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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

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2019

OMB No. 1545-0052

# **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.
 Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

		ndar year 2019, or tax year beginni	ng 11-01-20	19 , aı		ing 10-31-				
		Indation TY FAMILY FOUNDATION				77-0528059	entification numbe	r		
Num	her and	street (or P.O. hav number if mail is not delivered	to street address)	Room/suite						
Number and street (or P.O. box number if mail is not delivered to street address)  1930 BRYANT STREET  Room/suite							B Telephone number (see instructions)			
City	or towr	, state or province, country, and ZIP or foreign post	tal code			(650) 561-0733				
PALC	ALTO,	CA 94301				C If exemption	application is pendin	g, check here		
i Ch	neck al	l that apply: $\Box$ Initial return $\Box$ In	itial return of a t	former public charity		<b>D 1.</b> Foreign or	ganizations, check he	ere		
			mended return				ganizations meeting k here and attach co			
		<u> </u>	ame change			·	undation status was t	· -		
_	,	pe of organization: Section 501(c)(3)					n 507(b)(1)(A), chec			
				private foundation						
of '	year (f	rom Part II, col. (c),  ► 2 130 432	ner (specify)	☑️ Cash ☐ Accru  be on cash basis.)	ıaı		ation is in a 60-montl n 507(b)(1)(B), chec			
_				20 011 cash 2asis.)				I		
Рa	rt I	Analysis of Revenue and Expense of amounts in columns (b), (c), and (d) may not equal the amounts in column (a) (see instruction	necessarily	(a) Revenue and expenses per books	( <b>b</b> ) Ne	et investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, etc., received (schedule)	attach							
	2	Check ► ✓ if the foundation is <b>not</b> require	ad to attach							
e e		Sch. B	ed to attach							
	3	Interest on savings and temporary cash inv	estments	10,563	1	10,563				
	4	Dividends and interest from securities		32,089		32,089				
	5a b	Gross rents								
	6a	Net gain or (loss) from sale of assets not or	n line 10							
Revenue	b	Gross sales price for all assets on line 6a								
Şe S	7	Capital gain net income (from Part IV, line	2)			0				
_	8	Net short-term capital gain								
	9	Income modifications								
	10a	Gross sales less returns and allowances								
	b	Less: Cost of goods sold								
	11	Gross profit or (loss) (attach schedule)  Other income (attach schedule)		18,533		0	0			
	12	Total. Add lines 1 through 11		61,185		42,652	0			
	13	Compensation of officers, directors, trustee		01,103		0	0			
	14	Other employee salaries and wages								
Ž.	15	Pension plans, employee benefits								
35	16a	Legal fees (attach schedule)								
ž Ž	ь	Accounting fees (attach schedule)		14,000		7,000	0	7,000		
t) Li	С	Other professional fees (attach schedule)								
2	17	Interest								
7	18	Taxes (attach schedule) (see instructions)		9,000		0	0	С		
	19	Depreciation (attach schedule) and depletion	on							
Ħ	20	Occupancy	ŀ							
<u> </u>	21 22	Travel, conferences, and meetings Printing and publications								
ਹ ਹ	23	Other expenses (attach schedule)		127	,	63	0	64		
Operating and Administrative Expenses	24	Total operating and administrative exp								
E C		Add lines 13 through 23		23,127		7,063	0	7,064		
5	25	Contributions, gifts, grants paid		387,488				387,488		
	26	<b>Total expenses and disbursements.</b> Add 25	d lines 24 and	410,615		7,063	0	394,552		
	27	Subtract line 26 from line 12:								
	а	Excess of revenue over expenses and disbursements		-349,430						
	ь	Net investment income (if negative, enter	er -0-)			35,589				
	С	Adjusted net income (if negative, enter -	<u> </u>				0			
or	Daner	work Reduction Act Notice, see instruct	ions			+ No. 11289	, <u> </u>	m QQ0-PF (2019)		

		PF (2019)						Page <b>2</b>
Pa	rt II	<b>Balance Sheets</b>	Attached schedules and amounts in the description should be for end-of-year amounts only. (See instru		Beginning of year	(1	End o <b>b)</b> Book Value	f year (c) Fair Market Value
	1	Cash—non-interest			<b>(a)</b> Book Value 91,814	( )	51,198	51,198
	2		prary cash investments		1,582,452		1,273,638	
	3		e ►		1/302/132		1,2,3,000	1,2,5,555
	,		doubtful accounts ▶					
	4		►					
	-		doubtful accounts -					
	_		doubtful accounts •					
	5		om officers, directors, trustees, and other					
	6							
	_	•	s (attach schedule) (see instructions)					
	7		ans receivable (attach schedule) ▶					
			doubtful accounts P					
<u>چ</u> ا	8		e or use					
Assets	9		and deferred charges					
Ϋ́	10a	Investments—U.S.	and state government obligations (attach sch	edule)				
	b	Investments—corpo	orate stock (attach schedule)					
	С	Investments—corpo	orate bonds (attach schedule)					
	11		, buildings, and equipment: basis 🟲					
		Less: accumulated	depreciation (attach schedule)					
	12	Investments-mort	tgage loans					
	13	Investments—other	r (attach schedule)					
	14	Land, buildings, and	d equipment: basis 🕨					
		Less: accumulated	depreciation (attach schedule)					
	15	Other assets (descr	ribe <b>&gt;</b>	_)	1,066,124	<b>%</b> J	805,596	805,596
	16	Total assets (to be	e completed by all filers—see the					
		instructions. Also, s	see page 1, item I)		2,740,390		2,130,432	2,130,432
	17	Accounts payable a	and accrued expenses					
	18	Grants payable .						
es	19	Deferred revenue .						
≝∣	20	Loans from officers	s, directors, trustees, and other disqualified pe	rsons				
Liabilities	21	Mortgages and other	er notes payable (attach schedule)					
ן⊏	22	Other liabilities (de	escribe ►	)				
	23		dd lines 17 through 22)		0		0	
_		•						
ès			follow FASB ASC 958, check here ▶ L	J				
릙		•	es 24, 25, 29 and 30.					
Fund Balance	24		donor restrictions					
핕	25	Net assets with dor	nor restrictions					
اق		Foundations that	do not follow FASB ASC 958, check here	▶ ☑				
5		and complete line	es 26 through 30.					
	26	Capital stock, trust	principal, or current funds		2,740,390		2,130,432	
Assets	27	Paid-in or capital su	urplus, or land, bldg., and equipment fund		0		0	
A.	28	Retained earnings,	accumulated income, endowment, or other fu	ınds	0		0	
Net	29	Total net assets o	or fund balances (see instructions)		2,740,390		2,130,432	
2	30	Total liabilities ar	nd net assets/fund balances (see instruction	ons) .	2,740,390		2,130,432	
Pa	rt III	Analysis of Ch	nanges in Net Assets or Fund Balanc	es	<u>'</u>			
1	Tota	l net assets or fund	balances at beginning of year—Part II, column	n (a), line	e 29 (must agree with	end-		
	•		on prior year's return)			•	1	2,740,390
2		er amount from Part				•	2	-349,430
3			uded in line 2 (itemize) ▶				3	0 2 200 060
4 5			in line 2 (itemine)			•	5	2,390,960 260,528
6			in line 2 (itemize) ► balances at end of year (line 4 minus line 5)—	-Dart II			6	2,130,432
J	iota	ii nec assets or rullu i	balances at end of year (line + linings line 5)	rait II, C	Joianni (D), inie 23	•	, <b>y</b> ,	2,100,702

Page **3** 

	be the kind(s) of property sold (e.g., arehouse; or common stock, 200 shs		uired D hase (r	(c) Date acquired mo., day, yr.)	(d) Date sold (mo., day, yr
1a					
	(f) Depreciation allowed	(g) Cost or other basis			<b>h)</b> r (loss)
Gross sales price	(or allowable)	plus expense of sale			) minus (g)
b					
d					
е					
Complete only for asset	s showing gain in column (h) and ow	ned by the foundation on 12/31/6	9		I)
<b>(i)</b> F.M.V. as of 12/31/69	( <b>j)</b> Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	d	col. (k), but not	h) gain minus less than -0-) <b>oı</b> om col.(h))
a					
b					
e d					
		If gain, also enter in Part I, line 7			
·	e or (net capital loss)  gain or (loss) as defined in sections 1 art I, line 8, column (c) (see instructi	. , , , ,	] 2		
in Part I, line 8			. } 3		
Part V Qualification	Under Section 4940(e) for Re	duced Tax on Net Investm	ent Incom	ie	
(For optional use by domestic	private foundations subject to the sec	ction 4940(a) tax on net investmen	nt income.)		
If section 4940(d)(2) applies, I	leave this part blank.				
	he section 4942 tax on the distributal not qualify under section 4940(e). Do		e period?	☐ Y€	es 🔽 No
	mount in each column for each year;	see instructions before making an	y entries.		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		( <b>d)</b> Distribution ratiol. (b) divided by co	ol. (c))
2018	394,183	2,782,05			0.141688
2017	503,022 419,038	2,893,46 2,102,44			0.173847 0.199310
2015	182,229	1,277,34	_		0.142662
2014	394,500	1,319,85			0.298897
2 Total of line 1, column	(d)		2		0.956404
number of years the fou	io for the 5-year base period—divide I Indation has been in existence if less oncharitable-use assets for 2019 from	than 5 years	3 4		0.191281 2,371,365
<b>5</b> Multiply line 4 by line 3		•	5		453,597
	nent income (1% of Part I, line 27b)		6		356
<b>7</b> Add lines 5 and 6			7		453,953
	tions from Part XII, line 4 , reater than line 7, check the box in Pa		8 part using a 1	1% tax rate. Se	394,552 e the Part VI
				Ec	rm <b>QQN_DF</b> (20

	990-F1 (2019)		- 4-20.14	<b>-</b>			P	age (
श्च		ing Activities for Which	Form 4720 May Be	Required (continued)				
ā	During the year did the foundation p	·					Yes	No
	(1) Carry on propaganda, or otherw	ise attempt to influence legisl	ation (section 4945(e))?	☐ Yes 5	<b>⊘</b> No			
	(2) Influence the outcome of any sp	ecific public election (see sect	tion 4955); or to carry					
	on, directly or indirectly, any vot	er registration drive?		· · 🔲 Yes	✓ No			
	(3) Provide a grant to an individual (	for travel, study, or other sim	ilar purposes?	☐ Yes S	☑ No			
	(4) Provide a grant to an organization	on other than a charitable, etc	, organization described		<u> </u>			
	in section 4945(d)(4)(A)? See in	structions		· · □ v •	<b>⊘</b> No			
	(5) Provide for any purpose other th	an religious, charitable, scien	tific, literary, or	· · Yes	✓ No			
	educational purposes, or for the		* * * * * * * * * * * * * * * * * * * *	— —	<del>,</del>			
b	If any answer is "Yes" to $5a(1)-(5)$ ,	•		centions described in	<b>⊻</b> No			
_	Regulations section 53.4945 or in a c	•				5b		
	Organizations relying on a current no			_	_,			
_	If the answer is "Yes" to question 5a			[	_			
C	•	• • •	•		_			
	tax because it maintained expenditu	, ,		''	⊔ No			
	If "Yes," attach the statement requir	· -						
ia	Did the foundation, during the year,	receive any funds, directly or	indirectly, to pay premi	ums on				
	a personal benefit contract?			· 🗌 Yes	✓ No			
b	Did the foundation, during the year,	pay premiums, directly or ind	lirectly, on a personal be		[	6b		No
	If "Yes" to 6b, file Form 8870.							
'a	At any time during the tax year, was	the foundation a party to a p	prohibited tax shelter tra	nsaction?	✓ No			
b	If "Yes", did the foundation receive a	iny proceeds or have any net	income attributable to the	ne transaction?	<u>-                                    </u>	7b		
3	Is the foundation subject to the secti	ion 4960 tax on payment(s) o	of more than \$1,000,000	in remuneration or	Γ			
	excess parachute payment during th				<del>.</del>			
					✓ No L			
Pai	and Contractors	fficers, Directors, Trust	lees, roundation Ma	magers, migniy Paid	Employ	ees,		
_								
1	List all officers, directors, trustee				1			
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans a			se acc	
	(-,	devoted to position	-0-)	deferred compensation		her al	lowand	es
ee A	Additional Data Table							
								,,
2	Compensation of five highest-pai	d employees (other than ti	nose included on line :		none, en	ter "	NONE.	
- \ I	Name and address of each employee :	(b) Title, and average		(d) Contributions to employee benefit	(a) F	vnanc	se acco	unt
u ,	more than \$50,000	nours per week	(c) Compensation	plans and deferred			owance	
	. ,	devoted to position		compensation				
ONE								
ota	I number of other employees paid ove	r \$50,000	<u></u> .					
					Forr	n <b>99</b> 0	D-PF (	2019

Form 990-PF (2019)		Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional servic	es (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total</b> 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 rele organizations and other beneficiaries served, conferences convened, research papers produ		r of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see i	nstructions)	
Describe the two largest program-related investments made by the foundation during the	<u> </u>	Amount
1	,	
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		• o
Total Add Mico Landagn 5		Form <b>990-PF</b> (2019)

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

Page 8

118,568

117,856

117.856

117.856

394,552

394,552

394.552

Form 990-PF (2019)

712

Form 990-PF (2019)

Part X

Part XI

1

2a

3

4 5

6

1

2

3

4

5

b

Part XII

#### 3 3 2,407,477 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see 4 4 36,112

5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4 2.371.365 5 6 118.568 6 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign

2a |

2b

712

2c

3

4

5

6

7

1a

1b

2

За 3h

4

5

organizations check here 

and do not complete this part.)

Tax on investment income for 2019 from Part VI, line 5. . . . . .

Income tax for 2019. (This does not include the tax from Part VI.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

the section 4940(e) reduction of tax in those years.

Distributable amount before adjustments. Subtract line 2c from line 1. . . . . . . . . . . . . . . .

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . . . . . . . . .

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

income. Enter 1% of Part I, line 27b. See instructions.

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

117,856

Form **990-PF** (2019)

Page 9

Form 990-PF (2	019)
Part XIII	Und

orm 990-PF (20	019)
Part XIII	Undistributed Income (see instructions)

a From 2014. . . . .

**b** From 2015. . . . . c From 2016. . .

d From 2017. . . . .

e From 2018. . . . .

1 Distributable amount for 2019 from Part XI, line 7

f Total of lines 3a through e. . . . . . . .

**d** Applied to 2019 distributable amount. . . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a).)

**5** Excess distributions carryover applied to 2019. (If an amount appears in column (d), the

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a . . . .

9 Excess distributions carryover to 2020.

10 Analysis of line 9: a Excess from 2015. . .

**b** Excess from 2016. .

c Excess from 2017. . . .

d Excess from 2018. . .

e Excess from 2019. . .

6 Enter the net total of each column as

**b** Prior years' undistributed income. Subtract 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. . . . . . **d** Subtract line 6c from line 6b. Taxable amount —see instructions . . . . . . . . . . . . . . . . e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . . . . . f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 . . . . . . 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) . . . . . . . . . 8 Excess distributions carryover from 2014 not

indicated below:

4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ a Applied to 2018, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election required—see instructions). . . . . . . . . .

2 Undistributed income, if any, as of the end of 2019: a Enter amount for 2018 only. . . . . . Excess distributions carryover, if any, to 2019:

> 339.016 182,229

419 038

366.462 269,313

182,229 419,038

366.462

269.313

276.696

1.576.058

276.696

1,852,754

339.016

1,513,738

(b)

Years prior to 2018

(c)

2018

(a)

Corpus

- - **b** The form in which applications should be submitted and information and materials they should include:
  - c Any submission deadlines:
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

387,488

Form **990-PF** (2019)

See Additional Data Table

**b** Approved for future payment

Part XVI-A Analysis of Income-Producing					(e)
nter gross amounts unless otherwise indicated.		usiness income	Excluded by section	1 512, 513, or 514	Related or exempt
1 Program service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions.)
a b					
c					
d					
e					
fg Fees and contracts from government agencies					
2 Membership dues and assessments					
Interest on savings and temporary cash investments			14	10,563	
4 Dividends and interest from securities 5 Net rental income or (loss) from real estate:			01	32,089	
a Debt-financed property					
<b>b</b> Not debt-financed property					
Net rental income or (loss) from personal property			01		
7 Other investment income			01		
inventory			18		
Net income or (loss) from special events:					
Gross profit or (loss) from sales of inventory					
Other revenue: a     b					
c					
d					
e					
e 2 Subtotal. Add columns (b), (d), and (e)		0		42,652	
e				42,652 <b>3</b>	
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 calc Part XVI-B Relationship of Activities to t	ulations.) <b>he Accomplis</b> l	hment of Exem	pt Purposes	3	
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 calce art XVI-B Relationship of Activities to to the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foundation the foundation the foundation the foundation's explain the foundation the	ulations.) <b>he Accomplis</b> n income is report	hment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	
2 Subtotal. Add columns (b), (d), and (e).  3 Total. Add line 12, columns (b), (d), and (e).  3 Columns (b), (d), and (e).  4 Columns (b), (d), and (e).  5 Columns (b), (d), and (e).  6 Columns (b), (d), and (e).  7 Columns (b), (d), and (e).  7 Columns (b), (d), and (e).  8	ulations.) <b>he Accomplis</b> n income is report	hment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	
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 calce art XVI-B Relationship of Activities to to the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foundation the foundation the foundation the foundation's explain the foundation the	ulations.) <b>he Accomplis</b> n income is report	hment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	
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 calcatt XVI-B Relationship of Activities to the accomplishment of the foundation's expressions.	ulations.) <b>he Accomplis</b> n income is report	hment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcant XVI-B  Relationship of Activities to t  Explain below how each activity for which the accomplishment of the foundation's explain below to the foundation's explain below to the accomplishment of the foundation's explain the foundation the foundation the foundation the foundation's explain the foundation th	ulations.) <b>he Accomplis</b> n income is report	hment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcant XVI-B  Relationship of Activities to t  Explain below how each activity for which the accomplishment of the foundation's explain below to the foundation's explain below to the accomplishment of the foundation's explain the foundation the foundation the foundation the foundation's explain the foundation th	ulations.) <b>he Accomplis</b> n income is report	hment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcant XVI-B  Relationship of Activities to t  Explain below how each activity for which the accomplishment of the foundation's explain below to the foundation's explain below to the accomplishment of the foundation's explain the foundation the foundation the foundation the foundation's explain the foundation th	ulations.) <b>he Accomplis</b> n income is report	hment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcant XVI-B  Relationship of Activities to t  Explain below how each activity for which the accomplishment of the foundation's explain below to the foundation's explain below to the accomplishment of the foundation's explain the foundation the foundation the foundation the foundation's explain the foundation th	ulations.) <b>he Accomplis</b> n income is report	hment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	
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 calcatt XVI-B Relationship of Activities to the accomplishment of the foundation's expressions.	ulations.) <b>he Accomplis</b> n income is report	hment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	
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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 calcatt XVI-B Relationship of Activities to the accomplishment of the foundation's expressions.	ulations.) <b>he Accomplis</b> n income is report	hment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcant XVI-B  Relationship of Activities to t  Explain below how each activity for which the accomplishment of the foundation's explain below to the foundation's explain below to the accomplishment of the foundation's explain the foundation the foundation the foundation the foundation's explain the foundation th	ulations.) <b>he Accomplis</b> n income is report	hment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	
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 calcatt XVI-B Relationship of Activities to the accomplishment of the foundation's expressions.	ulations.) <b>he Accomplis</b> n income is report	hment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	
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 calcatt XVI-B Relationship of Activities to the accomplishment of the foundation's expressions.	ulations.) <b>he Accomplis</b> n income is report	hment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcant XVI-B  Relationship of Activities to t  Explain below how each activity for which the accomplishment of the foundation's explain below to the foundation's explain below to the accomplishment of the foundation's explain the foundation the foundation the foundation the foundation's explain the foundation th	ulations.) <b>he Accomplis</b> n income is report	hment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	
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 calcatt XVI-B Relationship of Activities to the accomplishment of the foundation's expressions.	ulations.) <b>he Accomplis</b> n income is report	hment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	
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 calcatt XVI-B Relationship of Activities to the accomplishment of the foundation's expressions.	ulations.) <b>he Accomplis</b> n income is report	hment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcatt XVI-B  Relationship of Activities to t  Explain below how each activity for which the accomplishment of the foundation's explain below to the foundation's explain belo	ulations.) <b>he Accomplis</b> n income is report	hment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	
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 calcatt XVI-B Relationship of Activities to the accomplishment of the foundation's expressions.	ulations.) <b>he Accomplis</b> n income is report	hment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	
Subtotal. Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calcart XVI-B  Relationship of Activities to t  Explain below how each activity for which the accomplishment of the foundation's expressions.	ulations.) <b>he Accomplis</b> n income is report	hment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	
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 calce art XVI-B Relationship of Activities to to the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foundation the foundation the foundation the foundation's explain the foundation the	ulations.) <b>he Accomplis</b> n income is report	hment of Exem	pt Purposes  f Part XVI-A contribu	3ited importantly to	42,652

Fo	rm 990-P	F (2019)				Pa	ge <b>13</b>
	art XV	Information Re Exempt Organi		ions and Relationships With Nonchari	table		
1			directly engage in any of the following with a organizations) or in section 527, relating to	any other organization described in section 501 political organizations?		Yes	No
a	Transfer	s from the reporting foun	dation to a noncharitable exempt organization	on of:			
	(1) Ca:	sh			1a(1)		No
					1a(2)		No
Ŀ	Other tr	ansactions:					
	<b>(1)</b> Sal	es of assets to a nonchar	itable exempt organization		1b(1)		No
	(2) Pur	chases of assets from a r	noncharitable exempt organization		1b(2)		No
	( <b>3</b> ) Re	ntal of facilities, equipmer	nt, or other assets		1b(3)		No
	<b>(4)</b> Rei	mbursement arrangemen	ts		1b(4)		No
	<b>(5)</b> Loa	ans or loan guarantees.			1b(5)		No
	<b>(6)</b> Perf	ormance of services or m	embership or fundraising solicitations		1b(6)		No
c	Sharing	of facilities, equipment, n	nailing lists, other assets, or paid employees		1c		No
c	of the g	oods, other assets, or ser	vices given by the reporting foundation. If th	Column (b) should always show the fair market one foundation received less than fair market values the goods, other assets, or services received.			
(a	) Line No.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sha	ıring arra	ngemer	its
_							
_							
_							
_							
_							
_							
			ļ	<b>!</b>			

2a Is the fo	oundation directly or indire	ectly affiliated with	, or related to, one or mo	e tax-exem	pt organizations			
describe	described in section 501(c) (other than section 501(c)(3)) or in section 527?							
<b>b</b> If "Yes,"	<b>b</b> If "Yes," complete the following schedule.							
	(a) Name of organization	on	(b) Type of organiza	ation	(c) Description of relationship			

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Sign May the IRS discuss this 2021-09-07 return Here with the preparer shown Signature of officer or trustee Title Date (see instr.) 🗹 Yes 🗆 No Print/Type preparer's name Preparer's Signature Date PTIN Check if self-P00177656 employed ▶ 🔲 **ROXANNE LAINE** Paid **Preparer** Firm's name ▶ PRICEWATERHOUSECOOPERS LLP Firm's EIN ►13-4008324 **Use Only** Firm's address ▶ 488 ALMADEN BOULEVARD SUITE 1800 Phone no. (408) 817-3700 SAN JOSE, CA 95110

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation RICHARD MOLEY PRESIDENT 5.00 PO BOX 4316 CARMEL, CA 93921 SUSAN FRANCES MOLEY SECRETARY 20.00 812 6TH STREET

ELIZABETH MOLEY	VICE PRESIDENT 0.00	0	0	(
PO BOX 4316 CARMEL, CA 93921				
ANDREW MOLEY	TREASURER	0	0	C
1930 BRYANT STREET PALO ALTO, CA 94301	1 40.00			

BOARD MEMBER

BOARD MEMBER

0.00

0.00

MANHATTAN BEACH, CA 90266

46 WEST 70TH STREET APARTMENT 1

PETER MOLEY

PO BOX 4237 CARMEL, CA 93921

NEW YORK, NY 10023 JOANNA MOLEY STORK

Recipient If recipient is an individual, show any relationship to status of contribution status of contribution status of contribution

recipient

■ 3a

387,488

any foundation manager

Name and address (home or business)

2115 WISCONSIN AVE NW SUITE 500

WASHINGSTON, DC 20007

Total.

·	or substantial contributor			
a Paid during the year				
BETHLEHEM UNIVERSITYPO BOX 355 BELTSVILLE, MD 20704	NONE	501(C)(3)	GENERAL USE	50,000
GEORGETOWN UNIVERSITY	NONE	501(C)(3)	GENERAL USE	337,488

efile GRAPHIC print - DO NOT PRO	CESS As Filed D	ata -	- DLN: 93491258010021						
TY 2019 Accounting Fees Schedule									
_									
Name: THE MOLEY FAMILY FOUNDATION EIN: 77-0528059									
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes					
PWC TAX PREP FEES	14,000	7,000	0	7,000					

As Filed Data -

Name: THE MOLEY FAMILY FOUNDATION

DOMESTIC EQUITIES

Other Assets Schedule

Description

**EIN:** 77-0528059

Value

805,596

End of Year - Fair Market Value

805,596

DLN: 93491258010021

Beginning of Year -End of Year - Book

**Book Value** 

1,066,124

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491258010021				
TY 2019 Other Decreases Schedule							
Name:	THE MOLEY FA	AMILY FOUNDATION					
EIN:	77-0528059						
De	Amount						
OTHER INCREASES			1				
CHANGE IN BASIS			260,527				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	- DLN: 93491258010021							
TY 2019 Other Expenses Schedule									
Name: THE MOLEY FAMILY FOUNDATION									
EIN:	77-0528059								
Other Expenses Schedule									
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes					
BANK CHARGES	42	21	0	21					
FEE TO ATTORNEY GENERAL	75	37	0	38					

10

FTB FEES

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

Name: THE MOLEY FAMILY FOUNDATION

FEDERAL REFUND

**EIN:** 77-0528059

Other Income Schedule

18,533

Net Investment Income

DLN: 93491258010021

Description

Revenue And **Expenses Per Books** 

Adjusted Net Income

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	- DLN: 93491258010021							
TY 2019 Taxes Schedule									
Name: THE MOLEY FAMILY FOUNDATION									
EIN	: 77-0528059								
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes					
IRS ESTIMATED TAX PAYMENT	9,000	0	0	0					



The Moley Family Foundation Attention: Mr. Andrew Moley 1930 Bryant Street Palo Alto, CA 94301

Dear Mr. Moley:

PricewaterhouseCoopers LLP ("we" or "us" or "PwC") has prepared your 2019 income tax return(s)/filing(s), pursuant to our Engagement Letter, as follows:

Form 990-PF Return of Private Foundation California Form 199 and RRF-1

The individual(s) signing these return(s)/filing(s) are ultimately responsible for their correctness. Please carefully review the return(s)/filing(s) and satisfy yourself that so far as you are aware, all tax entries and elections are complete and correct and all questions are answered appropriately. After your review, the return(s)/filing(s) should be filed in accordance with the instructions provided.

Please retain a copy of the return(s)/filing(s) for your records.

Your tax return(s)/filing(s) were prepared from information, including representations, documents, facts and assumptions, provided by you without independent verification by us.

The positions reached in these tax return(s)/filing(s) represent and are based upon our best judgment regarding the application of federal or state income tax laws arising under the Internal Revenue Code, judicial decisions, administrative regulations, published rulings and other tax authorities existing as of the date of these return(s)/filing(s). The positions taken on the return(s)/filing(s) are not binding upon the Internal Revenue Service or the courts and there is no guarantee that the Internal Revenue Service will not successfully assert a contrary position. Changes in the law and regulations or its interpretation may take place prior to you filing the enclosed return(s)/filing(s) are outside the scope of our engagement.

Please be advised that, at your direction, we have marked the box on your federal tax return/filing allowing the IRS to discuss your 2019 tax return/filing with the preparer who signed it. This authority allows us to resolve issues related to you tax return/filing without having to file a power of attorney and the authority automatically expires no later than the original due date of your 2020 tax return/filing. Please contact us if you do not wish to consent to this election.

Please be advised that charitable contributions of \$250 or more must be substantiated by contemporaneous written acknowledgement from the donee organization. Generally the acknowledgement must include the amount of cash and a description of non-cash contributions. You should retain documentation supporting the charitable contributions in the event of an IRS audit.

\* \* \* \* \*

We sincerely appreciate this of	pportunity to serve you	. Please contact us	s if you have any	questions or if we
may be of further assistance.				

Sincerely,

Roxanne Laine Enclosures

# TAX RETURN FILING INSTRUCTIONS

FORM 990-PF

#### FOR THE YEAR ENDING

October 31, 2020

## Prepared For:

The Moley Family Foundation 1930 Bryant Street Palo Alto, CA 94301

## Prepared By:

PricewaterhouseCoopers LLP 488 Almaden Boulevard, Suite 1800 San Jose, CA 95110

#### **Amount Due or Refund:**

An overpayment of \$14,055. The entire overpayment has been applied to the estimated tax payments.

## Make Check Payable To:

No amount is due.

# Mail Tax Return and Check (if applicable) To:

Department of the Treasury Internal Revenue Service Center Ogden, UT 84201-0027

#### Return Must be Mailed On or Before:

September 15, 2021

#### **Special Instructions:**

The return should be signed and dated.

Please note that the Form 990-PF return contains excess distribution carryover of \$1,513,738. This may be applied to tax year 2020 and subsequent years.

# EXTENDED TO SEPTEMBER 15, 2021 Return of Private Foundation

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

OMB No. 1545-0047

Form **990-PF** 

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990PF for instructions and the latest information. NOV 1 2019 For calendar year 2010 or tay year heginning

For	calen	dar year 2019 or tax year beginning NOV	1, 2019	, and ending	OCT 31, 2020	
Nai	ne of	foundation			A Employer identification	number
		MOLEY FAMILY FOUNDATION			77-0528059	
		nd street (or P.O. box number if mail is not delivered to street a	ddress)	Room/suite	B Telephone number	2.2
		0 BRYANT STREET			650-561-07	
		own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is pe	ending, check here
		O ALTO, CA 94301			- - -	. ahaali hawa
Gil	леск	all that apply: Initial return		ormer public charity	D 1. Foreign organizations	s, cneck nere
		Final return Address change	Amended return  Name change		Foreign organizations me check here and attach co	eting the 85% test,
н (	hack	type of organization: X Section 501(c)(3) ex	X			
			Other taxable private founda	ition	E If private foundation sta under section 507(b)(1)	
ـــــــــــــــــــــــــــــــــــــ		arket value of all assets at end of year J Accounting		Accrual	F If the foundation is in a	
			her (specify)		under section 507(b)(1)	
	\$	2,130,432. (Part I, colun		is.)		
Pa	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				
	2	Check X if the foundation is not required to attach Sch. B Interest on savings and temporary	40 = 20	10 = 22		AT 100 12 100 100 100 100 100 100 100 100
	3	cash investments	10,563.	10,563.		STATEMENT 1
	4	Dividends and interest from securities	32,089.	32,089.		STATEMENT 2
	ı	Gross rents				
	١.	Net rental income or (loss)				
e	oa b	Net gain or (loss) from sale of assets not on line 10  Gross sales price for all				
Revenue	b   7	assets on line 6a Capital gain net income (from Part IV, line 2)		0.		
Be	8	Net short-term capital gain		0.		
	9	Income modifications				
		Gross sales less returns and allowances				
		Less: Cost of goods sold				
	ı	Gross profit or (loss)				
	11	Other income	18,533.	0.	0.	STATEMENT 3
	12	Total. Add lines 1 through 11	61,185.	42,652.	0.	
	13	Compensation of officers, directors, trustees, etc.	0.	0.	0.	0.
	14	Other employee salaries and wages				
	ı	Pension plans, employee benefits				
ses	16a	Legal fees	14 000	7 000		7 000
pen	b	Accounting fees STMT 4	14,000.	7,000.	0.	7,000.
Щ	C   17	Other professional fees				
Administrative Expenses	18	Interest Taxes STMT 5	9,000.	0.	0.	0.
stra	19	Depreciation and depletion	3,000			
ä	20	Occupancy				
Adn	21	Travel, conferences, and meetings				
and		Printing and publications				
g	23	Other expenses STMT 6	127.	63.	0.	64.
atin	23 24 25	Total operating and administrative				
ber		expenses. Add lines 13 through 23	23,127.	7,063.	0.	7,064.
0		Contributions, gifts, grants paid	387,488.			387,488.
	26	Total expenses and disbursements.	410 615	m 0.00		204 550
	-	Add lines 24 and 25	410,615.	7,063.	0.	394,552.
	l	Subtract line 26 from line 12:	_3/0 /30			
	ı	Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)	-349,430.	35,589.		
	ı	Adjusted net income (if negative, enter -0-)		33,303.	0.	
		riajuotou not moonio (ii nogativo, cittor o /	ı		,	I

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2019)

P	art	Balance Sheets Attached schedules and amounts in the description	beginning of year	End of y	
<u> </u>		column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	91,814.	51,198.	<u>51,198.</u>
	2	Savings and temporary cash investments	1,582,452.	1,273,638.	1,273,638.
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	l .	Receivables due from officers, directors, trustees, and other			<del></del>
	•	disqualified persons			
	7	Other notes and loans receivable			
	<i>'</i>	Less: allowance for doubtful accounts			
	8				
Assets		Inventories for sale or use Prepaid expenses and deferred charges			
Ass		Investments - U.S. and state government obligations			
•	ı				
		Investments - corporate stock			
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment: basis			
		Less: accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis			
		Less: accumulated depreciation			
	l .	Other assets (describe DOMESTIC EQUITIES )	1,066,124.	805,596.	805,596.
	16	Total assets (to be completed by all filers - see the			
_		instructions. Also, see page 1, item I)	2,740,390.	2,130,432.	2,130,432.
		Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable			
	22	Other liabilities (describe )			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow FASB ASC 958, check here			
Ś		and complete lines 24, 25, 29, and 30.			
uce	24	Net assets without donor restrictions			
ala	25	Net assets with donor restrictions			
d B		Foundations that do not follow FASB ASC 958, check here 🕨 🛚 🗶			
Fund Bala		and complete lines 26 through 30.			
è	26	Capital stock, trust principal, or current funds	2,740,390.	2,130,432.	
	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	_
Net Assets	28	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
Ä	29	Total net assets or fund balances	2,740,390.	2,130,432.	
ž					
	30	Total liabilities and net assets/fund balances	2,740,390.	2,130,432.	
Р	art				
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 2	<u> </u>		
				1	2 740 390
					2,740,390. -349,430.
					0.
		ines 1, 2, and 3			2,390,960.
		eases not included in line 2 (itemize)	SEE STA		260,528.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu		6	2,130,432.
<u> </u>	, o iui	The access of famo balances at one of your filled a filling of the fill, our	107, 1110 60		Form <b>990-PF</b> (2019)

		Y FAMILY FOUNDAT			77-	0528059	Page 3
<u> </u>		ses for Tax on Investme	••••••	(h) How acquired		I	
		of property sold (for example, real common stock, 200 shs. MLC Co.		(b) How acquired P - Purchase	(c) Date acqu (mo., day, y		te sold lay, yr.)
1a			/	D - Donation	( , 3,3	<del></del>	
	ONE						
C							
d							
е							
(e) Gross sales price			Cost or other basis lus expense of sale		<b>(h)</b> Gain o ((e) plus (f) r		
a							
b							
<u>C</u>							
d							
Complete only for accets above		June /b) and arread by the former	tion on 10/01/00				
Complete only for assets snow		olumn (h) and owned by the founda	•••••••••••		(I) Gains (Col. (h ol. (k), but not le		
(i) FMV as of 12/31/69			() Excess of col. (i) over col. (j), if any		Losses (fron	1 col. (h))	
<u>a</u>							
<u>b</u>							
<u>C</u>							
<u>d</u>							<i></i>
Е				7   1			
2 Capital gain net income or (net o	capital loss)	If gain, also enter in Part I, If (loss), enter -0- in Part I,	line 7	. } 2			
3 Net short-term capital gain or (le							
If gain, also enter in Part I, line 8				<b>)</b>			
If (loss), enter -0- in Part I, line  Part V   Qualification	Jnder Se	ction 4940(e) for Reduc	ed Tax on Net	. /   ₃   Investment Inc	ome		
(For optional use by domestic priva							
(i or optional acc by democile priva	to roundation	o outspool to the southern to ro(u) tu	CONTINUE INVOCATIONE III	001110.7			
If section 4940(d)(2) applies, leave	this part blar	ık.					
Was the foundation liable for the se	ction 4942 ta	x on the distributable amount of ar	y year in the base per	iod?		Yes	X No
If "Yes," the foundation doesn't qual	lify under sec	tion 4940(e). Do not complete this	part.				
1 Enter the appropriate amount in	ı each columi	n for each year; see the instructions	before making any e	ntries.			
(a) Base period years		(b)		(c)		(d) Distribution ratio	
Calendar year (or tax year beginn	ning in)	Adjusted qualifying distributions		oncharitable-use asset	.s (col.	(b) divided by col	. (C))
2018		394,183		2,782,05			41688
2017		503,022 419,038	2 •	2,893,46			73847
2016		182,229	<u> </u>	2,102,44 1,277,34	0.		$\frac{99310}{42662}$
2015		394,500		1,319,85			<u>42002</u> 98897
2014		334,300	J •	1,319,63	<del>}  </del>	• 4	<u> </u>
2. Total of line 1. column (d)					2	9	56404
<ul><li>2 Total of line 1, column (d)</li><li>3 Average distribution ratio for the</li></ul>	5-vear hase	period - divide the total on line 2 h	v 5.0. or by the numb	er of vears	·-		30101
<u> </u>	-	nan 5 years		*	3	.1	91281
are rearranted that been in exist		ian o youro ,			-   -		
4 Enter the net value of noncharita	able-use asse	ts for 2019 from Part X, line 5			4	2,371	,365.
						······································	
5 Multiply line 4 by line 3					. 5	453	,597.
6 Enter 1% of net investment inco	me (1% of P	art I, line 27b)			6		356.
7 Add lines 5 and 6			•••••		. 7	453	<u>,953.</u>
8 Enter qualifying distributions from	om Part XII. li	ne 4			8	394	,552.
		ck the box in Part VI, line 1b, and c			·· L		
See the Part VI instructions.	an inte 7, cite	ck the box in rait vi, line ib, and c	omplete that part usir	iy a 170 lax raic.			

Part VI Excise Tax Based on Investment Income (Section 494	40(a), 4940(b), 4940(e),	or 49	48 - see	instruc	ction	s)
1a Exempt operating foundations described in section 4940(d)(2), check here and	l enter "N/A" on line 1.	) T				
Date of ruling or determination letter: (attach copy of letter if n						
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V, check here		<b>)</b>	1		7	12.
of Part I, line 27b		l				
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter	4% of Part I, line 12, col. (b)	J				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only;	others, enter -0-)		2			0.
3 Add lines 1 and 2			3		7	12.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only;	others, enter -0-)		4		•	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5		7	12.
6 Credits/Payments:		Γ				
a 2019 estimated tax payments and 2018 overpayment credited to 2019	6a   14,7	767.				
<b>b</b> Exempt foreign organizations - tax withheld at source		0.				
c Tax paid with application for extension of time to file (Form 8868)		0.				
d Backup withholding erroneously withheld		0.				
7 Total credits and payments. Add lines 6a through 6d			7	1	4,7	<u>67.</u>
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is a	ttached	····· [	8		•	0.
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	1	4,0	55.
11 Enter the amount of line 10 to be: Credited to 2020 estimated tax			11		·············	0.
Part VII-A Statements Regarding Activities	, , , , , , , , , , , , , , , , , , , ,		,			
1a During the tax year, did the foundation attempt to influence any national, state, or local leg	islation or did it participate or in	itervene i	n		Yes	No
any political campaign?				1a		X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purp	ooses? See the instructions for t	he definit	ion	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies						
distributed by the foundation in connection with the activities.	,					
c Did the foundation file Form 1120-POL for this year?				1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the						
(1) On the foundation. ▶ \$ 0 . (2) On foundation manage		0.				
e Enter the reimbursement (if any) paid by the foundation during the year for political expen		***************************************				
managers. ► \$0 .						
2 Has the foundation engaged in any activities that have not previously been reported to the	IRS?			2		Х
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	n instrument, articles of incorpor	ation, or				
	,			3		Х
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year.					ļ	X
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?				4b		<b></b>
5 Was there a liquidation, termination, dissolution, or substantial contraction during the yea						X
If "Yes," attach the statement required by General Instruction T.						
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	either:					
By language in the governing instrument, or						
By state legislation that effectively amends the governing instrument so that no mandation	ory directions that conflict with t	he state I	aw			
remain in the governing instrument?	•			6		Х
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," con	nplete Part II, col, (c), and Part >	(V		7	Х	<b></b>
	, ( )/					
8a Enter the states to which the foundation reports or with which it is registered. See instruct	tions.					
CA	***************************************		***************************************	-		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attorney General (or designate)		***************************************	-		
of each state as required by General Instruction G? If "No," attach explanation				8b	х	
9 Is the foundation claiming status as a private operating foundation within the meaning of						
year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," co				9	1	х
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a sche					l .	Х
				Form <b>99</b> 0	)-PF	(2019)

Pč	art vii-A Statements Regarding Activities (continued)	<del>,</del>		
			Yes	No
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 privileges?			
	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 ► HTTP://AG.CA.GOV/CHARITIES			
14	The books are in care of ► ANDREW MOLEY  Telephone no. ► 650-56		<u>733</u>	
	Located at ► 1930 BRYANT STREET, PALO ALTO, CA ZIP+4 ► 94			
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	N	/A	
16	At any time during calendar year 2019, 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>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
D	foreign country			
Pč	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required		V	NI -
	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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(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 X 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)?  Yes X 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 X No			
Ę	of fany answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
	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			
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			х
	before the first day of the tax year beginning in 2019?  Taxas as follows to distribute income (costing 4043) (does not easily favours the foundation was a private easysting foundation.	1c		
2	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 2019, did the foundation have any undistributed income (Part XIII, lines			
•	6d and 6e) for tax year(s) beginning before 2019?  Yes X No			
	If "Yes," list the years —			
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.)  N/A	2b		
,	of the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
Ì	•			
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
•	during the year?			
ŀ	of "Yes," did it have excess business holdings in 2019 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 Form 4720,			
	Schedule C, to determine if the foundation had excess business holdings in 2019.)  N/A	3b		
42	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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 tax year beginning in 2019?	4b		Х
		rm <b>990</b>	)-PF	(2019)

Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	equired <sub>(contine</sub>	ued)			
5a During the year, did the foundation pay or incur any amount to:				Y	'es	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	s X No			
(2) Influence the outcome of any specific public election (see section 4955); or						
any voter registration drive?		Ye	s X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No			
(4) Provide a grant to an organization other than a charitable, etc., organization						
4945(d)(4)(A)? See instructions		Ye	s X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary,						
the prevention of cruelty to children or animals?		Ye	s X No			
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify unc						
section 53.4945 or in a current notice regarding disaster assistance? See instru			N/A	5b		
Organizations relying on a current notice regarding disaster assistance, check h						
c If the answer is "Yes" to guestion 5a(4), does the foundation claim exemption fr						
expenditure responsibility for the grant?			s No			
If "Yes," attach the statement required by Regulations section 53.4945-5(d).		······································				
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to p	nav premiums on					
a personal benefit contract?	• •	□ γ <sub>e</sub>	s X No			
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a positive state of the foundation.	ersonal henefit contract?			6b		Х
If "Yes" to 6b, file Form 8870.	orsonar bonont contract:					
7a At any time during the tax year, was the foundation a party to a prohibited tax si	helter transaction2	□ v <sub>e</sub>	s X No			
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$				70		
, - , ,		r	s X No			
Part VIII Information About Officers, Directors, Truste			5 21 NU			
Paid Employees, and Contractors	,cs, i candation mai	lagers, riigin <b>y</b>				
1 List all officers, directors, trustees, and foundation managers and the	eir compensation.					
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e	) Ехре	
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	acci	ount, Iowan	other ices
	to pootion	Citter 0 7	compensation		10 17 41	
SEE STATEMENT 8		0.	0.			0.
		<u> </u>				
			••••••			***************************************
2 Compensation of five highest-paid employees (other than those incl	uded on line 1) If none	enter "NONE "		<u> </u>		
2 Compensation of the highest-part employees (other than those incl	(b) Title, and average	Titel NOIL.	(d) Contributions to	le le	) Expe	anse
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	acc	ount,	other
NONE	devoted to position		compensation	aı aı	lowan	ices
NONE						
						••••••
				1		
				<del> </del>		
						••••••
				1		
			<u></u>			
Total number of other employees paid over \$50,000						0

► 0 Form **990-PF** (2019)

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	IONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	<u> </u>	
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	Il information such as the	Expenses
1 N/A		
1		
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	es 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
The Land Constitution of About the Co		0.
Total. Add lines 1 through 3	<b>P</b>	

Form **990-PF** (2019)

Page 8

P	art X Minimum Investment Return (All domestic foundations mu	st complete this par	t. Foreign foun	dations, se	e instructions.)
1	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			1a	983,124.
	Average of monthly cash balances			1b	1,424,353.
	Fair market value of all other assets			1c	
	Total (add lines 1a, b, and c)			1d	2,407,477.
е	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	2,407,477.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, s	ee instructions)		4	36,112.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on l			5	2,371,365.
6	Minimum investment return. Enter 5% of line 5			6	118,568.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and			d certain	
	foreign organizations, check here  and do not complete this part.)				
1	Minimum investment return from Part X, line 6			1	118,568.
2a	Tax on investment income for 2019 from Part VI, line 5	2a	712.		
b	Income tax for 2019. (This does not include the tax from Part VI.)				
C	Add lines 2a and 2b			2c	712.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	117,856.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	117,856.
6	Deduction from distributable amount (see instructions)			6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1			7	117,856.
P	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpo	ses:			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		,,,,,,,,,,,	1a	39 <b>4</b> ,552.
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:				
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	394,552.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investi				
	income. Enter 1% of Part I, line 27b			5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	394,552.
	Note: The amount on line 6 will be used in Part V. column (b), in subsequent years who			ualifies for th	ne section

Form **990-PF** (2019)

4940(e) reduction of tax in those years.

# Part XIII Undistributed Income (see instructions)

	· · · · · · · · · · · · · · · · · · ·			
	(a) Corpus	(b) Years prior to 2018	(c) 2018	<b>(d)</b> 2019
1 Distributable amount for 2019 from Part XI,	·			
line 7				117,856.
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only			0.	
<b>b</b> Total for prior years:				
,		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014 339,016.				
b From 2015 182, 229.				
c From 2016 419,038.				
d From 2017 366, 462.				
e From 2018 269,313.	1 576 050			
f Total of lines 3a through e	1,576,058.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: ► \$ 394,552.			0.	
a Applied to 2018, but not more than line 2a			U •	
<b>b</b> Applied to undistributed income of prior		0.		
years (Election required - see instructions) <b>c</b> Treated as distributions out of corpus		U •		
(Floation required and instructions)	0.			
d Applied to 0040 distributelle approved	· ·			117,856.
e Remaining amount distributed out of corpus	276,696.			117,030.
5 Excess distributions carryover applied to 2019	270,0301			
(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:	4 050 554			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,852,754.			
<b>b</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.		
<b>d</b> Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line			_	
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				0
be distributed in 2020				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)	V •			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7	339,016.			
9 Excess distributions carryover to 2020.	333,010.			
Subtract lines 7 and 8 from line 6a	1,513,738.			
10 Analysis of line 9:	_, , , , , , , , , , , , , , , , , , ,			
<b>a</b> Excess from 2015 182,229.				
<b>b</b> Excess from 2016 419,038.				
c Excess from 2017 366, 462.				
d Excess from 2018 269,313.				
e Excess from 2019 276,696.				
923581 12-17-19				Form <b>990-PF</b> (2019)

923581 12-17-19

Form **990-PF** (2019)

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Supplementary information				
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment 		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
BETHLEHEM UNIVERSITY 12650 RIVERSIDE DRIVE NORTH HOLLYWOOD 91607	NONE	501(C)(3)	GENERAL USE	50,000.
GEORGETOWN UNIVERSITY P.O. BOX 14152 JERUSALEM, ISRAEL 91143	NONE	501(C)(3)	GENERAL USE	337,488.
Total			▶ 3a	387,488.
<b>b</b> Approved for future payment				
NONE				
Total			<b>&gt;</b> 3b	0. Form <b>990-PF</b> (2019)
				Form <b>990-PF</b> (2019)

Page 12

# Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income		Exclu	ded by section 512, 513, or 514	(e)	
Enter gross amounts amoss otherwise maleuted.	(a)	(b)	(c) Exclu-	(d)	Related or exempt	
1 Program service revenue:	Business code	Amount	sion	Amount	function income	
·	Couc					
a						
b						
C	***************************************	***************************************				
e	***************************************		<b></b>			
f	***************************************		<del> </del>			
g Fees and contracts from government agencies	***************************************	•				
2 Membership dues and assessments	***************************************		<del></del>			
3 Interest on savings and temporary cash	***************************************					
investments			14	10,563.		
4 Dividends and interest from securities			01	10,563. 32,089.		
5 Net rental income or (loss) from real estate:						
a Debt-financed property						
<b>b</b> Not debt-financed property						
6 Net rental income or (loss) from personal						
property						
7 Other investment income			01			
8 Gain or (loss) from sales of assets other						
than inventory			18			
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:						
a		***************************************				
b		***************************************				
c		***************************************				
d		***************************************				
e				10.45		
12 Subtotal. Add columns (b), (d), and (e)		0.		42,652.		
<b>13 Total.</b> Add line 12, columns (b), (d), and (e)				13	42,652.	
(See worksheet in line 13 instructions to verify calculations.)						

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

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).

Form **990-PF** (2019)

Page 13

#### THE MOLEY FAMILY FOUNDATION Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations**

1	Did the o	organization directly or indir	rectly engage in any o	of the followin	n with any other organization	on described in sec	tion 501(c)		Yes	No
		nan section 501(c)(3) organi				,,, decombed iii ood	11011 00 1(0)			
а		s from the reporting founda	•	-						
-		:h		, ,	,			1a(1)		x
		er assets								Х
b		ansactions:	***************************************							
	(1) Sale	es of assets to a noncharitat	ble exempt organizati	ion				1b(1)		Х
		chases of assets from a nor								Х
(3) Rental of facilities, equipment, or other assets										X
		mbursement arrangements								X
	( <b>5</b> ) Loa	ns or loan guarantees						1b(5)		X
		formance of services or mei						41.403		X
C	Sharing	of facilities, equipment, mai	iling lists, other asset	ts, or paid em	ployees			1c		X
d	If the an	swer to any of the above is	"Yes," complete the f	ollowing sche	dule. Column (b) should al	ways show the fair	market value of the g	goods, other ass	ets,	
		ces given by the reporting fo			ed less than fair market valu	e in any transactio	n or sharing arranger	ment, show in		
		(d) the value of the goods, (		***************************************						
<u>(a)</u> ∟i	ne no.	(b) Amount involved	(c) Name of	***************************************	exempt organization	(d) Description	on of transfers, transactio	ns, and sharing arra	angemen	ıts
				N/A						••••••
										••••••
										•••••
***************************************										***************************************
***************************************										
			***************************************							
			•						•••••	
2a	Is the fo	undation directly or indirect	tly affiliated with, or r	elated to, one	or more tax-exempt organi	zations described				
		on 501(c) (other than section	•					Yes	X	No
b		complete the following sche						.,,,,,		
		(a) Name of org	anization		(b) Type of organization		(c) Description of re	elationship		
		N/A								
***************************************										
				***************************************						
	<u> </u>					<u> </u>				
0:-		er penalties of perjury, I declare to belief, it is true, correct, and com						May the IRS or return with the		
Sig He	n re				1			shown below	See ins	
		anoture of officer or tructor				TREAS	URER	X Yes	L	No
***************************************	51	gnature of officer or trustee		Drapareria e	Date	Title Date	Check if	PTIN		
		Print/Type preparer's na	iiie	Preparer's si	gnature	Date	self- employed	- 11110		
Pa	id	ROXANNE LA	TNE				3011 cmployed	P00177	656	
	.u eparer			ISECOO	PERS LID	<u> </u>	Firm's EIN ► 1			
	e Only	THE STATE OF THE					FIIII S EIN P I	2 -0003	<b>4</b>	
	•	Firm's address ► 488 ALMADEN BOULEVARD, SUITE 1800								
			N JOSE, C				Phone no. (4	08) 817	-37	00
Form 9										

#### Form **8868**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit

OMB No. 1545-0047

Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) Type or print THE MOLEY FAMILY FOUNDATION 77-0528059 File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your 1930 BRYANT STREET instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. PALO ALTO, CA 94301 Enter the Return Code for the return that this application is for (file a separate application for each return) 0 4 Application Return Application Return <u>ls F</u>or Code Is For Code Form 990-T (corporation) Form 990 or Form 990-EZ 01 07 Form 990-BL 02 Form 1041-A 80 Form 4720 (individual) Form 4720 (other than individual) 09 Form 990-PF 10 04 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) Form 6069 11 Form 8870 Form 990-T (trust other than above) 12 ANDREW MOLEY • The books are in the care of  $\blacktriangleright$  1930 BRYANT STREET - PALO ALTO, CA 94301 Telephone No. ► 650-561-0733 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box 🕨 🔲 . If it is for part of the group, check this box 🕨 🦳 and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until SEPTEMBER 15, 2021, to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year or ► X tax year beginning NOV 1, 2019 and ending OCT 31, 2020 Final return If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 712. any nonrefundable credits. See instructions If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 14,767. estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

923841 12-30-19

LHA

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2020)

	-					
FORM 990-PF INTER	EST ON SAVI	NGS AND T	EMPORAR	RY CASH	INVESTMENTS	STATEMENT 1
SOURCE		REV	(A) VENUE BOOKS		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
GOLDMAN SACHS		10,563	3.	10,563.	0	
TOTAL TO PART I, L		10,563	3.	10,563.	0	
FORM 990-PF	DIVIDEND	S AND INTE	EREST F	ROM SEC	URITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITA GAINS DIVIDEN	3	(A) REVENUE PER BOOK		
GOLDMAN SACHS	32,089	•	0.	32,08	9. 32,08	39. 0
TO PART I, LINE 4	32,089	•	0.	32,08	9. 32,08	39. 0
FORM 990-PF DESCRIPTION		OTHER	INCOME (A REVE PER B	A) ENUE	(B) NET INVEST- MENT INCOME	
FEDERAL REFUND		_		18,533.		0.
TOTAL TO FORM 990-1	PF, PART I,	LINE 11 =		18,533.		0. 0
FORM 990-PF		ACCOUNT	ING FE	EES		STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) INVEST-		
PWC TAX PREP FEES	<u></u>	14,000		7,000	•	0. 7,000
TO FORM 990-PF, PG	1, LN 16B	14,000	).	7,000	•	0. 7,000

FORM 990-PF	TAX	ES	STATEMENT 5			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES		
IRS ESTIMATED TAX PAYMENT	9,000.	0.	0.	0.		
TO FORM 990-PF, PG 1, LN 18	9,000.	0.	0.	0.		
FORM 990-PF	OTHER E	XPENSES	gr	PATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES		
BANK CHARGES FEE TO ATTORNEY GENERAL FTB FEES	42. 75. 10.	21. 37. 5.	0. 0. 0.	21. 38. 5.		
TO FORM 990-PF, PG 1, LN 23	127.	63.	0.	64.		

FORM 990-PF	OTHER	DECREASES	IN N	IET A	ASSETS	OR	FUND	BALANCES	STATEMENT	7
DESCRIPTION									AMOUNT	
OTHER INCREASES CHANGE IN BASIS	_								260,5	1. 527.
TOTAL TO FORM S	990-PF	, PART III	, LIN	IE 5					260,5	528.

	OF OFFICERS, DI	STATEMENT 8			
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT	
RICHARD MOLEY P.O. BOX 4316 CARMEL, CA 93921	PRESIDENT 5.00	0.	0.	0.	
ELIZABETH MOLEY P.O. BOX 4316 CARMEL, CA 93921	VICE PRESIDENT 0.00	0.	0.	0.	
ANDREW MOLEY 1930 BRYANT STREET PALO ALTO, CA 94301	TREASURER 40.00	0.	0.	0.	
SUSAN FRANCES MOLEY 812 6TH STREET MANHATTAN BEACH, CA 90266	SECRETARY 20.00	0.	0.	0.	
PETER MOLEY 46, WEST 70TH STREET APARTMENT 1 NEW YORK, NY 10023	BOARD MEMBER 0.00	0.	0.	0.	
JOANNA MOLEY STORK P.O. BOX 4237 CARMEL, CA 93921	BOARD MEMBER 0.00	0.	0.	0.	
TOTALS INCLUDED ON 990-PF, PAGE 6	– , PART VIII	0.	0.	0.	

### **TAX RETURN FILING INSTRUCTIONS**

CALIFORNIA FORM 199

#### FOR THE YEAR ENDING

October 31, 2020

Prepared F	or:		 	
	The Moley Family Foundation 1930 Bryant Street Palo Alto, CA 94301	on		
Prepared E	Ву:			
	PricewaterhouseCoopers LI 488 Almaden Boulevard, Su San Jose, CA 95110			
To be Sign	ed and Dated By:		 	
	The authorized individual(s)	).		
Amount of	Тах:			
	Total tax Less: payments and credits Plus: other amount Plus: interest and penalties Balance due	\$ \$ \$ \$	10 0 0 0 0	
Overpaymo	ent:			
	Credited to your estimated tax Other amount Refunded to you	\$ \$ \$	0 0 0	
Make Chec	ck Payable To:		 	
	Franchise Tax Board			
Mail Tax R	eturn and Check (if applicable)	) То:		
	Franchise Tax Board P.O. Box 942857 Sacramento, CA 94257-050	01		
Return Mu	st be Mailed On or Before:		 	
	September 15, 2021			
	structions:		 	

TAXABLE YEAR 2019

### California Exempt Organization Annual Information Return

928941 12-04-19 FORM

199

Са	lendar Year	2019 or fiscal year beginning (mm/dd/yyyy)	11/01/20	19 , and ending	(mm/dd/yyy	/y)	10,	/31/2020 .	
С	orporation/Or	ganization name			Cali	fornia corpo	ration nu	ımber	
_						~~1.04	0 = 4 /	•	
		LEY FAMILY FOUNDATION			FE	C2182	271(	<u> </u>	
А	aditional infor	mation. See instructions.				" <sup>"</sup> 77-05	5281	150	
S	treet address	(suite or room)			L	PMB no.	<u> </u>	<i>J J J</i>	
		RYANT STREET							
*******	ity		***************************************		State	ZIP code	***************************************		
P.	ALO A	LTO			CA	94301	1		
F	oreign country	name	Foreign province/state/cod	unty		Foreign po	stal cod	le	
_									
A	First Retu			If exempt under R&TC S			-	,	ı
В		I Return ●	Yes X No	engaged in political acti					
C		on 4947(a)(1) trust	Yes X No K	Is the organization exen					No
D	·	rmation Return?  Dissolved Surrendered (Withdrawn) M	lerged/Reorganized L	If "Yes," enter the gross If organization is a publ				***************************************	*********
		(mm/dd/yyyy)	erged/heorganized L.	Section 23701d and me	-	•			
Ε		counting method: (1) X Cash (2) Accrual	(3) Other	box. No filing fee is req	-			<b>,</b>	
F		eturn filed? (1) ●		Is the organization a Lir					No
	(4)	Other 990 series		Did the organization file	Form 100 d	r Form 10	)9 to		
G		group filing? See instructions		report taxable income?					No
Н		ganization in a group exemption	Yes X No 0	Is the organization unde	-			,	ı
	If "Yes," v	what is the parent's name?		IRS audited in a prior ye					No
	Did the o	rappization have any changes to its guidelines	P	Is federal Form 1023/10				Yes X	No
ı		rganization have any changes to its guidelines ted to the FTB? See instructions ●	Yes X No	Date filed with IRS		·····			
Ŧ		complete Part I unless not required to file this for		ation B and C.					
		1 Gross sales or receipts from other sources.	***************************************	***************************************		•	1	42,652	00
		2 Gross dues and assessments from member					2		00
	Receipts	Gross contributions, gifts, grants, and simi Total gross receipts for filing requirement test. Add This line must be completed. If the result is less tha	lar amounts received			•	3	0	100
	and						4	42,652	00
ı	Revenues	5 Cost of goods sold		• 5		00			
		6 Cost or other basis, and sales expenses of		***************************************		00	71		Too
		<ul><li>7 Total costs. Add line 5 and line 6</li><li>8 Total gross income. Subtract line 7 from line</li></ul>					7 8	42,652	00
		9 Total expenses and disbursements. From S	VI 0 D 1 II II 40			_ [	9	410,615	
1	Expenses	10 Excess of receipts over expenses and disbu				•	10	-367,963	
	***************************************						11		00
		12 Use tax. See General Information K				• [	12		00
		13 Payments balance. If line 11 is more than li					13		00
I	iling Fee	14 Use tax balance. If line 12 is more than line					14		00
		15 Filling fee \$10 or \$25. See General Informat				- 1	15	10	
		16 Penalties and Interest. See General Informa		11 from the regult			16	10	00
		17 Balance due. Add line 12, line 15, and line Under penalties of perjury, I declare that I have examined t it is true, correct, and complete. Declaration of preparer (of	his return, including accomp	anying schedules and statement	ents, and to the	e best of my	knowled	dge and belief,	100
	gn	it is true, correct, and complete. Declaration of preparer (or		itle	Date	Knowledge.	1	Telephone	
пе	ere	Signature of officer		REASURER					
				Date	Check	if		PTIN	
		Preparer's signature			self-en	nployed		P00177656	
	id	Firm's name						• Firm's FEIN	
	eparer's	(fr yours, ff self-		n= 1000				13-4008324  • Telephone	
Us	e Only	employed) 488 ALMADEN BOUL SAN JOSE, CA 951	•	LE 1800				(408) 817-37	0.0
		May the FTB discuss this return with the prepare	***************************************	tructions		• X		(408) 817-37	<u> </u>
_		, may and the discuss this return with the prepare	I SHOWIT ADDVE! JEE IIIS	uuuuuu		[_2]	_res	LI INO	

#### THE MOLEY FAMILY FOUNDATION

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.

928951	12-04-19	

	······································										***************************************		<del></del>		<del></del>
		1	Gross sales or receipts from all									1			00
		2	Interest									2		10,563	
		3	Dividends									3		32,089	9 00
Recei	pts	4	Gross rents									4			00
from		5	Gross royalties									5			00
Other		6	Gross amount received from sa									6			00
Sourc	es	7									_	7			00
		8	Total gross sales or receipts fro	m othe	r source:	s. Add line 1	l through I	line 7	7. Enter here and o	n Side 1, Part	I, line 1	8		42,652	2 00
		9	Contributions, gifts, grants, and	l similar	amount	s paid					•	9		387,488	8 00
		10 Disbursements to or for members								10			00		
		11	Compensation of officers, direc	tors, an	d trustee	rustees SEE STATEMENT 1						11		(	0 00
		12	Other salaries and wages	,							•	12			00
Expen	ses	13	Interest									13		***************************************	00
and		14	Taxes									14		9,000	
Disbu	rea-	15	Rents									15			00
ments		16	Depreciation and depletion (See									16			00
IIIGIII	'	17	Other Expenses and Disbursem	onte	, (citotis)				CFF CTA	<b>ТЕМЕХТ</b>	2 •	17		14,12	
			Total expenses and disburseme									18		410,615	
Sch	edul			iiis. Au	u iiile 9 L	Beginning	•••••	*************************	***************************************	11.1, 11116 9	Fnd		xable y		2100
***************************************			Datance Sheet	T			UI IANADIO	yea			***************************************	01 14	Aubic y		
Asset					(a	1)	_	1	(b) ,674,266		c)		•	(d) 1,324,8	036
1 C									,074,200					1,344,0	030
			s receivable				_			<b></b>			•		
			ceivable										•		
													•		
			state government obligations										•		•••••
			in other bonds										•		
7 lr	ivestn	nents	in stock										•		
<b>8</b> M	1ortga	ge loa	ans										•		
-			ments							***************************************			•		
			le assets												
b	Less	accu	mulated depreciation	(			)			(		)			
11 L	and												•		
<b>12</b> 0	ther a	ssets	STMT 3						,066,124				•	805,5	
13 T	otal a	ssets						2	,740,390					2,130,4	<u>432</u>
			et worth												
14 A	ccoun	ts pay	yable										•		
			s, gifts, or grants payable										•		
			otes payable										•		
			ayable										•		
			ies												
			or principal fund					***************************************					•		
			tal surplus. Attach reconciliation						······································				•		
			nings or income fund					2	,740,390				•	2,130,4	432
			ies and net worth						,740,390					2,130,4	
Sch	***************************************	•••••		per ho	nke with	income per	return		7 0 / 0 0 0						
••••			Do not complete this sche	-		•		e 13.	column (d), is less	s than \$50.000	L				
1 N	et inc	nme r	per books		•		,491		Income recorded	***************************************					
			me tax		-		,000	′	not included in th		-		•		
			pital losses over capital gains		-		<del>, , , , , ,</del>	a	Deductions in this		araad		-		
					•			ō			•		•		
			recorded on books this year		-			_	against book inco				- 1		
			corded on books this year not	Λ		260	<u> </u>	9	Total. Add line 7 a				-		
			this return STMT		•		,528	10	Net income per re					267 (	062
6	otal. A	ad lir	ne 1 through line 5		<u> </u>	-30/	,963		Subtract line 9 fro	om line 6				<u>-367,9</u>	202

CA 199 COMPENSATION OF OFFICE	RS, DIRECTORS AND TRUSTEES	STATEMENT 1
NAME AND ADDRESS	TITLE AND AVERAGE HRS WORKED/WK	COMPENSATION
RICHARD MOLEY P.O. BOX 4316 CARMEL, CA 93921	PRESIDENT 5.00	0 .
ELIZABETH MOLEY P.O. BOX 4316 CARMEL, CA 93921	VICE PRESIDENT 0.00	0.
ANDREW MOLEY 1930 BRYANT STREET PALO ALTO, CA 94301	TREASURER 40.00	0.
SUSAN FRANCES MOLEY 812 6TH STREET MANHATTAN BEACH, CA 90266	SECRETARY 20.00	0.
PETER MOLEY 46, WEST 70TH STREET APARTMENT 1 NEW YORK, NY 10023	BOARD MEMBER 0.00	0.
JOANNA MOLEY STORK P.O. BOX 4237 CARMEL, CA 93921	BOARD MEMBER 0.00	0.
TOTAL TO FORM 199, PART II, LINE 11		0.
CA 199 OT	HER EXPENSES	STATEMENT 2
DESCRIPTION		AMOUNT
ACCOUNTING FEES BANK CHARGES FEE TO ATTORNEY GENERAL FTB FEES		14,000. 42. 75. 10.
TOTAL TO FORM 199, PART II, LINE 17		14,127.

CA 199 OTHER AS	SETS ST	ATEMENT 3
DESCRIPTION	BEG. OF YEAR E	ND OF YEAR
DOMESTIC EQUITIES	1,066,124.	805,596.
TOTAL TO FORM 199, SCHEDULE L, LINE 12	1,066,124.	805,596.
CA 199 EXPENSES RECORDED ON NOT DEDUCTED IN		ATEMENT 4
DESCRIPTION		AMOUNT
CHANGE IN UNREALIZED GAIN/LOSS		260,528.
TOTAL TO FORM 199, SCHEDULE M-1, LINE 5		260,528.
CA 199 FUND BAL	ANCES ST	ATEMENT 5
DESCRIPTION	BEG. OF YEAR E	ND OF YEAR
CURRENT UNRESTRICTED FUND	2,740,390.	2,130,432.
TOTAL TO FORM 199, SCHEDULE L, LINE 21	2,740,390.	2,130,432.

### TAX RETURN FILING INSTRUCTIONS

**CALIFORNIA FORM RRF-1** 

#### FOR THE YEAR ENDING

October 31, 2020

#### **Prepared For:**

The Moley Family Foundation 1930 Bryant Street Palo Alto, CA 94301

#### Prepared By:

PricewaterhouseCoopers LLP 488 Almaden Boulevard, Suite 1800 San Jose, CA 95110

#### **Amount of Tax:**

Balance due of \$25

#### Make Check Payable To:

Department of Justice

#### Mail Tax Return To:

Registry of Charitable Trusts P.O. Box 903447 Sacramento, CA 94203-4470

#### Return Must Be Mailed On Or Before:

Please mail as soon as possible.

#### **Special Instructions:**

The report should be signed and dated by an authorized individual(s).

DEPARTMENT OF JUSTICE PAGE 1 of 5

STATE OF CALIFORNIA RRF-1 (Rev. 09/2017)

MAIL TO: Registry of Charitable Trusts P.O. Box 903447 Sacramento, CA 94203-4470

STREET ADDRESS: 1300 | Street Sacramento, CA 95814 (916)210-6400

WEBSITE ADDRESS: www.oag.ca.gov/charities

## ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA

Section 12586 and 12587, California Government Code 11 Cal. Code Regs. section 301-307, 311 and 312

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties. Revenue & Taxation Code section 23703; Government Code section 12586.1. IRS extensions will be honored.

PAGE (For Registry Use Only)

THE MOLEY FAMILY FOUNDATION Name of Organization			nge of address Inded report							
List all DBAs and names the organization uses or has used  1930 BRYANT STREET	Sta	ate Chari	ity Registration Number <b>CT</b> 114701							
Address (Number and Street)  PALO ALTO, CA 94301  City or Town, State, and ZIP Code	Co	orporatio	n or Organization No. C2182710							
City or Town, State, and ZIP Code           650-561-0733         ANDREWMOLEY@HO           E-mail Address	DTMAIL.COM Fe	ederal Em	ployer ID No. 77-0528059							
ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311, and 312)  Make Check Payable to Department of Justice										
Gross Annual RevenueFeeGross Annual RevenueFeeGross Annual RevenueLess than \$25,0000Between \$100,001 and \$250,000\$50Between \$1,000,001 and \$10 millionBetween \$250,001 and \$1 million\$75Between \$10,000,001 and \$50 million										
PART A - ACTIVITIES  For your most recent full accounting period (beginning 11/01/2019 ending 10/31/2020 ) list:										
Gross Annual Revenue \$ 42,652 Noncash Contributions \$ 0 Total Assets \$ 2,130,  Program Expenses \$ 23,127 Total Expenses \$ 410,615										
PART B - STATEMENTS REGARDING ORGANIZATION DU	RING THE PERIOD OF TI	HIS REP	ORT							
Note: All questions must be answered. If you answer "ye providing an explanation and details for each "yes"				Yes						
During this reporting period, were there any contracts, lo and any officer, director or trustee thereof, either directly any financial interest?	ans, leases or other financ	cial transa	actions between the organization	Yes	No X					
During this reporting period, was there any theft, embezz or funds?	lement, diversion or misus	se of the	organization's charitable property		х					
During this reporting period, were any organization funds	s used to pay any penalty,	fine or ju	dgment?		х					
During this reporting period, were the services of a commercial coventurer used?	nercial fundraiser, fundrais	sing coun	sel for charitable purposes, or		х					
During this reporting period, did the organization receive	any governmental funding	g?			х					
6. During this reporting period, did the organization hold a r	affle for charitable purpose	es?			х					
7. Does the organization conduct a vehicle donation progra	m?				х					
Did the organization conduct an independent audit and pagenerally accepted accounting principles for this reporting.	•	tatement	s in accordance with	***************************************	х					
At the end of this reporting period, did the organization h	old restricted net assets, v	while rep	orting negative unrestricted net assets?		х					
I declare under penalty of perjury that I have examined this and belief, the content is true, correct and complete, and I		npanying	documents, and to the best of my know	/ledge	L					
ANDREW MOLE		TF	REASURER							
Signature of Authorized Agent Printed Name		Title								

#### Form **8868**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit

OMB No. 1545-0047

Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) Type or print THE MOLEY FAMILY FOUNDATION 77-0528059 File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your 1930 BRYANT STREET instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. PALO ALTO, CA 94301 Enter the Return Code for the return that this application is for (file a separate application for each return) 0 4 Application Return Application Return <u>ls F</u>or Code Is For Code Form 990-T (corporation) Form 990 or Form 990-EZ 01 07 Form 990-BL 02 Form 1041-A 80 Form 4720 (individual) Form 4720 (other than individual) 09 Form 990-PF 10 04 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) Form 6069 11 Form 8870 Form 990-T (trust other than above) 12 ANDREW MOLEY • The books are in the care of  $\blacktriangleright$  1930 BRYANT STREET - PALO ALTO, CA 94301 Telephone No. ► 650-561-0733 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box 🕨 🔲 . If it is for part of the group, check this box 🕨 🦳 and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until SEPTEMBER 15, 2021, to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year or ► X tax year beginning NOV 1, 2019 and ending OCT 31, 2020 Final return If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 712. any nonrefundable credits. See instructions If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 14,767. estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

923841 12-30-19

LHA

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2020)

# EXTENDED TO SEPTEMBER 15, 2021 Return of Private Foundation

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

OMB No. 1545-0047

Form **990-PF** 

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990PF for instructions and the latest information. NOV 1 2019 For calendar year 2010 or tay year heginning

For	calen	dar year 2019 or tax year beginning NOV	1, 2019	, and ending	OCT 31, 2020	
Nai	ne of	foundation			A Employer identification	number
		MOLEY FAMILY FOUNDATION			77-0528059	
		nd street (or P.O. box number if mail is not delivered to street a	ddress)	Room/suite	B Telephone number	2.2
		0 BRYANT STREET			650-561-07	
		own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is pe	ending, check here
		O ALTO, CA 94301			- - -	. ahaali hawa
Gil	леск	all that apply: Initial return		ormer public charity	D 1. Foreign organizations	s, cneck nere
		Final return Address change	Amended return  Name change		Foreign organizations me check here and attach co	eting the 85% test,
н (	hack	type of organization: X Section 501(c)(3) ex	X			
			Other taxable private founda	ition	E If private foundation sta under section 507(b)(1)	
ـــــــــــــــــــــــــــــــــــــ		arket value of all assets at end of year J Accounting		Accrual	F If the foundation is in a	
			her (specify)		under section 507(b)(1)	
	\$	2,130,432. (Part I, colun		is.)		
Pa	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				
	2	Check X if the foundation is not required to attach Sch. B Interest on savings and temporary	40 = 20	10 = 22		AT 100 12 100 100 100 100 100 100 100 100
	3	cash investments	10,563.	10,563.		STATEMENT 1
	4	Dividends and interest from securities	32,089.	32,089.		STATEMENT 2
	ı	Gross rents				
	١.	Net rental income or (loss)				
e	oa b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all				
Revenue	b   7	assets on line 6a Capital gain net income (from Part IV, line 2)		0.		
Be	8	Net short-term capital gain		0.		
	9	Income modifications				
		Gross sales less returns and allowances				
		Less: Cost of goods sold				
	ı	Gross profit or (loss)				
	11	Other income	18,533.	0.	0.	STATEMENT 3
	12	Total. Add lines 1 through 11	61,185.	42,652.	0.	
	13	Compensation of officers, directors, trustees, etc.	0.	0.	0.	0.
	14	Other employee salaries and wages				
	ı	Pension plans, employee benefits				
ses	16a	Legal fees	14 000	7 000		7 000
pen	b	Accounting fees STMT 4	14,000.	7,000.	0.	7,000.
Щ	C   17	Other professional fees				
Administrative Expenses	18	Interest Taxes STMT 5	9,000.	0.	0.	0.
stra	19	Depreciation and depletion	3,000			
ä	20	Occupancy				
Adn	21	Travel, conferences, and meetings				
and		Printing and publications				
g	23	Other expenses STMT 6	127.	63.	0.	64.
atin	23 24 25	Total operating and administrative				
ber		expenses. Add lines 13 through 23	23,127.	7,063.	0.	7,064.
0		Contributions, gifts, grants paid	387,488.			387,488.
	26	Total expenses and disbursements.	410 615	m 0.00		204 550
	-	Add lines 24 and 25	410,615.	7,063.	0.	394,552.
	l	Subtract line 26 from line 12:	_3/0 /30			
	ı	Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)	-349,430.	35,589.		
	ı	Adjusted net income (if negative, enter -0-)		33,303.	0.	
		riajuotou not moonio (ii nogativo, cittor o /	ı		,	I .

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions.

P	art	Balance Sheets Attached schedules and amounts in the description	beginning of year	End of y	
<u> </u>		column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	91,814.	51,198.	<u>51,198.</u>
	2	Savings and temporary cash investments	1,582,452.	1,273,638.	1,273,638.
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	l .	Receivables due from officers, directors, trustees, and other			<del></del>
	•	disqualified persons			
	7	Other notes and loans receivable			
	<i>'</i>	Less: allowance for doubtful accounts			
	8				
Assets		Inventories for sale or use Prepaid expenses and deferred charges			
Ass		Investments - U.S. and state government obligations			
•	ı				
		Investments - corporate stock			
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment: basis			
		Less: accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis			
		Less: accumulated depreciation			
	l .	Other assets (describe DOMESTIC EQUITIES )	1,066,124.	805,596.	805,596.
	16	Total assets (to be completed by all filers - see the			
_		instructions. Also, see page 1, item I)	2,740,390.	2,130,432.	2,130,432.
		Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable			
	22	Other liabilities (describe )			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow FASB ASC 958, check here			
Ś		and complete lines 24, 25, 29, and 30.			
uce	24	Net assets without donor restrictions			
ala	25	Net assets with donor restrictions			
d B		Foundations that do not follow FASB ASC 958, check here 🕨 🛚 🗶			
Fund Bala		and complete lines 26 through 30.			
è	26	Capital stock, trust principal, or current funds	2,740,390.	2,130,432.	
	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	_
Net Assets	28	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
Ä	29	Total net assets or fund balances	2,740,390.	2,130,432.	
ž					
	30	Total liabilities and net assets/fund balances	2,740,390.	2,130,432.	
Р	art				
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 2	<u> </u>		
				1	2 740 390
					2,740,390. -349,430.
					0.
		ines 1, 2, and 3			2,390,960.
		eases not included in line 2 (itemize)	SEE STA		260,528.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu		6	2,130,432.
<u> </u>	, o iui	The access of famo balances at one of your filled a filling of the fill, both	107, 1110 60		Form <b>990-PF</b> (2019)

		Y FAMILY FOUNDAT			77-	0528059	Page 3
<u> </u>		ses for Tax on Investme	••••••	(h) How acquired		I	
		of property sold (for example, real common stock, 200 shs. MLC Co.		(b) How acquired P - Purchase	(c) Date acqu (mo., day, y		te sold lay, yr.)
1a			/	D - Donation	( , 3,3	<del></del>	
	ONE						
C							
d							
е							
(e) Gross sales price			Cost or other basis lus expense of sale		<b>(h)</b> Gain o ((e) plus (f) r		
a							
b							
<u>C</u>							
d							
Complete only for accets above		June /b) and accord by the formula	tion on 10/01/00				
Complete only for assets snow		olumn (h) and owned by the founda	•••••••••••		(I) Gains (Col. (h ol. (k), but not le		
(i) FMV as of 12/31/69			() Excess of col. (i) over col. (j), if any		Losses (fron	1 col. (h))	
<u>a</u>							
<u>b</u>							
<u>C</u>							
<u>d</u>							<i></i>
Е				7   1			
2 Capital gain net income or (net o	capital loss)	If gain, also enter in Part I, If (loss), enter -0- in Part I,	line 7	. } 2			
3 Net short-term capital gain or (le							
If gain, also enter in Part I, line 8				<b>)</b>			
If (loss), enter -0- in Part I, line  Part V   Qualification	Jnder Se	ction 4940(e) for Reduc	ed Tax on Net	. /   ₃   Investment Inc	ome		
(For optional use by domestic priva							
(i or optional acc by democile priva	to roundation	o outspool to the southern to ro(u) tu	CONTINUE INVOCATIONE III	001110.7			
If section 4940(d)(2) applies, leave	this part blar	ık.					
Was the foundation liable for the se	ction 4942 ta	x on the distributable amount of ar	y year in the base per	iod?		Yes	X No
If "Yes," the foundation doesn't qual	lify under sec	tion 4940(e). Do not complete this	part.				
1 Enter the appropriate amount in	ı each columi	n for each year; see the instructions	before making any e	ntries.			
(a) Base period years		(b)		(c)		(d) Distribution ratio	
Calendar year (or tax year beginn	ning in)	Adjusted qualifying distributions		oncharitable-use asset	.s (col.	(b) divided by col	. (C))
2018		394,183		2,782,05			41688
2017		503,022 419,038	2 •	2,893,46			73847
2016		182,229	<u> </u>	2,102,44 1,277,34	0.		$\frac{99310}{42662}$
2015		394,500		1,319,85			<u>42002</u> 98897
2014		334,300	J •	1,319,63	<del>}  </del>	• 4	90091
2 Total of line 1 column (d)					2	9	56404
<ul><li>2 Total of line 1, column (d)</li><li>3 Average distribution ratio for the</li></ul>	5-vear hase	period - divide the total on line 2 h	v 5.0. or by the numb	er of vears	·-		30101
<u> </u>	-	nan 5 years		*	3	.1	91281
are rearranted that been in exist		ian o youro ,			-   -		
4 Enter the net value of noncharita	able-use asse	ts for 2019 from Part X, line 5			4	2,371	,365.
						······································	
5 Multiply line 4 by line 3					. 5	453	,597.
6 Enter 1% of net investment inco	me (1% of P	art I, line 27b)			6		356.
7 Add lines 5 and 6			••••		. 7	453	<u>,953.</u>
8 Enter qualifying distributions from	om Part XII. li	ne 4			8	394	,552.
		ck the box in Part VI, line 1b, and c			·· L		
See the Part VI instructions.	an inte 7, cite	ck the box in rait vi, line ib, and c	omplete that part usir	iy a 170 lax raic.			

Part VI Excise Tax Based on Investment Income (Section 494	40(a), 4940(b), 4940(e),	or 49	48 - see	instruc	ction	s)
1a Exempt operating foundations described in section 4940(d)(2), check here and	l enter "N/A" on line 1.	) T				
Date of ruling or determination letter: (attach copy of letter if n						
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V, check here		<b>)</b>	1		7	12.
of Part I, line 27b		l				
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter	4% of Part I, line 12, col. (b)	J				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only;	others, enter -0-)		2			0.
3 Add lines 1 and 2			3		7	12.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only;	others, enter -0-)		4		•	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5		7	12.
6 Credits/Payments:		Γ				
a 2019 estimated tax payments and 2018 overpayment credited to 2019	6a   14,7	767.				
<b>b</b> Exempt foreign organizations - tax withheld at source		0.				
c Tax paid with application for extension of time to file (Form 8868)		0.				
d Backup withholding erroneously withheld		0.				
7 Total credits and payments. Add lines 6a through 6d			7	1	4,7	<u>67.</u>
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is a	ttached	····· [	8		•	0.
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	1	4,0	55.
11 Enter the amount of line 10 to be: Credited to 2020 estimated tax			11		·············	0.
Part VII-A Statements Regarding Activities	, , , , , , , , , , , , , , , , , , , ,		,			
1a During the tax year, did the foundation attempt to influence any national, state, or local leg	islation or did it participate or in	itervene i	n		Yes	No
any political campaign?				1a		X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purp	ooses? See the instructions for t	he definit	ion	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies						
distributed by the foundation in connection with the activities.	,					
c Did the foundation file Form 1120-POL for this year?				1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the						
(1) On the foundation. ▶ \$ 0 . (2) On foundation manage		0.				
e Enter the reimbursement (if any) paid by the foundation during the year for political expen		***************************************				
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	n instrument, articles of incorpor	ation, or				
	,			3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year.					ļ	X
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?				4b		<b></b>
5 Was there a liquidation, termination, dissolution, or substantial contraction during the yea						Х
If "Yes," attach the statement required by General Instruction T.						
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	either:					
By language in the governing instrument, or						
By state legislation that effectively amends the governing instrument so that no mandation	ory directions that conflict with t	he state I	aw			
remain in the governing instrument?	•			6		Х
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," con	nplete Part II, col, (c), and Part >	(V		7	Х	<b></b>
	, ( )/					
8a Enter the states to which the foundation reports or with which it is registered. See instruct	tions.					
CA	***************************************		***************************************	-		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attorney General (or designate)		***************************************	-		
of each state as required by General Instruction G? If "No," attach explanation				8b	х	
9 Is the foundation claiming status as a private operating foundation within the meaning of						
year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," co				9	1	х
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a sche					l .	Х
				Form <b>99</b> 0	)-PF	(2019)

Pč	art vii-A Statements Regarding Activities (continued)	<del>,</del>		
			Yes	No
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 privileges?			
	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 ► HTTP://AG.CA.GOV/CHARITIES			
14	The books are in care of ► ANDREW MOLEY  Telephone no. ► 650-56		<u>733</u>	
	Located at ► 1930 BRYANT STREET, PALO ALTO, CA ZIP+4 ► 94			
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	N	/A	
16	At any time during calendar year 2019, 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>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
D	foreign country			
Pč	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required		V	NI -
	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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(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 X 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)?  Yes X 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 X No			
Ę	of the acts fail to qualify under the exceptions described in Regulations			
	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			
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			х
	before the first day of the tax year beginning in 2019?  Taxas as follows to distribute income (costing 4043) (does not easily favours the foundation was a private easysting foundation.	1c		
2	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 2019, did the foundation have any undistributed income (Part XIII, lines			
•	6d and 6e) for tax year(s) beginning before 2019?  Yes X No			
	If "Yes," list the years —			
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.)  N/A	2b		
,	of the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
Ì	•			
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
•	during the year?			
ŀ	of "Yes," did it have excess business holdings in 2019 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 Form 4720,			
	Schedule C, to determine if the foundation had excess business holdings in 2019.)  N/A	3b		
42	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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 tax year beginning in 2019?	4b		Х
		rm <b>990</b>	)-PF	(2019)

Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	equired <sub>(contine</sub>	ued)			
5a During the year, did the foundation pay or incur any amount to:				Y	'es	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	s X No			
(2) Influence the outcome of any specific public election (see section 4955); or						
any voter registration drive?		Ye	s X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No			
(4) Provide a grant to an organization other than a charitable, etc., organization						
4945(d)(4)(A)? See instructions		Ye	s X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary,						
the prevention of cruelty to children or animals?		Ye	s X No			
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify unc						
section 53.4945 or in a current notice regarding disaster assistance? See instru			N/A	5b		
Organizations relying on a current notice regarding disaster assistance, check h						
c If the answer is "Yes" to guestion 5a(4), does the foundation claim exemption fr						
expenditure responsibility for the grant?			s No			
If "Yes," attach the statement required by Regulations section 53.4945-5(d).		······································				
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to p	nav premiums on					
a personal benefit contract?	• •	□ γ <sub>e</sub>	s X No			
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a positive state of the foundation.	ersonal henefit contract?			6b		Х
If "Yes" to 6b, file Form 8870.	orsonar bonont contract:					
7a At any time during the tax year, was the foundation a party to a prohibited tax si	helter transaction2	□ v <sub>e</sub>	s X No			
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$				70		
, - , ,		r	s X No			
Part VIII Information About Officers, Directors, Truste			5 21 NU			
Paid Employees, and Contractors	,cs, i candation mai	lagers, riigin <b>y</b>				
1 List all officers, directors, trustees, and foundation managers and the	eir compensation.					
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e	) Ехре	
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	acci	ount, Iowan	other ices
	to pootion	Citter 0 7	compensation		10 17 41	
SEE STATEMENT 8		0.	0.			0.
		<u> </u>				
			••••••			***************************************
2 Compensation of five highest-paid employees (other than those incl	uded on line 1) If none	enter "NONE "		<u> </u>		
2 Compensation of the highest-part employees (other than those incl	(b) Title, and average	Titel NOIL.	(d) Contributions to	le le	) Expe	anse
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	acc	ount,	other
NONE	devoted to position		compensation	aı aı	lowan	ices
NONE						
						••••••
				1		
				<del> </del>		
						••••••
				1		
Total number of other employees paid over \$50,000						0

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	IONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	<u> </u>	
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	Il information such as the	Expenses
1 N/A		
1		
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	es 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
The Land Constitution of the control of		0.
Total. Add lines 1 through 3	<b>P</b>	

Page 8

P	art X Minimum Investment Return (All domestic foundations mu	st complete this par	t. Foreign foun	dations, se	e instructions.)
1	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			1a	983,124.
	Average of monthly cash balances			1b	1,424,353.
	Fair market value of all other assets			1c	
	Total (add lines 1a, b, and c)			1d	2,407,477.
е	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	2,407,477.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, s	ee instructions)		4	36,112.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on l			5	2,371,365.
6	Minimum investment return. Enter 5% of line 5			6	118,568.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and			d certain	
	foreign organizations, check here  and do not complete this part.)				
1	Minimum investment return from Part X, line 6			1	118,568.
2a	Tax on investment income for 2019 from Part VI, line 5	2a	712.		
b	Income tax for 2019. (This does not include the tax from Part VI.)				
C	Add lines 2a and 2b			2c	712.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	117,856.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	117,856.
6	Deduction from distributable amount (see instructions)			6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part X			7	117,856.
P	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpo	ses:			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		,,,,,,,,,,,	1a	39 <b>4</b> ,552.
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			2	
3	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	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and			4	394,552.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investi				
	income. Enter 1% of Part I, line 27b	,,,,,,,		5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	394,552.
	Note: The amount on line 6 will be used in Part V. column (b), in subsequent years who			ualifies for th	ne section

Form **990-PF** (2019)

4940(e) reduction of tax in those years.

### Part XIII Undistributed Income (see instructions)

	· · · · · · · · · · · · · · · · · · ·			
	(a) Corpus	(b) Years prior to 2018	(c) 2018	<b>(d)</b> 2019
1 Distributable amount for 2019 from Part XI,	·			
line 7				117,856.
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only			0.	
<b>b</b> Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014 339,016.				
<b>b</b> From 2015 182, 229.				
c From 2016 419,038.				
d From 2017 366, 462.				
e From 2018 269,313.	1 576 050			
f Total of lines 3a through e	1,576,058.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: ►\$ 394,552.			0.	
a Applied to 2018, but not more than line 2a			U •	
<b>b</b> Applied to undistributed income of prior		0.		
years (Election required - see instructions) <b>c</b> Treated as distributions out of corpus		U •		
(Floation nonvined and instructions)	0.			
4 Applied to 0040 distributable amount	· ·			117,856.
e Remaining amount distributed out of corpus	276,696.			117,030.
5 Excess distributions carryover applied to 2019	270,0500			
(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:	4 050 554			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,852,754.			
<b>b</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.		
<b>d</b> Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line			_	
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				0
be distributed in 2020				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)	V •			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7	339,016.			
9 Excess distributions carryover to 2020.	333,010.			
Subtract lines 7 and 8 from line 6a	1,513,738.			
10 Analysis of line 9:				
a Excess from 2015 182,229.				
<b>b</b> Excess from 2016 419,038.				
c Excess from 2017 366, 462.				
d Excess from 2018 269,313.				
e Excess from 2019 276,696.				
923581 12-17-19	•	-		Form <b>990-PF</b> (2019)

923581 12-17-19

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Supplementary information				
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment 		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
BETHLEHEM UNIVERSITY 12650 RIVERSIDE DRIVE NORTH HOLLYWOOD 91607	NONE	501(C)(3)	GENERAL USE	50,000.
GEORGETOWN UNIVERSITY P.O. BOX 14152 JERUSALEM, ISRAEL 91143	NONE	501(C)(3)	GENERAL USE	337,488.
			<u> </u>	
Total			<b>&gt;</b> 3a	387,488.
<b>b</b> Approved for future payment				
NONE				
Total			<u>▶ 3b</u>	0. Form <b>990-PF</b> (2019)
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Page 12

#### Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income	Exclu	ded by section 512, 513, or 514	(e)
Enter gross amounts amoss otherwise maleuted.	(a)	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
·	Couc				
a					
b					
C	***************************************	***************************************			
e	***************************************		<b></b>		
f	***************************************		<del> </del>		
g Fees and contracts from government agencies	***************************************	•			
2 Membership dues and assessments	***************************************		<del></del>		
3 Interest on savings and temporary cash	***************************************				
investments			14	10,563.	
4 Dividends and interest from securities			01	10,563. 32,089.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			01		
8 Gain or (loss) from sales of assets other					
than inventory			18		
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a		***************************************			
b		***************************************			
c		***************************************			
d		***************************************			
e				10.45	
12 Subtotal. Add columns (b), (d), and (e)		0.		42,652.	
<b>13 Total.</b> Add line 12, columns (b), (d), and (e)				13	42,652.
(See worksheet in line 13 instructions to verify calculations.)					

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

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).

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Part XVII	Information	Regarding	Transfers	s to and Transaction	s and Relationships	With Non	charitable
	Exempt Org	anizations	<b>;</b>				
4 5:111				£ 11		04/)	

1	Did the o	rganization directly or indi	irectly engage in any o	of the followin	g with any other	organizatio	n described in se	ction 501(c)		Yes	No
	(other that	an section 501(c)(3) organ	nizations) or in sectio	n 527, relating	to political orga	ınizations?					
a Transfers from the reporting foundation to a noncharitable exempt organization of:											
(1) Cash									1a(1)		X
(2) Other assets									1a(2)		_X_
b	Other tra	nsactions:									
	(1) Sale	s of assets to a noncharita	able exempt organizat	ion					1b(1)		X
	(2) Puro	hases of assets from a no	oncharitable exempt o	rganization					1b(2)		X
	(3) Rent	al of facilities, equipment,	or other assets						1b(3)		X
	(4) Rein	nbursement arrangements	<b></b>						1b(4)		X
									1b(5)		Х
		ormance of services or me							1b(6)		Х
С	Sharing o	of facilities, equipment, ma	ailing lists, other asse	ts, or paid em	ployees				1c		Х
								r market value of the goods, o	ther ass	ets,	
	or service	es given by the reporting f	oundation. If the foun	dation receive	ed less than fair r	market value	e in any transacti	on or sharing arrangement, sl	10w in		
	column (	d) the value of the goods,	other assets, or servi	ces received.							
(a)∟i	ne no.	(b) Amount involved	(c) Name of	noncharitable	exempt organiz	ation	(d) Descript	ion of transfers, transactions, and s	haring arra	angemen	nts
				N/A							
***************************************										•	
***************************************											***************************************
***************************************	·····								***************************************		
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22	le the for	indation directly or indirec	thy affiliated with or r	alated to one	or more tay-ave	mnt organiz	zatione described				
2 a		n 501(c) (other than sectio							Yes	T	No
h		omplete the following sch		JUI 3211				L	165	L_21	) 140
U	11 165, 0	(a) Name of org			(b) Type of org	nanization		(c) Description of relations	hin	***************************************	
***************************************		N/A	gamzanon		(b) Type or org	guinzution		(v) Bescription of relations			
***************************************		N/A							•••••		
***************************************					<u></u>				••••••		
***************************************					ļ				••••••		
									••••••		
	Unde	r penalties of perjury, I declare	that I have examined this	return, including	accompanying sche	edules and sta	atements, and to the	best of my knowledge	:= *		
Sig		elief, it is true, correct, and con						r has any knowledge. Ma retu	y the IRS o urn with the	e prepare	er
He					1		TREAS		wn below:		¬ I
	Sig	nature of officer or trustee	<u> </u>		I Date		Title	JOREH	<u></u> res	L	No
***************************************		Print/Type preparer's na		Preparer's si		T	Date	Check if PTIN			
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Paid ROXANNE LAINE								1 ' ' 1	0177	656	
	eparer	Firm's name ► PRI		LEECOO	PERS T.T.E			Firm's EIN ► 13 – 40			
	e Only	rinn s name FRI	CEWAIERHU	OBECOO	тпр сипт	•		LIIIII S CIN > T2-4	,003	4 <del>1</del>	
	··· <i>y</i>	Firm's address ► 48	A AT.MADEM	BOIT E	ים מקעו	፲፲ጥټ 1	800			***************************************	
			N JOSE, C.				.000	Phone no. (408)	217	_ 374	n n
		ı SA	TIN OCOE, C.	r jott	<u> </u>				orm <b>99</b> 0		
								F	الاح اللاز	)-F.E.	(2019)

	-						
FORM 990-PF INTER	EST ON SAVI	NGS AND T	EMPORAR	RY CASH	INVESTMENTS	STATEMENT 1	
SOURCE	REV	(A) REVENUE PER BOOKS		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME		
GOLDMAN SACHS		10,563	3.	10,563.	0.		
TOTAL TO PART I, L		10,563	3.	10,563.			
FORM 990-PF	DIVIDEND	S AND INTE	EREST F	ROM SEC	URITIES	STATEMENT 2	
SOURCE	GROSS AMOUNT	CAPITA GAINS DIVIDEN	3	(A) REVENUE PER BOOK			
GOLDMAN SACHS	32,089	•	0.	32,08	9. 32,08	39. 0.	
TO PART I, LINE 4	32,089	•	0.	32,089. 32,0		89. 0	
FORM 990-PF DESCRIPTION		OTHER	INCOME (A REVE PER B	A) ENUE	(B) NET INVEST- MENT INCOME		
FEDERAL REFUND		_		18,533.			
TOTAL TO FORM 990-1	PF, PART I,	LINE 11 =		18,533.		0. 0	
FORM 990-PF		ACCOUNT	ING FE	EES		STATEMENT 4	
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) INVEST-			
PWC TAX PREP FEES	<u></u>	14,000		7,000	•	0. 7,000	
TO FORM 990-PF, PG	1, LN 16B	14,000	).	7,000	•	0. 7,000	

FORM 990-PF	TAX	ES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
IRS ESTIMATED TAX PAYMENT	9,000.	0.	0.	0.	
TO FORM 990-PF, PG 1, LN 18	9,000.		0.	0.	
FORM 990-PF	OTHER E	ADENGEG	Qn	PATEMENT 6	
	OTHER E.	AF ENGES		AILMENI	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
BANK CHARGES FEE TO ATTORNEY GENERAL FTB FEES	42. 75. 10.	21. 37. 5.	0. 0. 0.	21. 38. 5.	
TO FORM 990-PF, PG 1, LN 23	127.	63.	0.	64.	

FORM 990-PF	OTHER	DECREASES	IN N	ET ASSETS	OR	FUND	BALANCES	STATEMENT 7	
DESCRIPTION								AMOUNT	
OTHER INCREASES CHANGE IN BASIS					260,52	1. 7.			
TOTAL TO FORM S	990-PF	, PART III	, LIN	5				260,52	8.

	OF OFFICERS, DI FOUNDATION MANAG	STATEMENT 8		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
RICHARD MOLEY P.O. BOX 4316 CARMEL, CA 93921	PRESIDENT 5.00	0.	0.	0.
ELIZABETH MOLEY P.O. BOX 4316 CARMEL, CA 93921	VICE PRESIDENT 0.00	0.	0.	0.
ANDREW MOLEY 1930 BRYANT STREET PALO ALTO, CA 94301	TREASURER 40.00	0.	0.	0.
SUSAN FRANCES MOLEY 812 6TH STREET MANHATTAN BEACH, CA 90266	SECRETARY 20.00	0.	0.	0.
PETER MOLEY 46, WEST 70TH STREET APARTMENT 1 NEW YORK, NY 10023	BOARD MEMBER 0.00	0.	0.	0.
JOANNA MOLEY STORK P.O. BOX 4237 CARMEL, CA 93921	BOARD MEMBER 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0.