION	NONE	PUBLIC CHARITY	SUPPORT OPERATIONS	
6647 E GRANT RD				
PUCSON, AZ 85712				2,00
RIZONA EDUCATIONAL FOUNDATION	NONE	PUBLIC CHARITY	SUPPORT OPERATIONS	
5155 E INDIAN SCHOOL RD				
SCOTTSDALE, AZ 85251				2,00
EDUCATION FOUNDATION VILLAGE MEADOWS	NONE	PUBLIC CHARITY	SUPPORT OPERATIONS	5,00
FORGACH HOUSE CRISIS CENTER	NONE	PUBLIC CHARITY	SUPPORT OPERATIONS	
SIERRA VISTA, AZ		<u> </u>		2,00
	,			
		<u> </u>		
				
	·			
		,		
		ļ		

Schedule B (Form 990, 990-EZ,

or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Name of the organization

Employer identification number

T	HE PINO FAMILY FOUNDATION	47-3568874
Organization type (check	one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	n
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Spe	ecial Rule See instructions
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions y one contributor. Complete Parts I and II. See instructions for determining a cont	
Special Rules		
sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% s and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 1 or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the Z, line 1 Complete Parts I and II	13, 16a, or 16b, and that received from
year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive utions of more than \$1,000 exclusively for religious, charitable, scientific, literary, coruelty to children or animals. Complete Parts I, II, and III	-
year, contribution is checked, enter purpose. Do not c	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive is exclusively for religious, charitable, etc., purposes, but no such contributions to there the total contributions that were received during the year for an exclusively recomplete any of the parts unless the General Rule applies to this organization becale, etc., contributions totaling \$5,000 or more during the year	taled more than \$1,000 If this box religious, charitable, etc ,
but it must answer "No" or certify that it does not mee	that is not covered by the General Rule and/or the Special Rules does not file Sch in Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or of the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	on its Form 990-PF, Part I, line 2, to

Name of organization

Employer identification number

THE PINO FAMILY FOUNDATION

47-3568874

Part Contributors (see instructions). Use duplicate copies of Part I if ac	dditional space is needed
------------------------------------------------------------------------------	---------------------------

_			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JEFFREY P. PINO 4450 W. EARHART WAY CHANDLER, AZ 85226	\$\$	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 Oncash Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

THE PINO FAMILY FOUNDATION

47-3568874

Part II	Noncash Property (see instructions) Use duplicate copies of Part 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	AMEX TECHNOLOGY SELECT SPDR-5000 SHS; PUBLICLY TRADED SECURITY		
		\$ 210,900.	04/21/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

lame of organ	ization		Employer identification number
HE PIN	O FAMILY FOUNDATION		47-3568874
Part III	Exclusively religious, charitable, etc., contribute the year from any one contributor. Complete co	lumns (a) through (e) and the follow	in section 501(c)(7), (8), or (10) that total more than \$1,000 for
	completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 or	less for the year (Enter this info once) \$
(a) No	Use duplicate copies of Part III if additional	space is needed	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Paili			_ · · · · · · · · - · · · · · ·
-			
		(e) Transfer of gift	t
	Transferee's name, address, and	71P + 4	Relationship of transferor to transferee
_			
-			
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_			
-			
		(e) Transfer of gift	
		(e) Transier or gin	•
	Transferee's name, address, and	IZIP + 4	Relationship of transferor to transferee
_			
-			
-			
(a) No. from	40.5	(-) ((
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
-			
-			
	•	(e) Transfer of gift	t
	Transferee's name, address, and	I ZIP + 4	Relationship of transferor to transferee
-			
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
-			
		-	
		(e) Transfer of gift	t
	Transferee's name, address, and	I ZIP + 4	Relationship of transferor to transferee
	manarata a mame, address, and	T T	To autonomy or a unorder to a disordree
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_			
			0.1.1.0.0

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY	CASH IN	NVESTMENTS	STATEMENT	1
SOURCE		(A REVE PER B	NUE		(B) VESTMENT VCOME	(C) ADJUSTED NET INCOM	
WELLS FARGO SECURIT	IES		1.		1.		
TOTAL TO PART I, LI	NE 3		1.		1.		
FORM 990-PF	DIVIDENDS	S AND INTER	EST FRO	OM SECUE	RITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RI	(A) EVENUE R BOOKS	(B) NET INVES MENT INCC		
WELLS FARGO SECURITIES	3,001	. 63	 7.	2,364	. 2,36	54.	
TO PART I, LINE 4	3,001	. 63	7.	2,364	2,36	54.	
FORM 990-PF		LEGAL	FEES	<u>.</u>		STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTED NET INCOM		
LEGAL		3,834.		0.			0.
TO FM 990-PF, PG 1,	LN 16A =	3,834.		0.			0.
FORM 990-PF		OTHER E	XPENSE	<u></u>		STATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTED NET INCOM		
INVESTMENT FEES OFFICE EXPENSE	-	1,205. 718.		1,205.			0.
TO FORM 990-PF, PG	1, LN 23	1,923.		1,205.	-	···	0.
	=						

