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Department of the Treasury

Return of Private Foundation

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

OMB No 1545-0052

inter	nai Ke	venue Service Note. The foundation may	be able to use a copy of this	return to satisfy state repo	tung requirements.	_
For	cale	ndar year 2009, or tax year beginning		, and ending		
G	Check	all that apply: Initial return	Initial return of a fo	ormer public charity	Fınal retur	n
		Amended return	Address chan	ge	Name change	
lle	e the	IRS Name of foundation			A Employer identificatio	n number
00	label				ĺ	
Ot	herwi		LY FOUNDATIO	N, INC	52-2135652	2
	print	Number and street (or P O box number if mail is not de	elivered to street address)	Room/suite	B Telephone number	
(r typ	4212 DRESDEN STREET			3019331248	3
	Spe	cific City or town, state, and ZIP code			C If exemption application is	
Ins	tructi	KENSINGTON, MD 20895			D 1. Foreign organization	·
н	Check	type of organization: X Section 501(c)(3) ex			Foreign organizations m check here and attach c	eeting the 85% test,
Ï-	_		Other taxable private founda	ntion		
		arket value of all assets at end of year J Accounting		Accrual	E If private foundation sta under section 507(b)(1	Atus was terminated
		· 	her (specify)		1	
	-\$	670 , 352 . (Part I, colu		basis.)	F If the foundation is in a under section 507(b)(1	
_	art I					(d) Disbursements
	arti	(The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes
_		necessarily equal the amounts in column (a))			N/A	(cash basis only)
	1	Contributions, gifts, grants, etc., received	0.		IN/A	-
	2	Check \[\bigset \bigs	126.	126.		CMAMENTER 1
	3					STATEMENT 1
	4	Dividends and interest from securities	12,631.	12,631.	ļ	STATEMENT 2
	1	Gross rents	<u> </u>		 	
	b	Net rental income or (loss)	060 460		 	
<u>a</u>	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	260,462.	· <u>·</u>		
e E	b	Gross sales price for all assets on line 6a 267,328.		060 460		
Revenue	7	Capital gain net income (from Part IV, line 2)		260,462.		
	8	Net short-term capital gain				
	9	Income modifications Gross sales less returns		·	RECEIV	
2	10a	and allowances		· · · · · · · · · · · · · · · · · · ·		
)	b	Less Cost of goods sold			10	8
	C	Gross profit or (loss)			JUN 1 4	010
•	11	Other income				
j	12	Total, Add lines 1 through 11	273,219.	273,219.	OGDEN.	UT
_	13	Compensation of officers, directors, trustees, etc	0.	0.	to make the same	0.
=	14	Other employee salaries and wages				
.	15	Pension plans, employee benefits			<u>., , ,</u> ,	
Sés	16a	Legal fees				
ว อี	b	Accounting fees				
	c	Other professional fees				<u> </u>
<u>.</u> <u>≷</u>	17	Interest		<u>-</u>		
Operating and Administrative	18	Taxes STMT 3	105.	105.		0.
nist	19	Depreciation and depletion				
Ē	20	Occupancy				<u> </u>
PΑ	21	Travel, conferences, and meetings				
Ĭ	22	Printing and publications				
9	23	Other expenses STMT 4	72.	0.		0.
atir	24	Total operating and administrative				
ě	l	expenses. Add lines 13 through 23	177.	105.		0.
Õ	25	Contributions, gifts, grants paid	130,000.			130,000.
	1	Total expenses and disbursements.				
		Add lines 24 and 25	130,177.	105.		130,000.
	27	Subtract line 26 from line 12:				
	ì	Excess of revenue over expenses and disbursements	143,042.			}
	1	Net investment income (if negative, enter -0-)		273,114.		
	J	Adjusted net income (if negative, enter -0-)			N/A	
9235 02-0	01 2-10	LHA For Privacy Act and Paperwork Reduction	Act Notice, see the instruct	ions.	· · · · · · · · · · · · · · · · · · ·	Form 990-PF (2009)

923511 02-02-10

2009.03051 THE OTTO/WHALLEY FAMILY FOU 24679__1

4

902,433.

