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Form 990-PF

Department of the Treasury Internal Revenue Service **Return of Private Foundation**

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

Note The foundation may be able to use a copy of this return to satisfy state reporting requirements

2009

OMB No 1545-0052

For	calendai	r year 2009, or tax yea	ar beginning		, and ei	ıding		
G	Check all	that apply	Initial return	Initial return of a f	•	hanty	Final retu	rn
	_		Amended return	Address char	nge		Name change	
Us	e the IRS	Name of foundation					A Employer identification	on number
	label.	THE TORIN	FAMILY FOUN	מחדשמ			23-642001	3
	nerwise, print		O box number if mail is not de			Room/suite	B Telephone number	<u> </u>
	r type.		OLD LANE UNI				610-649-7	024
	Specific	City or town state a					C If exemption application is	
insi	ructions	HAVERFORD					D 1. Foreign organizatio	
H (Check typ		X Section 501(c)(3) ex	empt private foundation			Foreign organizations r check here and attach	neeting the 85% test,
	Sectio	on 4947(a)(1) nonexen		Other taxable private found	ation		E If private foundation s	
I F	air marke	et value of all assets at	end of year J Accounti	ng method X Cash	Accr	ıal	under section 507(b)(
•		t II, col. (c), line 16)		her (specify)			F If the foundation is in	a 60-month termination
	<u> </u>			mn (d) must be on cash	basis)		under section 507(b)(1)(B), check here 🕒 🔽
Pa	س لشخشت	inalysis of Revenue ar The total of amounts in coluecessanly equal the amoun	imns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net inco		(c) Adjusted net	(d) Disbursements for chantable purposes (cash basis only)
_	1	entributions, gifts, gran		300,000.			N/A	(Cash basis Only)
			on is not required to attach Sch. B	220,000.			1	
	n Inte	erest on savings and temporal		41,047.	4	1,047.		STATEMENT 1
		vidends and interest fro	om securities	5,372.		5,372.		STATEMENT 2
	5a Gr	oss rents					<u> </u>	
	b) Net	t rental income or (loss)						
ø	6a Net	t gain or (loss) from sale of		<1,671.	>			
Revenue	b Gro	oss sales price for all	166,035.				,	+
Š	7 Ca	pital gain net income (from	Part IV, line 2)			0.		
_	8 Ne	t short-term capital gai	ın	 	<u></u>			
	Gro	come modifications oss sales less returns	I					
	10a and	d allowances				-,		4
		ss Cost of goods sold OSS profit or (loss)	L		<u> </u>			
		her income		25,436.	2	5,436.		STATEMENT 3
	1	tal Add lines 1 throug	ıh 11	370,184.		1,855.		
	1	mpensation of officers, dire		0.		0.		0
	14 Oth	her employee salaries a	and wages					
	15 Pe	nsion plans, employee	benefits					
sesus	16a Leg	gal fees						
Exper	b Ac	counting fees						
ative Expe		ner professional fees			•			
Ĭ,	1	erest	CMMM 4	(40		C 4 O		
stra	18 Tax		STMT 4	648.		648.		0
:≝		preciation and depletio	'n					
Adn		cupancy avel, conferences, and a	mastings					
ğ	l	nting and publications	•					
Operating and Administrative	l	ner expenses	STMT 5	2,751.		150.		0.
aţi		ial operating and adm	1					
per		enses. Add lines 13 t	1	3,399.		798.		0.
0	25 Cor	ntributions, gifts Gan t	GEIVED	220,250.				220,250.
	26 Tot	tal expenses and disb	ursements		· · · · · · · · · · · · · · · · · · ·			
	Add	d lines 24 and 25,000 btract line 26 from line	/ 1 5 2010 Ö	223,649.		798.		220,250
1	27 Sut	btract line 26 from line	12 0 20 0					
	a Exc	ess of revenue over expen	ses and disbursements.	146,535.		0.5.5		
		t investment income				,057.	37 / B	
0225	_ c Adj	usted net income (if ne	egative, enter -0-)				N/A	1

923501 02-02-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions

D	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of y	
rar	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	0.	6,040.	6,040. 253,519.
2	Savings and temporary cash investments	0.	253,519.	253,519.
3	Accounts receivable]		
	Less allowance for doubtful accounts			
4	Pledges receivable -	}		
	Less allowance for doubtful accounts 🟲			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons			
7	Other notes and loans receivable	1		
-	Less allowance for doubtful accounts 🟲			
ಕ್ಟ 8	Inventories for sale or use			
Assets	Prepaid expenses and deferred charges			
⋖ 10	a Investments - U.S. and state government obligations STMT 6	0.	253,192.	254,684.
	b investments - corporate stock STMT 7	989,613.	454,883.	465,528.
	c Investments - corporate bonds STMT 8	790,000.	955,000.	969,499.
11	Investments - land, buildings, and equipment basis			
	Less. accumulated depreciation			
12	Investments - mortgage loans			
13		5,000.		······································
14	Land, buildings, and equipment basis ▶			
	Less accumulated depreciation			
15	Other assets (describe STATEMENT 9)	4,122.	531.	531.
		1 500 505	1 000 165	1 040 001
16	Total assets (to be completed by all filers)	1,788,735.	1,923,165.	1,949,801.
17	Accounts payable and accrued expenses	12,105.		
18	Grants payable			
<u>ဗ္</u> မ 19	Deferred revenue			
Liabilities 51 21 21 22 22 22 22 22 22 22 22 22 22 22				
를 21	• •			
22 ₂₂	Other liabilities (describe			
		12 105		
23	Total liabilities (add lines 17 through 22)	12,105.	0.	
	Foundations that follow SFAS 117, check here		ļ	
ွှ	and complete lines 24 through 26 and lines 30 and 31.			
일 24	Unrestricted			
<u> </u>	Temporarily restricted			
Ď 26	·			
5	Foundations that do not follow SFAS 117, check here			
<u>ة</u>	and complete lines 27 through 31.		0	
<u>s</u> 27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets or Fund Balances	Paid-in or capital surplus, or land, bldg, and equipment fund	1,776,630.	1,923,165.	
₹ 29	Retained earnings, accumulated income, endowment, or other funds	1,776,630.	1,923,165.	
ž 30	Total net assets or fund balances	1,770,030.	1,923,103.	
		1,788,735.	1,923,165.	
31	Total liabilities and net assets/fund balances		1,923,103	
Pari	Analysis of Changes in Net Assets or Fund B	alances		
1 Tota	il net assets or fund balances at beginning of year - Part II, column (a), line	30		
	st agree with end-of-year figure reported on prior year's return)		1	1,776,630.
•	er amount from Part I, line 27a		2	146,535.
	er increases not included in line 2 (itemize)		3	0.
	lines 1, 2, and 3		4	1,923,165.
	reases not included in line 2 (itemize)		5	0.
	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	1,923,165.

923511 02-02-10

THE TOBIN FAMILY FOUNDATION

	nbe the k	osses for Tax on In ind(s) of property sold (e g or common stock, 200 shs	, real estate,	t Income	P -	ow acquired Purchase	1 107	Date acquired no , day, yr)	(d) Date sold (mo , day, yr)
	alenouse,	of confinion stock, 200 sns	- WILC CO)		D-	Donation			(1110 , day, yr /
b SEE ATTACHED	STA	TEMENTS					 		· · · · · · · · · · · · · · · · · · ·
C		<u> </u>			 	• •			
d									
е					<u> </u>				
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale				(h) Gain or (loss e) plus (f) minus	
<u>a</u>									_
<u>b</u>									
d d									· · · · · · · · · · · · · · · · · · ·
e 166,035.				167,70	6.				<1,671
Complete only for assets shown		column (h) and owned by t	he foundation	on 12/31/69				ıns (Col (h) gaır	
(i) F M V as of 12/31/69		(j) Adjusted basis as of 12/31/69	, ,	cess of col (i) col (j), if any			col (k) Lo	, but not less that osses (from col	nn -0-) ar (h))
a				•				-	
<u>b</u>									
<u>C</u>			·		_				
<u>d</u>									<1,671
<u>e</u>					$\overline{}$	1			<u> </u>
2 Capital gain net income or (net ca	ipital loss)	$ \begin{cases} \text{ If gain, also enter} \\ \text{ If (loss), enter -0-} \end{cases} $	in Part I, line in Part I, line	7 7	}	2			<1,671
3 Net short-term capital gain or (los			d (6)		٦				
If gain, also enter in Part I, line 8, if (loss), enter -0- in Part I, line 8	column (d	C)			}	3		N/A	1
Part V Qualification U	nder S	ection 4940(e) for	Reduced	Tax on Net	Inve	stment	Incon		· · · · · · · · · · · · · · · · · · ·
If section 4940(d)(2) applies, leave the Was the foundation liable for the sec if "Yes," the foundation does not qual Enter the appropriate amount in a section of the sect	tion 4942 lify under	tax on the distributable am section 4940(e) Do not cor	mplete this pa	<u>rt</u>					Yes X No
(a)	1	(b)		maning any ontino	(c)			Diek-il	(d)
Base periód years Calendar year (or tax year beginni	ng In)	Adjusted qualifying dist	ributions	Net value of nor		able-use ass	ets	(col (b) di	bútión ratio vided by col. (c))
2008			2,380.			643,9			.141353
2007			7,765.			525,1			.188677
2006			9,841.		Ι,	197,4			.225348
2005			5,020. 9,560.			389,23 233,70			.629524
2004			7,500.			233,11	7 -		.000000
2 Total of line 1, column (d)								2	1.824857
3 Average distribution ratio for the the foundation has been in existent			n line 2 by 5,	or by the number	of yea	rs		3	.364971
		·							1,835,378.
4 Enter the net value of noncharitab	ne-use ass	sets for 2009 from Part X, II	пе 5					4	
5 Multiply line 4 by line 3							-	5	669,860.
6 Enter 1% of net investment incom	ne (1% of	Part I, line 27b)	•					6	711.
7 Add lines 5 and 6								7	670,571.
8 Enter qualifying distributions from	Part XII,	line 4						8	220,250.
If line 8 is equal to or greater than		–							

	n 990-PF (2009) THE TOBIN FAMILY FOUNDATION		6420			Page 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see i	nstrı	ıctio	ns)
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1					
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🔛 and enter 1%	1			1,4	<u>21.</u>
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)					_
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	<u> </u>		1 4	$\frac{0}{2}$
	Add lines 1 and 2	3			1,4	<u> </u>
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	<u> </u>		1 4	0.
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	<u> </u>		1,4	<u> </u>
	Credits/Payments					
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1,012.	4				
	Exempt foreign organizations - tax withheld at source 6b	-				
	Tax paid with application for extension of time to file (Form 8868) 6c	-				
	Backup withholding erroneously withheld 6d	-			1 ^	1 2
	Total credits and payments Add lines 6a through 6d	7			1,0	12.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			A	2. 11.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			4	11.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be Credited to 2010 estimated tax	11	<u> </u>			
	rt VII-A Statements Regarding Activities				Vac	No
1 2	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven	e in		10	162	X
_	any political campaign? Did to accord more than \$100 during the way (attended to a reduce the) for california by the second control of the second control			1a 1b		X
U	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	~d ~=		עו		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published by the foundation is expected with the activities.	ea or				
	distributed by the foundation in connection with the activities			1 c	:	Х
	Did the foundation file Form 1120-POL for this year? Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			16		
u	(1) On the foundation \blacktriangleright \$ O . (2) On foundation managers \blacktriangleright \$ O .					
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	-				
-	managers > \$ 0.			!		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		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 instrument, articles of incorporation,	۸r				
Ü	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		Х
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		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 mandatory directions that conflict with the state.	e law				
	remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
	If "Yes," complete Part II, col (c), and Part XV.					,
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	PA					
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	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calc	endar	ĺ			
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	TMT	10	10	Х	

Х

4h Form 990-PF (2009)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

Form 990 ^t PF (2009) THE TOBIN FAMILY FOUNDAT			23-64200	13	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	nued)		
5a During the year did the foundation pay or incur any amount to		,			
· (1) Carry on propaganda, or otherwise attempt to influence legislation (section			es 🗴 No 📋		
(2) Influence the outcome of any specific public election (see section 4955),	or to carry on, directly or indii				
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purpose		Yı	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or				
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		in Regulations	27./2		
section 53 4945 or in a current notice regarding disaster assistance (see instr	•		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		_ /			
expenditure responsibility for the grant?		1/A Y	es L No		
If "Yes," attach the statement required by Regulations section 53 494					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			ł	
a personal benefit contract?		Yı	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		<u> </u>	6b	<u> </u>
If "Yes" to 6b, file Form 8870					
7a At any time during the tax year, was the foundation a party to a prohibited tax		Ye	es X No		-
b If yes, did the foundation receive any proceeds or have any net income attribu				7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	anagers, Higni	y 		
1 List all officers, directors, trustees, foundation managers and their	compensation.				
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Ex	pense it, other
(a) Name and address	to position	enter -0-)	compensation	allow	ances
SYLVAN M. TOBIN	TRUSTEE				
101 CHESWOLD LANE UNIT 5D	_		_		
HAVERFORD, PA 19041	0.00	0.	0.		0.
FRANCES E. TOBIN	SECRETARY				
101 CHESWOLD LANE UNIT 5D					•
HAVERFORD, PA 19041	0.00	0.	0.		<u> </u>
	1				
	1				
	4				
	1				
2 Compensation of five highest-paid employees (other than those inc	oluded on line 1). If none	enter "NONE "			
2 Compensation of five nighest-paid employees (other than those in	(b) Title, and average	enter NONE.	(d) Contributions to	(e) Fx	pense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	ассоип	it, other
NONE	devoted to position	 	compensation	allow	ances
NONE	-				
	†				
		 			 -
	†				
· · · · · · · · · · · · · · · · · · ·		 			
	†				
	1				
Total number of other employees paid over \$50,000		<u> </u>	>		0

Part VIII Information About Officers, Directors, Trustees, Foundar Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) 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 statist number of organizations and other beneficiaries served, conferences convened, research papers prod	uced, etc	Expenses
1 NOT APPLICABLE		
		_
		0.
2		
3		
		
4		
Down IV D. D. Land L.		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2	Amount
1 NONE	illes I aliu z	Allouit
1 NONE		
		0.
2		
2		
All other program-related investments. See instructions		
3		
U	170	
Total. Add lines 1 through 3	>	0.
Total Flod Inido 1 till obgil o	For	m 990-PF (2009)

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P	art X Minimum Investment Return (All domestic foundations mu	ust complete this pai	t Foreign four	ndations, s	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable,	etc purposes			
	Average monthly fair market value of securities		1a	1,733,548.	
	Average of monthly cash balances			16	1,733,548.
C	Fair market value of all other assets		İ	10	· · · · · · · · · · · · · · · · · · ·
d	Total (add lines 1a, b, and c)			1d	1,863,328.
е	Reduction claimed for blockage or other factors reported on lines 1a and				· · · · · · · · · · · · · · · · · · ·
		1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	1,863,328.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, s	ee instructions)		4	27,950.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on f	Part V, line 4		5	1,835,378.
6	Minimum investment return. Enter 5% of line 5			6	91,769.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and foreign organizations check here and do not complete this part)	(j)(5) private operating	foundations an	d certain	
1	Minimum investment return from Part X, line 6			1	91,769.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	1,421.		
b	Income tax for 2009 (This does not include the tax from Part VI)	2b			
C	Add lines 2a and 2b			2c	1,421.
3	Distributable amount before adjustments Subtract line 2c from line 1			3	1,421. 90,348.
4	Recoveries of amounts treated as qualifying distributions		į	4	0.
5	Add lines 3 and 4			5	90,348.
6	Deduction from distributable amount (see instructions)		1	6	0.
7_	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part X	III, line 1		7	90,348.
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	220,250.
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	ļ	2	
3	Amounts set aside for specific charitable projects that satisfy the		İ		
а	Suitability test (prior IRS approval required)			3a	
b	Cash distribution test (attach the required schedule)		1	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and	Part XIII, line 4	1	4	220,250.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investigation.	ment			_
	income Enter 1% of Part I, line 27b			5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4		Į	6	220,250.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years who	en calculation whether i	he foundation o	ualifies for t	he section

4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

				
	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI.	Corpus	16a15 phot to 2000	2000	2000
line 7				90,348.
2 Undistributed income, if any, as of the end of 2009	-!	The second second		-
a Enter amount for 2008 only			0.	
b Total for prior years				
	····	0.		,4-, ,
3 Excess distributions carryover, if any, to 2009				
a From 2004 137, 952.		,		,
b From 2005 225, 713.				·
210,959.				
d From 2007 e From 2008 213,045. 151,191.				
	938,860.			
f Total of lines 3a through e	930,000.			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶\$ 220, 250.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior	,	A- U U.L		, .
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	· · · · · · · · · · · · · · · · · · ·			
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount		· · · · · · · · · · · · · · · · · · ·	11 II II II II II II II II II II II II I	90,348.
e Remaining amount distributed out of corpus	129,902.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a)) 6 Enter the net total of each column as indicated below:				
İ	1,068,762.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract	1,000,.023			
line 4b from line 2b		0.		
c Enter the amount of prior years'	,			······································
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2008 Subtract line	,	·····		······································
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2009 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010		11 1444-4	,'	0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004	127 052			
not applied on line 5 or line 7	137,952.			
9 Excess distributions carryover to 2010.	020 010			
Subtract lines 7 and 8 from line 6a	930,810.			······································
ID Analysis of line 9	1			
a Excess from 2005 b Excess from 2006 225,713.	1			
b Excess from 2006 c Excess from 2007 213, 045.				
d Excess from 2008 151, 191.				
e Excess from 2009 129, 902.	1			
5 2.10000 Holling 2000 2207 702 61			· 1	

	IN FAMILY F			23-64	20013 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VI	l-A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter tha	t it is a private operating			
foundation, and the ruling is effective fo			▶	7	
b Check box to indicate whether the found		ng foundation described i		4942(j)(3) or49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	41,000	Prior 3 years	147,0000	(n) T -4-1
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for	}]]		
each year listed				<u> </u>	
b 85% of line 2a				<u> </u>	
c Qualifying distributions from Part XII,					
line 4 for each year listed				<u> </u>	
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5,000 or mo	re in assets
at any time during t					
1 Information Regarding Foundatio	n Managers:	 ;			
a List any managers of the foundation wh			ributions received by the	e foundation before the clos	e of any tax
year (but only if they have contributed m	iore than \$5,000) (See se	ection 507(d)(2))			
SYLVAN M. TOBIN					
b List any managers of the foundation who			or an equally large port	ion of the ownership of a pa	irtnership or
other entity) of which the foundation has	a 10% or greater interes	st			
NONE					
2 Information Regarding Contributi					
Check here ► X If the foundation o					
the foundation makes gifts, grants, etc. (ompiete items 2a, b, c, and	<u> </u>
a The name, address, and telephone numb	er of the person to whom	n applications should be	addressed		
b The form in which applications should b	a submitted and informat	ion and materials though	auld include		
The form in which applications should be	s submitted and informat	ion and materials they sin			
c Any submission deadlines					
d Any restrictions or limitations on awards	, such as by geographica	l areas, charitable fields,	kinds of institutions, or	other factors	
77201 02 02 10					Form 000 DE (0000)
923601 02-02-10					Form 990-PF (2009)

Part XV Supplementary Information	(continued)			
3 'Grants and Contributions Paid During the Ye	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	- Continuation	
a Paid during the year				
		,		
	•			
SEE STATEMENT 11				
Total	· · · · · · · · · · · · · · · · · · ·		▶ 3a	220,250.
b Approved for future payment				
NONE				
	•			
i				
•				
Total	-		▶ 3h	0.

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

Unrelated	business income		oy section 512, 513, or 514	(e)
(a)	(b)	(C) Exclu-	(d)	Related or exempt
Business	Amount	sion	Amount	function income
- 5555				
-				
-				
i				
		-		
_				
-				
-				
		 		
		14	41.047	
			5,372	
			3,0,0	
		-		
- 		-		
-		0.1	25.436	•
	·	 • • 	23, 1300	
		1.8	<1.671.>	
	 	+	11/0/11	
		- 		
				
-	 			
-				
- 				
_				
_ 		- - -	70 194	
		<i>y</i> •		50 10
			13	70,10
	Business code	Business Amount	(a) Business Amount (b) Exclusion code (c) Exclusio	(a) Business Amount (b) Exclusion code 14 41,047. 14 5,372. 01 25,436. 18 <1,671.>

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

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)						
	the realization of example purposes (error than of processing the error)						
923621 02-02-10	Form 990-PF (2009						

		OBIN FAM	ILY FOU	JNDATION		23-6	<u>420013</u>	Pa	ge 13
Part X		-	ensfers To	and Transactions	and Relati	ionships With None	charitable)	
	Exempt Organ		44 4 0					Yes	No
	ne organization directly or ind ode (other than section 501(c		=	-		n section 50 f(c) of	}	162	140
	sters from the reporting found		•		inizations				
(1) (• •	iation to a nonchar	itable exempt of	igamzation or			1a(1)		Х
	Other assets		-		•		1a(2)		X
	transactions		٠				10(2)		41
	Sales of assets to a noncharita	ahla ayamot orazai	rzation				16(1)		Х
	Purchases of assets from a no	. •	•				1b(2)		X
	Rental of facilities, equipment,	•	or organization				1b(3)		X
	Reimbursement arrangements						1b(4)		X
	oans or loan guarantees						1b(5)		Х
	Performance of services or me	embership or funda	raising solicitati	ons			1b(6)		Х
	ng of facilities, equipment, ma						1c		X
	answer to any of the above is				lways show the	e fair market value of the god	ds, other ass	ets,	
or se	rvices given by the reporting f	foundation If the fo	oundation receiv	ved less than fair market va	lue in any trans	action or sharing arrangeme	ent, show in		
colun	nn (d) the value of the goods,	other assets, or se	ervices received						
1) Line no	(b) Amount involved	(c) Name		le exempt organization	(d) Des	cnption of transfers, transactions	and shanng arr	angeme	nts
	<u>-</u>	<u></u>	N/A						
		<u> </u>							
				- 11292					
		<u> </u>		_ _					
		ļ							
	<u></u>								
			 						
	<u> </u>				- 				
									
				-	-				
									
					 				
2a lo tho	foundation directly or indirec	the affiliated with a	r rolated to one	o or mare tax avament areas	uzatione decori	had			
	tion 501(c) of the Code (othe	•			IIZALIOIIS UESCIII	Dea	Yes	ΓX] No
	s," complete the following sch		(c)(3)) or in sec	LION SET			162		3 140
u ii iç.	(a) Name of org			(b) Type of organization		(c) Description of relat	ionship		
	N/A	<u></u>		1					
	······································								
			-						
			-						
				-					
	enalties of perjury, I declare that I h						, it is true, correc	et,	
and con	nplete Declaration of preparer (other	er than tappayer or fid	uciary is based on	all information of which prepare	er has any knowled	10.			
	Trancel	EVA	ben	10/12/10	_	ruspeed			
Sig	gnature of officer or trustee	_ /		Date /	Title				
	Preparer's	op -	-(Date / /		eparer's identify		
, P is E		TOPHER M			10/11/10	employed >	POO 73	470	25
Paid parei		MCGLADRE			•	EIN ► 41-19	<u>144411</u>	م	
Paid Preparer's Use Only				SUITE 400					_
Щ	address, and ZIP code PHIL	ADELPHIA	, PA 19	103		Phone no 215	<u>5-765-4</u>	1600	0

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

OMB No 1545-0047

► Attach to Form 990, 990-EZ, or 990-PF.

Name of the organization		Employer identification number			
TI	HE TOBIN FAMILY FOUNDATION	23-6420013			
Organization type (check of	one):				
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF					
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
• -	is covered by the General Rule or a Special Rule.)(7), (8), or (10) organization can check boxes for both the General Rule and a Special F	ule See instructions.			
General Rule					
X For an organizatio contributor. Comp	n filing Form 990, 990·EZ, or 990·PF that received, during the year, \$5,000 or more (in rolete Parts I and II.	noney or property) from any one			
Special Rules	•				
509(a)(1) and 170(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the re (b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II				
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III					
contributions for u If this box is check purpose. Do not c	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one continuous exclusively for religious, charitable, etc., purposes, but these contributions did not a sed, enter here the total contributions that were received during the year for an exclusive omplete any of the parts unless the General Rule applies to this organization because e, etc., contributions of \$5,000 or more during the year.	ggregate to more than \$1,000. ely religious, charitable, etc.			
but it must answer "No" on	hat is not covered by the General Rule and/or the Special Rules does not file Schedule Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line ng requirements of Schedule B (Form 990, 990-EZ, or 990-PF).				
LHA For Privacy Act and for Form 990, 990-E	•	B (Form 990, 990-EZ, or 990-PF) (2009)			

Employer identification number

THE TOBIN FAMILY FOUNDATION

23-6420013

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	SYLVAN TOBIN 101 CHESWOLD LANE, UNIT 5D HAVERFORD, PA 19041	\$ 300,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Occupate Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
-		\$	Person Payroll Occash Complete Part II if there is a noncash contribution in
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

THE TOBIN FAMILY		23-644	20013 1	PAGE 1 OF 2
Part IV Capital Gains and Los	sses for Tax on Investment Income		T	
' (a) List and 2-story br	describe the kind(s) of property sold ick warehouse, or common stock, 20	l, e g , real estate, 10 shs MLC Co	(b) How acquired P - Purchase D - Donation	(c) Date acquired (d) Date sold (mo , day, yr)
1a BLACKROCK GLOB	AL FLOATING		P	02/07/0601/05/09
	WORLDWIDE REALTY	Y INCOME FUND	P	02/06/0601/05/09
c AMERICAN INTL			P	01/20/0410/02/09
d BANK OF AMER CO			P	02/18/03/10/02/09
e BRISTOL MYERS			P	02/18/03/10/02/09
f CISCO SYSTEMS	BQ01BB CO		P	06/21/5010/02/09
g COCA COLA CO			P	02/18/03/10/02/09
h DEVON ENERGY CO	ODD		P	02/18/05/10/02/09
DISCOVER FINANCE			P	02/18/03/10/02/09
			P	03/14/03/10/02/09
J EXXON MOBIL CO	KP		P	05/14/03/10/02/09
k GANNETT CO			P	02/18/03/10/02/09
GENL ELECTRIC (
m HEWLETT PACKAR	D CO		P	01/21/04/10/02/09
n KIMBERLY CLARK			P	01/20/04/10/02/09
0 MICROSOFT CORP			P	05/14/03 10/02/09
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		n) Gain or (loss) plus (f) minus (g)
a 100,023.		100,000.		23.
b 25,000.		25,000.		0.
c 78.		2,893.		<2,815.>
d 1,628.		3,518.		<1,890.>
e 3,117.		3,157.		<40.>
f 2,273.		2,039.		234.
4 210		3,337.	······································	873.
2 200		2,322.	·	878.
600		554.		136.
$\frac{1}{1}$ 6,568.		3,497.		3,071.
E 0.7		3,796.		<3,209.>
$\frac{k}{1}$ 2,170.		3,264.		<1,094.>
		3,268.		2,304.
m 5,572.		2,939.		<11.>
n 2,928.		2,617.	-	<129.>
0 2,488.				
(i) F M V as of 12/31/69	g gain in column (h) and owned by t (j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	Gains (excess	sses (from col. (h)) of col. (h) gain over col. (k), not less than "-0-")
	43 01 12/01/03	Over our (I), it dily		23.
<u>a</u>			<u></u>	0.
<u>b</u>				<2,815.>
<u>c</u>				<1,890.>
d				<1,890.>
<u>e</u>				234.
f				
- <u>g</u>				873.
h				878.
				136.
1				3,071.
k				<3,209.>
<u> </u>				<1,094.>
m				2,304.
n				<11.>
0				<129.>
2 Capital gain net income or (net cap	oital loss) { If gain, also enter If (loss), enter "-0-	in Part I, line 7 * in Part I, line 7	2	
3 Net short-term capital gain or (los: if gain, also enter in Part I, line 8, of (loss), enter "-0-" in Part I, line 8	s) as defined in sections 1222(5) and column (c)	` \	3	

Part IV Capital Gains and Loss	es for Tax on investment income	···			
(a) List and d	escribe the kind(s) of property sol k warehouse, or common stock, 2	d, e g , real estate, 00 shs MLC Co	D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
a MORGAN STANLEY	•		P	02/18/03	
PROCTER & GAMBL	E CO		P	03/21/05	10/02/09
C					·
d					
e					
f					
g					
n					
<u> </u>					
1					
·					
<u> </u>					
n					
1			1	-	
)	(6) December allowed	(a) Cook or other bosis	/h)	Courses (less)	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		Gain or (loss) lus (f) minus (g)	
2,676.	(or anomable)	2,807.	(5) p		<131.
2,827.		2,698.			129
2,021.		2,050.			127
					-
	·-				
		-11			
				·	
					
					
Complete only for assets showing	gain in column (h) and owned by	the foundation on 12/31/69	(I) Los	ses (from col (h))	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	Gains (excess of but n	of col (h) gain over ot less than "-0-")	col (k),
					<131.
					129.

	<u> </u>				
	r Ifaan also enter	in Part Lline 7			
Capital gain net income or (net capit	tal loss) { If gain, also enter if (loss), enter if (loss), enter if (loss).	-" in Part I, line 7			<1,671.
Net short-term capital gain or (loss)	as defined in sections 1222(5) an	, I			
If gain, also enter in Part I, line 8, co	lumn (c)	}		37/-	
If (loss), enter "-0-" in Part I, line 8		ノ 3		N/A	

FORM 990-PF INTEREST ON SAV	INGS AND TEN	IPORARY CASH	INVESTMENTS	STATEMENT	1
SOURCE				AMOUNT	
FIRSTRUST UBS UBS OID US TREASURY UBS US TREASURY				3,5 33,5 3,2 7	28.
TOTAL TO FORM 990-PF, PART I	, LINE 3, CO	DLUMN A		41,0	47.
FORM 990-PF DIVIDENI	OS AND INTER	REST FROM SEC	URITIES	STATEMENT	2
SOURCE	GROSS		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT)
DIVIDEND INCOME		5,372.	0.	5,3	72.
TOTAL TO FM 990-PF, PART I, I	LN 4	5,372.	0.	5,3	72.
FORM 990-PF	OTHER I	NCOME		STATEMENT	3
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME		
OTHER INCOME		25,436.	25,436	•	
TOTAL TO FORM 990-PF, PART I,	LINE 11	25,436.	25,436	•	
FORM 990-PF	TAX	ŒS		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
TAXES	648.	648	•		0.
TO FORM 990-PF, PG 1, LN 18	648.	648	•		0.

FORM .990-PF	OTHER EXPENSES				STATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
PA REGISTRATION	15. 150.		0.			0.
SERVICE FEES MISCELLANEOUS	2,586.		150.			0.
TO FORM 990-PF, PG 1, LN 23	2,751.		150.			0.
FORM 990-PF U.S. AND S	STATE/CITY G	OVERNMENT	OBL	GATIONS	STATEMENT	6
DESCRIPTION	U.S GOV'		вос	OK VALUE	FAIR MARKET VALUE	
US TSY 0.625% 4/15/13 FHLMC STEP UP BOND 2% 10/15/1	X X X			153,192. 100,000.	156,00 98,68	
TOTAL U.S. GOVERNMENT OBLIGAT	TIONS			253,192.	254,68	34.
TOTAL STATE AND MUNICIPAL GOV	ERNMENT OBL	IGATIONS				
TOTAL TO FORM 990-PF, PART II	I, LINE 10A			253,192.	254,68	34.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	7
DESCRIPTION			вос	OK VALUE	FAIR MARKET VALUE	ŗ
UBS SELECT PRIME INSTITUTIONA ISHARES TR S&P MID CAP 400 IN ISHARES TR S&P SMALL CAP 600	IDEX FUND -			305,686. 18,100.	305,68 19,55	
SHS		200		13,295.	14,22	
ISHARES MSCI EAFE INDEX FUND ISHARES MSCI EMERGING MKTS IN		225 SHS		34,417. 8,635.	35,93 9,33	
STANDARD & POORS DEP RCPTS UN - 725 SHS				74,750.	80,79	

FORM · 990-PF	CORPORATE BONDS		STATEMENT	8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	?
BANCO POPULAR 4.5% 9/19/11		95,000.	99,17	19.
CIT NK 4.15% 9/24/10		95,000.	97,16	i1.
DISCOVER BANK 4.0% 9/17/12		95,000.	100,26	
PREMIER BANK 4.0% 2/16/10		95,000.	95,33	
BK OF AMERICA 1.7% 10/15/10		100,000.	100,54	
AMER EXP BK 2.3% 4/8/11		100,000.	101,09	
CONESTOGA BK 2.25% 6/27/11		100,000.	100,96	
BNC NATL BK 3% 4/16/12 BNC NATL BK 3% 6/25/12		75,000. 100,000.	75,46 100,11	
CITIBANK 3.15% 10/7/14		100,000.	99,37	
TOTAL TO FORM 990-PF, PART II, L	INE 10C	955,000.	969,49	9.
FORM 990-PF	OTHER ASSETS		STATEMENT	9
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE	1
ACCRUD INTEREST	2,582.	0.		0.
PREPAID TAXES	, 1,540.	531.	53	
TO FORM 990-PF, PART II, LINE 15	4,122.	531.	53	1.

PO BOX 224523 DALLAS, TX

75222-4523

THE TOBIN FAMILY FOUND	DATION			3-642001
FORM · 990-PF L		STANTIAL CONTRIBUTORS VII-A, LINE 10	STAT	EMENT 1
NAME OF CONTRIBUTOR		ADDRESS		
SYLVAN TOBIN		101 CHESWOLD LANE, UI HAVERFORD, PA 19041	NIT 5D	
FORM 990-PF		AND CONTRIBUTIONS DURING THE YEAR	STAT	EMENT 1
RECIPIENT NAME AND ADDRI	ESS	RECIPIENT RELATIONSHI	P RECIPIENT STATUS	rnuoma
ABRAMSON CANCER CENTER OF P 3535 MARKET STREET, STE PHILADELPHIA, PA 19104		NONE GENERAL OPERATING	PUBLIC CHARITY	250
ABRAMSON CENTER FOR JEW 1425 HORSHAM RD NORTH 1 19454		NONE GENERAL OPERATING	PUBLIC CHARITY	500
ADULTS WITH DEVELOPMENTA DISABILITIES 261 OLD YORK RD, STE A-5 JENKINTOWN, PA 19046		NONE GENERAL OPERATING	PUBLIC CHARITY	1,000
ARUNA PARNERSHIP 32 HOLLOW OAK DR SUDBUI 01776	RY, MA	NONE GENERAL OPERATING	PUBLIC CHARITY	1,000
B'NAI B'RITH FOUNDATION 1420 WALNUT ST, #720 PHILADELPHIA, PA 19102		NONE GENERAL OPERATING	PUBLIC CHARITY	100
BREAST CANCER 3 DAY WALI	Κ	NONE	PUBLIC	200

GENERAL OPERATING

CHARITY

THE TOBIN FAMILY FOUNDATION			23-6420013
CCFA - CROHN'S & COLITIS FOUNDATION OF AMERICA 367 E. STREET ROAD TREVOSE, PA 19053	NONE GENERAL OPERATING	PUBLIC CHARITY	1,000.
CCTC - CHILDREN'S CRISIS TREATMENT CENTER 1823 CALLOWHILL ST PHILADELPHIA, PA 19130	NONE GENERAL OPERATING	PUBLIC CHARITY	14,250.
CHILDREN'S HOSPITAL FOUNDATION 34TH & CIVIC CENTER BLVD PHILADELPHIA, PA 19104	NONE GENERAL OPERATING	PUBLIC CHARITY	2,250.
COUNTY SHERIFFS OF COLORADO 9008 USHWY 85 N, UNIT C LITTLETON, CO 80125	NONE GENERAL OPERATING	PUBLIC CHARITY	50.
CURTIS INSTITUTE OF MUSIC 1726 LOCUST ST PHILADELPHIA, PA 19103	NONE GENERAL OPERATING	PUBLIC CHARITY	1,300.
DISABLED AMERICAN VETERANS PO BOX 14301 CINCINNATI, OH 45250	NONE GENERAL OPERATING	PUBLIC CHARITY	25.
ELIZABTH GLASER PEDIATRIC AIDS 2950 31ST ST, STE 125 SANTA MONICA, CA 90405	NONE GENERAL OPERATING	PUBLIC CHARITY	300.
FEDERATION EARLY LEARNING SERVICES 10700 JAMISON ST PHILADELPHIA, PA 19116	NONE GENERAL OPERATING	PUBLIC CHARITY	750.
GALLERIES AT MOORE 20TH ST. & THE PARKWAY PHILADELPHIA, PA 19103	NONE GENERAL OPERATING	PUBLIC CHARITY	250.
GEOFFREY DANIELS 7 EAST FOURTH ST BETHLEHEM, PA 18015	NONE GENERAL OPERATING	PUBLIC CHARITY	10,000.

THE TOBIN FAMILY FOUNDATION			23-6420013
HAR ZION·TEMPLE 1500·HAGYS FORD RD PENN VALLEY, PA 19072	NONE GENERAL OPERATING	PUBLIC CHARITY	6,460.
INGIS FOUNDATION 2600 BELMONT AVE PHILADELPHIA, PA 19131	NONE GENERAL OPERATING	PUBLIC CHARITY	1,000.
JEWISH FAMILY SERVICES 299 WATERMAN ST PROVIDENCE, RI 02906	NONE GENERAL OPERATING	PUBLIC CHARITY	500.
JEWISH FEDERATION OF GREATER PHILA 2100 ARCH STREET PHILADELPHIA, PA 19103	NONE GENERAL OPERATING	PUBLIC CHARITY	125,000.
JEWISH THEOLOGICAL SEMINARY 3080 BROADWAY NEW YORK, NY 10027	NONE GENERAL OPERATING	PUBLIC CHARITY	15,000.
LONGPORT PBA LOCAL 363 2305 LONGPORT AVE LONGPORT, NJ	NONE GENERAL OPERATING	PUBLIC CHARITY	25.
LONGPORT VOL AMBULANCE SQUAD 467 WHITE HORSE PIKE ABSECON, NJ 08201	NONE GENERAL OPERATING	PUBLIC CHARITY	40.
LOWER MERION FOP 75 EAST LANCASTER AVE ARDMORE, PA 19003	NONE GENERAL OPERATING	PUBLIC CHARITY	20.
MATERNITY CARE COALITION 2000 HAMILTON ST, STE 205 PHILADELPHIA, PA 19130	NONE GENERAL OPERATING	PUBLIC CHARITY	100.
MID ATLANTIC BLIND GOLFERS ASSOC C/O GREEN VALLEY COUNTRY CLUB 201 N RIDGE PIKE LAFAYETTE HILL, PA 19444	NONE GENERAL OPERATING	PUBLIC CHARITY	100.

THE TOBIN FAMILY FOUNDATION			23-6420013
MOSS REHAB 60 TOWNSHIP LINE RD ELKINS PARK, PA 19027	NONE GENERAL OPERATING	PUBLIC CHARITY	600.
MOUNT SINAI SCHOOL OF MEDICINE 1 GUSTAVE L LEVY PLACE NEW YORK, NY 10029	NONE GENERAL OPERATING	PUBLIC CHARITY	250.
NATIONAL LIBERTY MUSEUM 321 CHESTNUT ST PHILADELPHIA, PA 191006	NONE GENERAL OPERATING	PUBLIC CHARITY	1,000.
NJN PO BOX 18567 NEWARK, NJ 07191	NONE GENERAL OPERATING	PUBLIC CHARITY	40.
NOHR 225 HAVERFORD AVE NARBERTH, PA 19072	NONE GENERAL OPERATING	PUBLIC CHARITY	250.
OXFAM AMERICAN 26 WEST ST BOSTON, MA 02111	NONE GENERAL OPERATING	PUBLIC CHARITY	200.
PARKINSON'S COUNCIL 111 PRESIDENTIAL BLVD, STE 250 BALA CYNWYD, PA 19004	NONE GENERAL OPERATING	PUBLIC CHARITY	1,000.
PENNSYLVANIA GAZETTE 3910 CHESTNUT STREET, 3RD FL PHILADELPHIA, PA 19104	NONE GENERAL OPERATING	PUBLIC CHARITY	25.
PERELMAN JEWISH DAY SCHOOL 49 HAVERFORD RD WYNNEWOOD, PA 19096	NONE GENERAL OPERATING	PUBLIC CHARITY	500.
PHILADELPHIA MUSEUM OF ART PO BOX 7646 PHILADELPHIA, PA 19101	NONE GENERAL OPERATING	PUBLIC CHARITY	1,500.

THE TOBIN FAMILY FOUNDATION			23-6420013
PMA CRAFT SHOW PO BOX 7646 PHILADELPHIA, PA 19101	NONE GENERAL OPERATING	PUBLIC CHARITY	1,500.
PROJECT HOME 1515 FAIRMOUNT AVE PHILADELPHIA, PA 19130	NONE GENERAL OPERATING	PUBLIC CHARITY	500.
SIGMA ALPHA MU FOUNDATION 9245 N MERIDIAN, STE 105 INDIANAPOLIS, IN 46260	NONE GENERAL OPERATING	PUBLIC CHARITY	125.
SMITHSONIAN INSTITUTE PO BOX 9016 PITTSFIELD, MA 01202-9016	NONE GENERAL OPERATING	PUBLIC CHARITY	250.
SPRING LAKE RANCH CUTTINGSVILLE, VT 05738	NONE GENERAL OPERATING	PUBLIC CHARITY	1,000.
THE FRANKLIN INSTITIUTE 21ST ST & THE PARKWAY PHILADELPHIA, PA 19103	NONE GENERAL OPERATING	PUBLIC CHARITY	1,000.
THE GORDON SCHOOL 45 MAXFIELD AVE EAST PROVIDENCE, RI 02914	NONE GENERAL OPERATING	PUBLIC CHARITY	1,000.
THE MAIN IDEA PO BOX 4465 CHARLOTTESVILLE, VA 22905	NONE GENERAL OPERATING	PUBLIC CHARITY	250.
THE WHEELER SCHOOL 216 HOPE ST PROVIDENCE, RI 02906	NONE GENERAL OPERATING	PUBLIC CHARITY	900.
THE WOLF SCHOOL 215 FERRIS AVE RUMFORD, RI 02916	NONE GENERAL OPERATING	PUBLIC CHARITY	300.

THE TOBIN FAMILY FOUNDATION			23-6420013
USOC NATIONAL PROCESSING CENTER, PO BOX 7010 ALBERT LEA, MN 56007	NONE GENERAL OPERATING	PUBLIC CHARITY	100.
VOLUNTEER MEDICAL SERVICE CORPS 175 MEDICAL CAMPUS DRIVE LANSDALE, PA 19446	NONE GENERAL OPERATING	PUBLIC CHARITY	40.
WHITE WILLIAMS SCHOLAR 215 S BROAD ST, 10TH FL PHILADELPHIA, PA 19107	NONE GENERAL OPERATING	PUBLIC CHARITY	250.
WILLIAM PENN CHARTER SCHOOL 3000 WEST SCHOLL HOUSE LANE PHILADELPHIA, PA 19144	NONE GENERAL OPERATING	PUBLIC CHARITY	200.
WISTAR INSTITUTE 3601 SPRUCE ST, STE 242 PHILADELPHIA, PA 19104	NONE GENERAL OPERATING	PUBLIC CHARITY	25,400.
WOMEN CENTER OF RHODE ISLAND PO BOX 603300 PROVIDENCE, RI 02906		PUBLIC CHARITY	600.
TOTAL TO FORM 990-PF, PART XV, L	INE 3A		220,250.

Form **8868**(Rev April 2009) Department of the Treasury

Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

OMB No 1545-1709

• If y	ou are	filing for an Automatic 3-Month Extension, con filing for an Additional (Not Automatic) 3-Month Dete Part II unless you have already been granted	h Extension, complete only Part II	(on page 2	of this form)	
Par		Automatic 3-Month Extension of Time. Or			<u> </u>	
	rporatio I only .	n required to file Form 990-T and requesting an	automatic 6-month extension—chec			e . ▶ []
		porations (including 1120-C filers), partnerships, ncome tax returns.	REMICs, and trusts must use Form	7004 to req	uest an ext	∍nsıon of
one elect retur	of the r ronically ns, or a	iling (e-file). Generally, you can electronically file eturns noted below (6 months for a corporation or if (1) you want the additional (not automatic) 3- composite or consolidated Form 990-T. Instead, your pre details on the electronic filing of this form, visit	required to file Form 990-T). Howe month extension or (2) you file Form ou must submit the fully completed a	ever, you cans ns 990-BL, 6 nd signed pa	innot file Fo 6069, or 887 age 2 (Part II)	rm 8868 '0, group) of Form
Type	or	Name of Exempt Organization		Employer	nployer identification number	
print		THE TOBIN FAMILY FOUNDATION		23-6420	013	
File by due da filing y	ate for	Number, street, and room or suite no If a PO box, 101 CHESWOLD LANE #5D	see instructions			
retum	See	City, town or post office, state, and ZIP code. For a	foreign address, see instructions			
mou ac	,110113	HAVERFORD, PA 19041-1867	-			
□ F □ F □ F	orm 990 orm 990 orm 990 orm 990	of return to be filed (file a separate application of possible programme) Form 990-T (sec of possible programme) D-BL	ooration) 401(a) or 408(a) trust)		Form 4720 Form 5227 Form 6069 Form 8870	-
If tIf tfor th	he orga his is fo ne whole	No. ▶ 610-828-8400 (X-2261) nization does not have an office or place of busing a Group Return, enter the organization's four diegroup, check this box ▶ □ . If it is for a names and EINs of all members the extension	ness in the United States, check this igit Group Exemption Number (GEN) r part of the group, check this box	s box	 If this	► □
1	I requeuntil	est an automatic 3-month (6 months for a AUGUST 16 , 20 10 , to file the exempt or organization's return for calendar year 20 09 or tax year beginning	corporation required to file Foganization	named abo	ve. The exte	ension is
2	If this to	ax year is for less than 12 months, check reason	: 🔲 Initial return 🔲 Fınal return 🛭	☐ Change	in accountin	ig period
		pplication is for Form 990-BL, 990-PF, 990-T, 4 proprietable credits. See instructions.	720, or 6069, enter the tentative ta	х,	\$	0.00
b	If this a	pplication is for Form 990-PF or 990-T, enter any		3b	\$	
С	Balanc deposit	e Due. Subtract line 3b from line 3a. Include your with FTD coupon or, if required, by using EFI). See instructions.	payment with this form, or, if required	d, nt	\$	0.00
		ou are going to make an electronic fund withdraw	al with this Form 8868, see Form 84		Form 8879-	EO

	4
Page	

Note. C	u are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and Only complete Part II if you have already been granted an automatic 3-month extension on a previou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).		
Part		o copies n	eeded)
Type o	INC. GOVERN		tification number
print	[7] 经经济股份 [6] [6] [6] [6] [6] [6] [6] [6] [6] [6]	-6420013	
File by th	The contract of the contract o	r IRS use on	
extended	101 CUESTIOLD LAND 45D		•••
due date filing the	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	21222	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
return. So Instructio			
	type of return to be filed (File a separate application for each return):	No. AND ENGINEER	The state of the s
☐ For		□ 50	rm 6069
	m 990-BL		
		∟ F0	rm 8870
			#I-1 F 0000
	Do not complete Part II if you were not already granted an automatic 3-month extension on a	previously	filed Form 8868.
	pooks are in the care of ► SYLVAN TOBIN		
Telep	hone No. ► 610-828-8400 (X-2261) FAX No. ►		
If the	organization does not have an office or place of business in the United States, check this box	·	▶ 🏻
lf 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	▶ 🔲 a	nd attach a
ist with	the names and EINs of all members the extension is for.		
4 I r	request an additional 3-month extension of time until NOVEMBER 15 , 20	10	
5 Fc	or calendar year 2009, or other tax year beginning , 20, and ending		. 20 .
6 If	this tax year is for less than 12 months, check reason: Initial return Final return C	Change in a	accounting period
	tate in detail why you need the extension	g	9 F
	DDITIONAL TIME IS NEEDED TO FILE A COMPLETE AND ACCURATE RETURN.		
8a If	this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,		
	ss any nonrefundable credits. See instructions.	8a \$	0.00
	this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and		
	stimated tax payments made. Include any prior year overpayment allowed as a credit and any		
	nount paid previously with Form 8868.	8b \$	0.00
_		1 30 3	
	alance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit th FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c \$	0.00
441		1 00 14	
Inder ne	Signature and Verification nalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the	a bact of my k	nowledge and helief
t is true,	correct, and complete_and that I am authorized to prepare this form, 7	best of my k	/ /
			_/ /
31	Let all all the		5/6/20m
Signature	Title >	Date ▶	1 1 2
		Form	8868 (Rev 4-2009)