FORM 990-PF	CORPORATE STOCK		STATEMENT 5
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
EQUITIES		98,018.	91,893.
TOTAL TO FORM 990-PF, PART I	I, LINE 10B	98,018.	91,893.
FORM 990-PF	CORPORATE BONDS		STATEMENT 6
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
FIXED INCOME		12,500.	11,628.
TOTAL TO FORM 990-PF, PART I	I, LINE 10C	12,500.	11,628.
FORM 990-PF	OTHER INVESTMENTS		STATEMENT 7
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
OTHER REAL ESTATE	COST	25,000. 17,170.	23,789. 16,398.
TOTAL TO FORM 990-PF, PART II	I, LINE 13	42,170.	40,187.
FORM 990-PF INT	TEREST AND PENALTIES		STATEMENT 8
TAX DUE FROM FORM 990-PF, PALATE PAYMENT INTEREST LATE PAYMENT PENALTY	ART VI		23. 1. 2.
TOTAL AMOUNT DUE		•	26.

	LAT	E PAYMENT P	ENALT	Y		STATEMENT			
DESCRIPTION	DATE	AMOUN	T	BALANC	E N	ONTHS	PENAL	ΤΥ	
TAX DUE DATE FILED	05/15/ 11/15/		23.		23. 23.	18		2.	
TOTAL LATE PAYMENT P	ENALTY							2.	
FORM 990-PF	LAT	E PAYMENT I	NTERE	ST		STAT	EMENT	10	
DESCRIPTION	DATE	AMOUNT	BAL	ANCE	RATE	DAYS	INTER	REST	
TAX DUE DATE FILED	05/15/16 11/15/17	23.		23. 24.	.0400	549		1.	
TOTAL LATE PAYMENT I	NTEREST							1.	
FORM 990-PF PA	RT VIII - LIS	ים אדדר פו	RS D	TRECTORS		<u> ሮሞ</u> ልጥ	TWENT	11	
FORM 990-PF PA	RT VIII - LIS' TRUSTEES AND		MANA(EM - BE	STAT PLOYEE N PLAN ONTRIB	EXPEN		
	EASED 2/5/16)	TITLE AND AVRG HRS	MANA(ND /WK	COMPEN	EM - BE	PLOYEE	EXPEN	ISE	
NAME AND ADDRESS JEFFERY P. PINO (DEC. C/O GREG A'SLINGER, COLLEYVILLE, TX 7603) STACIE HARRISON 4450 W EARHART WAY	EASED 2/5/16)	TITLE AND AVRG HRS	MANAC ND /WK & DIE	COMPEN SATION RECTOR	EM - BE C	PLOYEE N PLAN ONTRIB	EXPEN ACCOU	ISE INT	
NAME AND ADDRESS JEFFERY P. PINO (DEC. C/O GREG A'SLINGER, COLLEYVILLE, TX 7603 STACIE HARRISON 4450 W EARHART WAY CHANDLER, AZ 85226 AMEDEO R. PINO 1781 LAUREL LANE	EASED 2/5/16) P.O. BOX 779	TITLE ALAVRG HRS PRESIDENT 0.00 OFFICER &	MANAC ND /WK & DIE	COMPEN SATION RECTOR	- BE C	PLOYEE N PLAN ONTRIB	EXPEN ACCOU	O.	
NAME AND ADDRESS JEFFERY P. PINO (DEC.	TRUSTEES AND EASED 2/5/16) P.O. BOX 779 4	TITLE AND AVRG HRS PRESIDENT 0.00 OFFICER & 0.00 DIRECTOR	MANAC ND /WK & DIE	COMPEN SATION RECTOR	- BE C	PLOYEE IN PLAN CONTRIB 0.	EXPEN ACCOU	ISE INT	

THE PINO FAMILY FOUNDATION			47-3	568874
RICHARD T. PINO 1007 EXETER DRIVE SIERRA VISTA, AZ 85635	DIRECTOR 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	0.	0.	0.

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT 12 PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

MS. MICHELE PINO 7269 E MANZANITA DR SCOTTSDALE, AZ 85258

FORM AND CONTENT OF APPLICATIONS

INFORMAL WRITTEN REQUESTS WITH DESCRIPTION OF NEED, AMOUNT OF FUNDS REQUESTED AND EXPECTED RESULT IF THE GRANT IS APPROVED

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE