Form_ 990-PF ((25)
Department of the Treasury	V In

EXTENDED TO SEPTEMBER-17, 2018

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.

Depa Interr	rtmen al Rev	t of the Treasury venue Service	▶ Inf	ormation about For	m 99	0-PF and its separate	instructions is	s at www irs	.gov/form990pf	Open to Public Inspection
			or tax year begi				, and e		OCT 31, 2017	Open to Fabric Inapportuni
		foundation							A Employer identification	number
				FOUNDATIO				i	77-0528059	
Nun	nber a	nd street (or P O	box number if mail is	s not delivered to street a	ddre	ss)		Room/suite	B Telephone number	
_ 1	93	0 BRYAN	IT STREE'	<u>r </u>					650-561-07	33
City	or to	own, state or p	rovince, country,	and ZIP or foreign p	osta	l code			C If exemption application is pe	ending, check here
_P	AL	O ALTO,	CA 94	301						
G	heck	all that apply:	Initia	al return		Initial return of a f	ormer public o	harity	D 1. Foreign organizations	, check here
			Final	l return	[Amended return			0 -	
			Add	ress change	[Name change			Foreign organizations me check here and attach col	eting the 85% test, mputation
H C	Check	type of organi	zation:	Section 501(c)(3) ex			ſ		E If private foundation star	tus was terminated
	Se	ction 4947(a)(1) nonexempt cha	arıtable trust	Oth	er taxable private found	ation \		under section 507(b)(1)	
) I Fa	ur ma	arket value of a	ill assets at end o	· —	-		Accr	ual ⁰	F If the foundation is in a	60-month termination
		Part II, col (c,		, ——		(specify)			under section 507(b)(1)	(B), check here
	\$.	 			mn	(d) must be on cash i	basis)		ļ	
ノ <u>[Pa</u> 	art I	→ (The total of an	Revenue and Exp nounts in columns (b ual the amounts in co), (c), and (d) may not		(a) Revenue and expenses per books	ince	vestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions	, gifts, grants, etc	c., received		912,600.	Lagrand St.	1 3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		1965年1984年1985年
	2	Check	•	required to attach Sch. B		11. 14. 14. 16. 12.	The second		的轉音原數例的	27.10是我们的一个人
	3	Interest on savir cash investment	ngs and temporary ts			8,732.		8,732.		STATEMENT 2/3
2018	4	Dividends and	d interest from se	curities		31,476.	3	1,476.		STATEMENT(43)
7	5a	Gross rents			L					医神经性 医几十二种经验
(Ga	b	Net rental incom	ne or (loss)		, i	المارية والمارية المارية	1 / 1 × 1 × 1		がよいころははませ	是心体黑 [天] [5]
ev	6a) from sale of assets		L	362,882.		はは、あるか	the standing	STATEMENT, 1
	b	Gross sales pric assets on line 6	a 1,	867,652.	F 1			(海岸)	第一部 经营业 等于	THE PART THE SECTION
CC	7	Capital gain net	income (from Part IV	, line 2)		with the second of the second	1,86	<u>7,139.</u>		Control of the state of the sta
	8	Net short-terr	m capital gain		1.4	The same of the same of the	م در ۱۰ سیدن	عبيد الهاراية الإيران		Bide Jackson Bide
ON THE STATE OF	9	Income modi Gross sales less			7.0	はあるという。	中海	E THE STATE OF THE	en of a the formal of many of a little	
()	10a	and allowances	 		₹.	\$ \$P\$ (1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Branch Color to the St. And St.
-3	1	Less Cost of go			, ,,,,	75 - 1,48 T. 7. 1 1 1 1 1 1 1 1				
	1	Gross profit of	` <u>—</u> —		-	<u> </u>	rat must	- 15 (Part)		A CONTRACT OF THE PARTY OF THE
	11	Other income	nes it through 11	CENED	-	1,315,690.	1 00	7,347.	0.	TO COLOR OF THE TOP TO SHARE
	12		of officers directors,		S	0.	1,50	0.	0.	0.
	14	Other employ	ee salaries and w	2018 4 2018	ğ	<u> </u>				<u>-</u>
	15	Pension plans	s, employee bene	fits	1		 		<u> </u>	
Ø.	1	Legal fees			1	<u> </u>	 			
SUS	Ь	Accounting fe	es L	DEN, UT		<u>i</u>				
X	C	Other profess			Г					
ē.	17	Interest			Г					
Administrative Expenses	18	Taxes		STMT 4		10.		5.	0.	5.
ţ	19	Depreciation	and depletion	<u></u>						
Ë	20	Occupancy								
		Travel, confe	rences, and meeti	ngs		·				
and	22	Printing and	publications		L	492.		246.	0.	246.
,	23	Other expens	es	STMT 5		85.	<u> </u>	42.	0.	43.
į	24	Total operati	ng and administr	ative	}				-	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Operating		-	dd lines 13 throug	-	<u></u>	587.	ļ	293.	0.	294.
C	25		s, gifts, grants pai		$ldsymbol{ldsymbol{ldsymbol{ldsymbol{eta}}}$	418,744.	2000	* 55.	Acres y transce o	418,744.
	26		es and disbursen	nents	-	440 000			_	
	 	Add lines 24			₩.	419,331.	1	293.	0.	419,038.
			26 from line 12:							
			ue over expenses an		-	896,359.	1 00	7 054		V 100 100 100 100 100 100 100 100 100 10
	1		ent income (if nega		-	<u> 374 (1. 1742) </u>	1,90	7,054.	0.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	ı C	AOJUSTEO NET	income (if negative	e, enter -U-j	1 .	~	J ~	¥. •	; U.	1 87-4 46 5 🔨

Form 990-PF (2016) THE MOLEY FAMILY Attached schedules and amounts in the design of the schedules are schedules and amounts in the design of the schedules are schedules and amounts in the design of the schedules are schedules and amounts in the schedules are schedules and amounts in the schedules are schedules are schedules are schedules and amounts in the schedules are schedules are schedules are schedules and amounts in the schedules are schedules are schedules and amounts in the schedules are schedules and amounts in the schedules are	0	End o	0528059 Page 2
Part II. Balance Sheets Attached schedules and amounts in the discolumn should be for end-of-year amount		(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing	8,069.	38,738.	38,738.
2 Savings and temporary cash investments	37,373.	1,495,232.	1,495,232.
3 Accounts receivable ►		R. GR. T.	一点一点一点
Less: allowance for doubtful accounts		and the second s	
4 Pledges receivable ►			
Less: allowance for doubtful accounts 🕨			<u> </u>
5 Grants receivable	<u> </u>		
6 Receivables due from officers, directors, trustees, and oth	ner		
disqualified persons			<u> </u>
7 Other notes and loans receivable		A to the second of the second	TRANSPORT
Less: allowance for doubtful accounts		ļ	<u></u>
8 Inventories for sale or use	\		
9 Prepaid expenses and deferred charges	 		ļ
10a Investments - U.S. and state government obligations	 		
b Investments - corporate stock		 	<u> </u>
c Investments - corporate bonds	10,800 10 10 10 10 10 10 10 10 10 10 10 10 1		a 1992年 高光光 11 ACM
11 Investments - land, buildings, and equipment basis			
Less accumulated depreciation 12 Investments - mortgage loans	}		
12 Investments - mortgage loans 13 Investments - other			
14 Land, buildings, and equipment; basis		BANK BANKSEL	market and the state of
Less accumulated depreciation			المناسبة الم
15 Other assets (describe ► DOMESTIC EQUI:	TIES) 1,320,317.	606,092.	606,092.
16 Total assets (to be completed by all filers - see the			
instructions. Also, see page 1, item i)	1,365,759.	2,140,062.	2,140,062.
17 Accounts payable and accrued expenses			· · · · · · · · · · · · · · · · · · ·
18 Grants payable			
19 Deferred revenue			
20 Loans from officers, directors, trustees, and other disqualified person	os		在特别是一种。 1
20 Loans from officers, directors, trustees, and other disqualified person 21 Mortgages and other notes payable			
22 Other liabilities (describe >)		Cartinate of Mary Control of the
		<u> </u>	
23 Total liabilities (add lines 17 through 22)	0.	0.	
Foundations that follow SFAS 117, check here		1	1. 法操业的过
and complete lines 24 through 26 and lines 30 and 31.			的自治學學學
24 Unrestricted 25 Temporarily restricted		 	
26 Permanently restricted	<u> </u>	 	
Foundations that do not follow SFAS 117, check here	► X		
and complete lines 27 through 31.			
27 Capital stock, trust principal, or current funds	1,365,759.	2,140,062.	
28 Paid-in or capital surplus, or land, bldg., and equipment fi		0.	
28 Paid-in or capital surplus, or land, bldg., and equipment fi 29 Retained earnings, accumulated income, endowment, or of		. 0.	
30 Total net assets or fund balances	1,365,759.	2,140,062.	
			The second of th
31 Total liabilities and net assets/fund balances	1,365,759.	2,140,062.	
art III Analysis of Changes in Net Assets	or Fund Balances		
			, , , , , , , , , , , , , , , , , , ,
Total net assets or fund balances at beginning of year - Part II,		}	1 265 750
(must agree with end-of-year figure reported on prior year's ret	turn)	1	1,365,759.
Enter amount from Part I, line 27a	D INCDEACEC	2	896,359.
Other increases not included in line 2 (itemize) OTHE	V THCKEWDED		470,117.
Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) CY CHAN	מב זא וואספאניספט כאדי	N OP LOGG E	592,173.
		N OR LOSS 5	2,140,062.
Total net assets or fund balances at end of year (line 4 minus li	ne a) - Fait ii, coluinii (b), line 30		Form 990-PF (2016)

							Page 3			
Part IV Capital Gains and Losses for Tax on Investment Income										
								c) Date acquired (mo., day, yr.)	(d) Dat (mo., da	
1a SHARES OF ZILLOW D 1							0/20/05	01/1	2/17	
b SHARES OF CISCO)					D	V	ARIOUS	02/2	
c SHARES OF CISCO)					D	V	ARIOUS	03/0	
d								<u> </u>	7'	
e										
(e) Gross sales price	(f) D	epreciation allowed (or allowable)		t or other basis xpense of sale				(h) Gain or (los (e) plus (f) minus		
a 200,480.				1	8.				200	,462.
b 1,107,853.		·		33	$\overline{}$				1,107	
c 559,319.				16				· · · · · · · · · · · · · · · · · · ·		,154.
d		······			-					
e			· —,- — ,							
Complete only for assets showin	io dain in c	nlumn (h) and owned by t	he foundation	on 12/31/69	- 		/IV (Gains (Col. (h) gai	n minue	
		i) Adjusted basis		cess of col. (1)			col. (k), but not less th	an -0-) or	
(i) F.M.V. as of 12/31/69		as of 12/31/69		col. (j), if any			,	Losses (from col.	(h))	
				(,,, , _ , , ,	\dashv				200	,462.
<u>a</u>									1,107	
<u>b</u>									550	,154.
C									223	,134.
d										
<u>e</u>					_					
2 Capital gain net income or (net ca	ipital loss)	If gain, also enter If (loss), enter -0-				2			1,867	,139.
•		`			1					
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8,	•	, ,	u (b):		٦١					
If (loss), enter -0- in Part I, line 8		·)·			P	3				0.
Part V. Qualification U	nder S	ection 4940(e) for	Reduced	Tax on Net	Inve	stment I	ncor	ne		
(For optional use by domestic private		<u> </u>								
(i or optional use by domestic private	Touridatio	ing subject to the section 4	JAO(a) tax on	net mvestment m	COME	,				
If section 4940(d)(2) applies, leave the	nıs part bla	ınk.								
Mos the foundation liable for the con-	tion 4040 t	tou on the distributeble om		ar in the base new	40				□ Vaa	X No
Was the foundation liable for the sec				· ·	100 /				Yes	LA NO
If "Yes," the foundation does not qual 1 Enter the appropriate amount in (atrioc			····		
	each coluit		Sit uctions bei	ore making any er				т	(4)	
(a) Base period years		(b) Adjusted qualifying dist	ributiono	Net value of no	(c)	utahla waa ar	ooto	Dıştı	(d) ibution ratio	
Calendar year (or tax year beginni	ng in)			Net value of flo				(col. (b) divided by col. (c))		
2015			2,229.			,277,2		 		42674
2014			4,500.		1	,319,8		ļ		98897
2013			6,000.			712,5		ļ		41694
2012			3,500.			609,7				96152
2011	<u> </u>	41	1,755.			439,7	48.	1	.9	36343
2 Total of line 1, column (d)								2	2.5	<u> 15760</u>
3 Average distribution ratio for the	5-year bas	e period - divide the total o	on line 2 by 5,	or by the number	of ye	ars				
the foundation has been in existe			•	•	•			3	. 5	03152
		·								
4 Enter the net value of noncharitat	ole-use ass	sets for 2016 from Part X. I	ine 5					4	2,102	.448.
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
5 Multiply line 4 by line 3								5	1,057	851.
5 Miditiply line 4 by line 5								3	1,007	,031.
C. Enter 19/ of not investment incom	no /10/ of i	Dort I. June (17h)							10	071
6 Enter 1% of net investment income (1% of Part I, line 27b)					6	13	<u>,071.</u>			
					1 _ 1	1 076	000			
7 Add lines 5 and 6								7	1,076	<u>, 722.</u>
										000
8 Enter qualifying distributions from	n Part XII,	line 4				~		8	419	<u>,038.</u>
If line 8 is equal to or greater that	n line 7, ch	eck the box in Part VI, line	1b, and comp	lete that part usin	ıg a 1'	% tax rate.				
See the Part VI instructions.			-							
623521 11-23-16									Form 990-	PF (2016)

	990-PF (2016) THE MOLEY FAMILY FOUNDATION rt VI: Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	77- 48 -	052805) iction	Page 4
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)	Take .			1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1		38,1	<u>41.</u>
	of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	<u> </u>	1 198 m	1 5 5 5 1 a	<u> </u>
3	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Add lines 1 and 2	2		38,1	<u>0.</u>
A	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	3 4		30 , I	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		38,1	
6	Credits/Payments;	ان دیرین از دیرین او	1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	70 , T	
-	2016 estimated tax payments and 2015 overpayment credited to 2016 4,787.	والمرتوب فتأ		in 1873 - 1884	
	Exempt foreign organizations - tax withheld at source		46岁,上		
	Tax paid with application for extension of time to file (Form 8868) 6c 80,000.	ر در در در		A Silver	
d	Backup withholding erroneously withheld 6d		i vian	13.70	
7	Total credits and payments. Add lines 6a through 6d	7	(84,7	87.
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	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	,	46,6	<u>46.</u>
	Enter the amount of line 10 to be: Credited to 2017 estimated tax ► 46,646. Refunded ► rt VII-A Statements Regarding Activities	11			0.
				TVaa	Ala.
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene any political campaign?	ın		Yes	
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)	2	1 <u>a</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		1b	سروا ایاسی ا	The State
	distributed by the foundation in connection with the activities.	ea or].\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		まな音
C	Did the foundation file Form 1120-POL for this year?		1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		3,55	×21 1	公司 權
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$ 0 .		ري . دري :		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		ام تها۔	1,52	
	managers. ► \$0.			~ Jan ()	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	990	X
^	If "Yes," attach a detailed description of the activities.		24.		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	•	/		X
42	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes Did the foundation have unrelated business gross income of \$1,000 or more during the year?		3 4a	+	X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A 4b	+	<u> </u>
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	+	X
	If "Yes," attach the statement required by General Instruction T.		13.		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		- 156 - 150 - 150		
	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	2.5% 2.5%	1.53	To Age To Age
	remain in the governing instrument?		6	$\perp \!\!\! \perp \!\!\! \perp \!\!\! \perp \!\!\! \perp$	X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	X	LB C 125
_	Example of the Control of the Contro		يو آه	بَيْتِ	
Вa	Enter the states to which the foundation reports or with which it is registered (see instructions)		— ·*`		
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			`	
ע	of each state as required by General Instruction G? If "No," attach explanation		<u> </u>	X	لثلث
9	Is the foundation claiming status as a private operating foundation within the meaning of section $4942(j)(3)$ or $4942(j)(5)$ for caler	ıdar	60	1	
,	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	iuui	9	-	x /
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10	1	$\frac{x}{x}$
		-	Form 99	0-PF	

orm	990-PF (2016) THE MOLEY FAMILY FOUNDATION 77-052	8059		² age 5
Pa	rt VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	1 1	1	
	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 privileges?			
	If "Yes," attach statement (see instructions)	12	į	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► HTTP://AG.CA.GOV/CHARITIES			
14	The books are in care of ► ANDREW MOLEY Telephone no. ► 650-5	61-0	733	
•••	Located at ▶1930 BRYANT STREET, PALO ALTO, CA ZIP+4 ▶9			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		_	一
13	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
46	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
10		$\overline{}$. 03	X
	securities, or other financial account in a foreign country?	16	ξe	A 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			3.4
De	foreign country ► Int:VII-B Statements Regarding Activities for Which Form 4720 May Be Required	7 - 19	-	<u></u>
		1 3% 11	V	Na
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1 32	'34E (
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	77		
	a disqualified person?	\$ 550 A	1	美洲
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		1. 2.	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	5.		ระวัน
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		~ '44.	
	if the foundation agreed to make a grant to or to employ the official for a period after		i ding	white a
	termination of government service, if terminating within 90 days.)	1 2 2	<u> </u>	
t	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		3	
	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	195	î . , î .	72.72
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	ا من الله	رائی شور	ಜ್ಞಾನವು ಬ್ಲ್ ≻ನ
	before the first day of the tax year beginning in 2016?	1c		_X_
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	767 To	1,5-3	
	defined in section 4942(j)(3) or 4942(j)(5)):	100	3. P	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
a	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	177	. ≱ . `	
	before 2016? Yes X No			5 1 3 3 Y
	If "Yes," list the years	1		
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			525 33 525 33
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	35 J.	\$ 5.7 2 5.7	
	statement - see instructions.) N/A	2b	.2 . 3	
	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	, ,	.,`	÷ 12. 1
		3	£, [1,000 1,000
3:	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	[
-	during the year?			14.18
,	of "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after	15.		, = <u>14</u>
•	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		ر راجينيون-
	·	#	-	÷- *÷-;-
4.				X
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	4a	r	# \$
•	had not been removed from jeopardy before the first day of the tax year beginning in 2016?			X
		<u> 4b </u> orm 990)_PE	
	F	ひここうしょう	/-T-T-	(2010)

Part/VII-B Statements Regarding Activities for Which Fo		equired - (77-03280	33 Page 6
	orning both	equired (contin	uea)	ा ।
5a During the year did the foundation pay or incur any amount to:	40.4E(a))?		es 🗓 No	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section		S A NO		
(2) Influence the outcome of any specific public election (see section 4955); or		्ष्टिः		
any voter registration drive?	`		es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes?		Y6	es X No s	
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section	·1	(TET)	强性生活
4945(d)(4)(A)? (see instructions)			es 🗓 No 😽	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t		المحال المحا	。 一种有一种
the prevention of cruelty to children or animals?			es 🗓 No 🏻	"一"
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	·	n Regulations	/	الشاسانك
section 53.4945 or in a current notice regarding disaster assistance (see instruc	•		N/A	5b
Organizations relying on a current notice regarding disaster assistance check he				是以图
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				透析的過
expenditure responsibility for the grant?	Ŋ	I/A Ye	s No	
If "Yes," attach the statement required by Regulations section 53.4945-	-5(d).		0.0	17.346万亿。
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on			经 经
a personal benefit contract?		Ye	es 🗶 No 🚶	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a positive product of the pro	ersonal benefit contract?		1	6b X
If "Yes" to 6b, file Form 8870.				性動性には
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es 🗶 No 🗓	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b
Part VIII Information About Officers, Directors, Truste	es, Foundation Mar	nagers, Highly		
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their of		14.50	T Call a	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) name and address	to position	enter -0-)	compensation	allowances
				}
	•		{	}
SEE STATEMENT 6		0.	0.	0.
				ĺ
·				}
		 		
		<u> </u>		L
			}	ļ
		<u> </u>	<u> </u>	<u></u>
2 Compensation of five highest-paid employees (other than those incl		enter "NONE."	7.35	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other
	devoted to position	(C) Compensation	compensation	allowances
NONE			ļ	ļ
		<u> </u>		
	_]]
		<u> </u>		
				_
		<u> </u>		
			}	,
]	
			<u> </u>	
Total number of other employees paid over \$50,000				0
			Form	990-PF (2016)

Form 990-PF (2016) THE MOLEY FAMILY FOUNDATION	77-0)528059 Page 7
Part/VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	——————————————————————————————————————
3 Five highest-paid independent contractors for professional services. If none, enter "N	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistica number of organizations and other beneficiaries served, conferences convened, research papers produce	I information such as the d, etc.	Expenses
1 N/A		
		
2		
3		
4		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on line	s 1 and 2.	Amount
1 N/A		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.
		Form 990-PF (2016)

randums paid (morading administrative expenses) to accomplish dilamanic, cic., purposes.		
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	419,038.
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:	4.2.5	
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	419,038.
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	6	419,038.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation gualifies for the section

Form **990-PF** (2016)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
Distributable amount for line 7	or 2016 from Part XI,				66,981.
2 Undistributed income, if any	, as of the end of 2016	和的原因 经选择		""。"·","老女的女子说。	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
a Enter amount for 2015	only	· · · · · · · · · · · · · · · · · · ·	代于特别的企	0.	
b Total for prior years:		隐匿的 诗一次说法		3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
2014, 2013	, 2012	"不是我。你就是自	0.	[公路] 医遗传管	自己的证明,这个人的
3 Excess distributions ca	rryover, if any, to 2016:	以外,数一样 的		Mary Line Control	
a From 2011	398,258.		新产业 法书题。"		
b From 2012	342,456.				
c From 2013	356,872.		"我们是我的一个人的。"		
d From 2014	339,016.				14. 建设设施
e From 2015	182,229.	سُرِسَيْكُ مِنْ أَنْ أَنْ الْمُسْلِقُ اللَّهِ اللَّهِ اللَّهِ اللَّهِ اللَّهِ اللَّهِ اللَّهِ اللَّهِ اللَّهِ		では、変変を変える	
f Total of lines 3a throug	jh e	1,618,831.	as I a total in the late.	文化 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	型 第三章 管理通過
4 Qualifying distributions			[[4] [[2] [[4] [[4] [[4] [[4] [[4] [[4]	は大きのでは、	
Part XII, line 4: ► \$	419,038.		· · · · · · · · · · · · · · · · · · ·		Andrew Land
a Applied to 2015, but no			1717年代 经营业工程 艾花士	0.	
b Applied to undistribute	•		_	高级发展的复数形	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
years (Election required		THE THE REAL PROPERTY AND THE PARTY OF	0.		是是是一个一个
c Treated as distributions	•		以逐渐学和南海	是人类的主要是	
(Election required - see	•	0.		SAR THAT THE	Elegan State Control
d Applied to 2016 distrib		水流		原始生产的激素。	66,981.
e Remaining amount dist	•	352,057.			भिनित्र । स्वर्धाः क्षेत्रं क्षेत्रं क्षेत्रं
5 Excess distributions carryov (If an amount appears in col	ver applied to 2016 lumn (d), the same amount	0.	· 五世の一年 1997年 1998年 1日		0.
must be shown in column (a	a))	医性影子的人		2. 张光·江东·北东	
6 Enter the net total of e indicated below:					
a Corpus Add lines 3f, 4c, an		1,970,888.	いいとうできてはないというといいといいいと		大大學的 医中央中心 人名 大大
b Prior years' undistribut	ed income. Subtract				经净 医小说 时时
line 4b from line 2b		The state of the s	0.		
c Enter the amount of pri undistributed income for deficiency has been iss the section 4942(a) tax assessed	or which a notice of ued, or on which		0.		
d Subtract line 6c from li	ne 6h Taxable	The state of the s		A series of the control of the contr	
amount - see instructio			0.		
e Undistributed income f		المناه المناهد المناهد المناهد		140 th 40 21	
4a from line 2a. Taxabli				0.	The state of the s
f Undistributed income for	or 2016. Subtract	The state of the s		The second second second	
lines 4d and 5 from line	1. This amount must		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
be distributed in 2017					0.
7 Amounts treated as dis	tributions out of		さまずごをは は食物		The fact of the fact of the fact of
corpus to satisfy requir	ements imposed by			entities of the state of the st	
section 170(b)(1)(F) or	4942(g)(3) (Election				医生生 医骨折线
may be required - see i	nstructions)	0.		2. 3, 2/ 4, 2 22,	
8 Excess distributions ca	rryover from 2011				
not applied on line 5 or	line 7	398,258.	oly of the later of the		to the country of the
9 Excess distributions ca					
Subtract lines 7 and 8 f	from line 6a	1,572,630.		المياضين بجائب روائد الما	- 4 4
10 Analysis of line 9:	242				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
a Excess from 2012	342,456.				
b Excess from 2013	356,872.				
c Excess from 2014	339,016.				
d Excess from 2015	182,229.				
e Excess from 2016	352,057.				600 5=
623581 11-23-16					Form 990-PF (2016)

Form 990-PF (2016) THE MOL		OUNDATION-		N/A	528059 Page 10
1 a If the foundation has received a ruling of			1	14/14	
foundation, and the ruling is effective fo					
b Check box to indicate whether the found			in section	1942(j)(3) or	4942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year	ling tourisation decomposit	Prior 3 years	10 12(1)(0) 01	1042()(0)
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(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		`\			ļ
exempt activities					}
e Qualifying distributions made directly		1			
for active conduct of exempt activities.	Ì				
Subtract line 2d from line 2c			pie e		
3 Complete 3a, b, or c for the			/ 		
alternative test relied upon:	1	di n			
a "Assets" alternative test - enter:(1) Value of all assets	}	A STATE OF THE STA			
` '		N. St.			
(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	- Destrit				
listed		 	 	\	
c "Support" alternative test - enter:	A STATE OF THE STA		1		
(1) Total support other than gross investment income (interest,			}		
dividends, rents, payments on	}		1		ł
securities loans (section	ļ		}		
512(a)(5)), or royalties)			 		_
(2) Support from general public and 5 or more exempt	}		}		
organizations as provided in	Ì				
section 4942(I)(3)(B)(III)	}		 	 	
(3) Largest amount of support from	1				
an exempt organization	 	- 	 		+
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation h	ad \$5 000 or m	ore in accets
at any time during t			i the foundation in	au \$5,000 of 111	ore in assets
					
1 Information Regarding Foundation	•	than OU/ of the total acres			l-a6 -a- 4
a List any managers of the foundation where year (but only if they have contributed in the contributed of			ributions received by the to	undation before the ci	ose of any tax
	11010 than \$0,000). (000	30011011 305 (4)(2).)			
SEE STATEMENT 7	20 0UID 100/ 07	he stock of a second	lor on equally large section	af the augustation of a	
b List any managers of the foundation who other entity) of which the foundation has			or an equally large portion	or the ownership of a	partnership or
	o.v or grouter interc				
NONE Control Control	in Orant Old In	Cabala-stin : -			
2 Information Regarding Contribut				languat was all a dead	aventa for fire de 11
Check here X if the foundation the foundation makes gifts, grants, etc.	only makes contributions	s to preseiected charitable	organizations and does not	accept unsolicited re-	quests for tunds. If
					
a The name, address, and telephone num	iber or e-mail address of	the person to whom appli	cations should be addresse	ed.	
b The form in which applications should be	be submitted and informa	ation and materials they s	hould include:		
c Any submission deadlines:					
A Any contractions or limitations on consider	te euch as hy assarath	nal argae, phoretoble (-)	kinds of institutions as at	on foators	
d Any restrictions or limitations on award	is, such as by geographic	vai areas, criditiable tields,	, kinus of institutions, or oti	iei iactors.	
623601 11-23-16					Form 990-PF (2016)

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or **Amount** status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year SEE STATEMENT 501(C)(3) BELLARMINE PREPARATORY SCHOOL NONE 2300 S. WASHINGTON STREET TACOMA, WA 98405 100,000. SEE STATEMENT BETHLEHEM UNIVERSITY NONE 501(C)(3) P.O. BOX 355 BELTSVILLE, MD 20705 100,000. SEE STATEMENT GEORGETOWN UNIVERSITY NONE 501(C)(3) 37TH & O STREETS WASHINGTON, DC 20057 168,744. SEE STATEMENT SANTA CATALINA SCHOOL _- LEGACY NONE 501(c)(3) CAMPAIGN 150 MARK THOMAS DRIVE MONTEREY, CA 93940 50,000. ► <u>3a</u> 418,744. Total **b** Approved for future payment NONE Total **▶** 3b

Form 990-PF (2016)

Part XVI-A Analysis of Income-Producing Activities

	·				
Enter gross amounts unless otherwise indicated.	(a) Business	business income (b) Amount	Excluded be code	y section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program service revenue: a b c d e f g Fees and contracts from government agencies 2 Membership dues and assessments					
·	 		 - -		
3 Interest on savings and temporary cash	,		14	9 732	
investments 4 Dividends and interest from securities	 		01	8,732. 31,476.	
5 Net rental income or (loss) from real estate:	4 30 30 5	128 J. P. W. 1803	15-6 45	31,470.	- The first of the same
a Debt-financed property	1.4.1		(Mer of 1-8)	1910 A 15 15 18 18 18 18 18 18 18 18 18 18 18 18 18	The office of the State of the
b Not debt-financed property			╁╌┤╌		
6 Net rental income or (loss) from personal	 -		 		
property			1 1		
7 Other investment income			 	·	
8 Gain or (loss) from sales of assets other	 		+		
than inventory			18	362,882.	
9 Net income or (loss) from special events			 		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a			<u> </u>		
b			1		
c			<u> </u>		
d			1		
e	_		 		
12 Subtotal. Add columns (b), (d), and (e)	East of the	<u> </u>	** T. C.	403,090.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	403,090.
(See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie		plishment of Ex	empt Pu	rposes	
Line No. Explain below how each activity for which	income is reported in c	column (e) of Part XVI-	A contributed	I importantly to the accomp	lishment of
the foundation's exempt purposes (other t	nan by providing tunds	for such purposes).			
					
					
					
					
					
					
					
		- 			
	· — ——				
					
					
					5 000 DE (0)40)
					- ODO DE

16) THE MOLEY FAMILY FOUNDATION 77-0528059 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

	_				g with any other organization		tion 501(c) of	Yes	No
	•	other than section 50 i(c) rom the reporting founda			7, relating to political organ	izations?		in the second	
	Cash	rom the reporting rounds	ition to a noncharitat	ne exempt org	anization of.			1 <u>a(1)</u>	X
	Other	assets						1a(2)	X
		sactions:							
(1)	Sales	of assets to a noncharitat	ble exempt organizati	ion				1b(1)	X
		ases of assets from a nor						1b(2)	X
(3)	Renta	of facilities, equipment,	or other assets					1b(3)	X
(4)	Reimb	ursement arrangements						1b(4)	X
		or loan guarantees						1b(5)	X
		mance of services or mei		-				1b(6)	X
	_	facilities, equipment, mai			· -			1c)	X
					dule. Column (b) should al				
		the value of the goods, (d less than fair market valu	e in any transaction	n or snaring arranger	nent, snow in	
(a) Line ni		(b) Amount involved			exempt organization	(d) Description	on of transfers transaction	ns, and sharing arrangeme	ente
(a) 2o		(b) runoum mvolvou	(6) ((4))	N/A	Oxompt organization	(a) Description	in or a ansiers, transactio	ns, and sharing a range in	
	_								
	\neg						 .		
	_ _							- 	
			l 						
									
									
	+-								
					- 				
	+				····				
	_			· — · — —					
	_								
2a lst	he foun	dation directly or indirect	lly affiliated with, or r	elated to, one	or more tax-exempt organi	zations described			
ın s	section	501(c) of the Code (other	than section 501(c)	(3)) or in secti	on 527?			Yes [X No
b If "	Yes," co	mplete the following sche			,				
		(a) Name of org	anization		(b) Type of organization	<u> </u>	(c) Description of re	elationship	
		N/A				ļ			
						ļ			
						 			
			·			 			
	Under	penalties of perjury, I declare the	hat I have examined this	return, including	accompanying schedules and st	atements, and to the b	est of my knowledge		
Sign	and be	hef, it is true, correct, and com	plete Declaration of pre	parer (other than	taxpayer) is based on all informa	tion of which preparer i	has any knowledge	May the IRS discuss return with the prepare	arer
Here		11/1/2	In	7	19-14-18	TREASE	non	shown below (see in X Yes	No No
	Sign	ature of officer or trustee	/		Date	Title			
		Print/Type preparer's na	ime	Preparer's si	gnature	Date	Check if	PTIN	
				2	O .		self- employed		
Paid		ROXANNE LAINE			ma Long	09/13/2018		P00177656	5
Prepa		Firm's name ► PRI	CEWATERHO	USECOOI	PERS, LLP		Firm's EIN ► 1	3-4008324	
Use (אוויכ	Eremin address > 40	0 37343555	Dr tro	GMP 1000				
		Firm's address > 48					10	0 017 270	,
		SA	N JOSE, C	H 3310	0-2/09		Phone no. 40	8 817-3700 Form 990-PF	
				-				FUIII 330-FI	(2010)

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

2016

Name of the organization

Employer identification number

T	HE MOLEY FAMILY FOUNDATION	77-0528059
Organization type (check	one):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 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 Special Ru	le See instructions.
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling by one contributor. Complete Parts I and II See instructions for determining a contributor.	
Special Rules		
sections 509(a)(1 any one contribu	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, itor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amounts, line 1 Complete Parts I and II.	or 16b, and that received from
year, total contri	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from soutions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or education of cruelty to children or animals. Complete Parts I, II, and III	
year, contribution is checked, ente purpose. Don't c	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from this exclusively for religious, charitable, etc., purposes, but no such contributions totaled may refer the total contributions that were received during the year for an exclusively religious complete any of the parts unless the General Rule applies to this organization because it bile, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000 If this box s, charitable, etc.,
but it must answer "No" of certify that it doesn't mee	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fon Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its F the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	orm 990-PF, Part I, line 2, to
LHA For Paperwork Re	duction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule	B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

THE	MOLEY	FAMILY	FOUNDATION
Inc	MODEL	LWMTTI	LOUNDALION

Contributors (See instructions). Use duplicate copies of Part I if	f additional space is needed.	
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
P.O. BOX 4316 CARMEL, CA 93921	\$\$ \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		Person Payroll Noncash (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\$	Person Payroli Noncash (Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	 \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		Person Payroll Noncash (Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	 \$	Person Payroli Noncash (Complete Part II for noncash contributions)
	(b) Name, address, and ZIP + 4 RICHARD MOLEY P.O. BOX 4316 CARMEL, CA 93921 (b) Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4	(b)

Employer identification number

THE MOLEY FAMILY FOUNDATION

77-0528059

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	30,000 SHS CISCO SYSTEM, INC.		
1	HIGH - 30.77		1
	LOW - 30.35	 }	1
	AVG - 30,56	\$ 912,600.	12/28/16
(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
		\$	
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No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
			1

Vame of orga	(Form 990, 990-EZ, or 990-PF) (2016)	A STATE OF THE STA	Employer identification number				
	LEY FAMILY FOUNDATION		77-0528059				
Part III	the year from any one contributor. Complete	columns (a) through (e) and the follow	section 501(c)(7), (8), or (10) that total more than \$1,000 for ving line entry. For organizations				
	completing Part III, enter the total of exclusively religiou Use duplicate copies of Part III if addition	s, charitable, etc., contributions of \$1,000 or lead space is needed.	ess for the year (Enter this info once)				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gift					
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No.							
from Part i	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I							
-		(e) Transfer of gift					
	Transferee's name, address, a		Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
}		(e) Transfer of gift					
}	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				

	90-PF	GAIN OR (LOSS) FROM SALE	OF A	SSETS		STA	TEMENT 1
DESCRI	(A) PTION OF PROPERT	Y			ANNER QUIRED	DA' ACQU		DATE SOLI
SHARES	OF ZILLOW			DO	NATED	10/20	0/05	01/12/17
	(B)	(C) VALUE AT	(D)	ΛĦ	(E)			(F)
	GROSS SALES PRICE	TIME OF ACQ	EXPENSE SALE		DEPRE	c.	GAIN	OR LOSS
	200,480.	200,30	3.	0.		0.		177.
DESCRI	(A) PTION OF PROPERT	Y			ANNER QUIRED	DA' ACQU		DATE SOLD
SHARES	OF CISCO			DO	NATED	VARIO	ous	02/22/17
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ	(D) EXPENSE SALE		(E) DEPRE	C		(F)
	1,107,853.			0.		0.	GAIN	296,866.
SHARES	OF CISCO (B) GROSS	(C) VALUE AT	(D) EXPENSE		NATED (E)	VARIO		03/09/17 (F)
	SALES PRICE	TIME OF ACQ		01	DEPRE	c.	GAIN	OR LOSS
	SALES PRICE							
	559,319.	493,48		0.		0.		65,839.
CAPITA		493,48	0.	0.		0.		65,839.
	559,319.	493,48 S FROM PART I	v	0.		0.		
	559,319. GAINS DIVIDEND FORM 990-PF,	493,48 S FROM PART I	V 6A		INVEST	•	STA	0.
TOTAL '	559,319. GAINS DIVIDEND FORM 990-PF,	493,48 S FROM PART I PART I, LINE ON SAVINGS AN	V 6A		(B)	- MENTS	A	0. 362,882.
FORM 99	559,319. GAINS DIVIDEND FORM 990-PF,	493,48 S FROM PART I PART I, LINE ON SAVINGS AN	V 6A D TEMPORARY (A) REVENUE	CASH	(B) INVESTI	- MENTS	A	0. 362,882. ATEMENT 2 (C) DJUSTED

THE MOLEY FAMILY FOU	NDATION					77-0528059	
FORM 990-PF	DIVIDENDS	S AND INTER	EST	FROM SECUR	ITIES S'	PATEMENT 3	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
GOLDMAN SACHS	31,476	•	0.	31,476.	31,476.	0.	
TO PART I, LINE 4 31,470		0. 31,476		31,476.	31,476.	0.	
FORM 990-PF		TAX	ES	 	S	FATEMENT 4	
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FRANCHISE TAX BOARD	 -	10.		5.	0.	5.	
TO FORM 990-PF, PG 1	, LN 18	10.	·	5.	0.	5.	
FORM 990-PF	2 2 1 4 3 3	OTHER E	XPE	 NSES	S	PATEMENT 5	
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) I INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
BANK CHARGES FEE TO ATTORNEY GENE	RAL	60. 25.		30. 12.	0.	30. 13.	
TO FORM 990-PF, PG 1	, LN 23	85.		42.	0.	43.	

FORM 990-PF PART VIII - LIST TRUSTEES AND	OF OFFICERS, DIFOUNDATION MANAGE	EMENT 6		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
RICHARD MOLEY P.O. BOX 4316 CARMEL, CA 93921	PRESIDENT 10.00	0.	0.	0.
ELIZABETH MOLEY P.O. BOX 4316 CARMEL, CA 93921	VICE PRESIDENT 10.00	0.	0.	0.
ANDREW MOLEY 1930 BRYANT STREET PALO ALTO, CA 94301	TREASURER 0.00	0.	0.	0.
SUSAN FRANCES MOLEY 812 6TH STREET MANHATTAN BEACH, CA 90266	SECRETARY 0.00	0.	0.	0.
PETER MOLEY	BOARD MEMBER 0.00	0.	0.	0 .
JOANNA MOLEY STORK	BOARD MEMBER 0.00	0.	0.	0
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0
	XV - LINE 1A OUNDATION MANAGE	RS	STAT	EMENT 7

NAME OF MANAGER

RICHARD MOLEY ELIZABETH MOLEY