5 Decreases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

4 Add lines 1, 2, and 3

(a) List and desc 2-story brick w	ribe the kind(s) of property sold (e arehouse; or common stock, 200 s	.g., real estate, hs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquire (mo., day, yr.	
1a 10,300 SHRS LE	GG MASON INC			P	VARIOUS	VARIOUS
<u>b</u>						
<u>c</u>						
d e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale		(h) Gain or (e) plus (f) mi	
a 267,328.			6,86	5.		260,462
<u>b</u>						
d				- 		
e						
	ng gain in column (h) and owned b	y the foundation	on 12/31/69		I) Gains (Col. (h)	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any	co	l. (k), but not less Losses (from	col. (h))
<u>a</u>						260,462
<u>b</u>	1					
d		 	 	 		
e				 	·	
2 Capital gain net income or (net ca		er in Part I, line 0- in Part I, line		} 2		260,462
3 Net short-term capital gain or (los						
If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8	column (c).	, ,	r <u> </u>	} 3	N	/A
Part V Qualification U					come	
(For optional use by domestic private	e foundations subject to the section	1 4940(a) tax on	net investment inc	ome.)		
If section 4940(d)(2) applies, leave t	his part blank.					
Was the foundation liable for the sec	tion 4942 tax on the distributable a	mount of any ye	ear in the base perio	od?		Yes X No
If "Yes," the foundation does not qua						
1 Enter the appropriate amount in	each column for each year; see ins	tructions before	making any entries			
Base periód years	ng in) Adjusted qualifying d	stributions	Net value of non	(c) charitable-use assets	Cool (t	(d) istribution ratio) divided by col. (c))
Calendar year (or tax year beginni 2008	<u> </u>	62,500.		946,791	(00: (2	.066012
2007		85,000.		1,708,97		.049737
2006	1	95,000.		1,970,692		.098950
2005		61,730.		1,845,598		.141813
2004	1:	<u>91,014.</u>		1,293,312	2.	.147694
2 Total of line 1, column (d)		l - 1 0 b - 5		£	2	.504206
3 Average distribution ratio for the the foundation has been in existe		i on line 2 by 5,	or by the number o	n years	3	.100841
4 Enter the net value of noncharitat	ole-use assets for 2009 from Part X	, line 5			4	574,591
5 Multiply line 4 by line 3					5	57,942
6 Enter 1% of net investment incon	ne (1% of Part I, line 27b)				6	2,731.
7 Add lines 5 and 6					7	60,673.
8 Enter qualifying distributions from	n Part XII, line 4				8	130,000
If line 8 is equal to or greater than	line 7, check the box in Part VI, lin	e 1b, and comp	lete that part using	a 1% tax rate.		

	990-PF (2009) THE OTTO/WHALLEY FAMILY FOUNDATION, INC 52-213! rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see			Page 4
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter:			
h	Domestic foundations that meet the section 4940(e) requirements in Part V, check here		2.7	31.
Ü	of Part I, line 27b		<u> </u>	<u> </u>
c	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-)			0.
3	Add lines 1 and 2		2,7	31.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		2,7	31.
6	Credits/Payments:			
a	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1,288.			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
đ	Backup withholding erroneously withheld 6d			
7	Total credits and payments. Add lines 6a through 6d		<u>1,2</u>	88.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 6 9		<u>1,4</u>	<u>43.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be: Credited to 2010 estimated tax			
	rt VII-A Statements Regarding Activities	 -	V	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	<u> </u>	Yes	
	any political campaign?	1a	<u> </u>	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b	 -	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or		i	!
_	distributed by the foundation in connection with the activities	1.		x
	Did the foundation file Form 1120-POL for this year? Enter the amount (if any) of tay on political expenditures (control 4055) imposed during the year?	1c		
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$\infty\$ \$ 0 \cdot (2) On foundation managers. \$\infty\$ \$ 0 \cdot\$	İ	ĺ	
_	(1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0. Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
e	managers. > \$	Ì	1	
9	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.	<u> </u>	 	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		ŀ	}
•	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	<u> </u>	Х
	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.		ļ	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		ĺ	}
	By language in the governing instrument, or		1	ļ
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law		l	ļ
	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	<u> </u>
	If "Yes," complete Part II, col. (c), and Part XV.			ļ
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) MD			
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	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	}	1	
	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	10	<u></u>	X
	Foi	m 990	-PF ((2009)

923531 02-02-10

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

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

b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

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

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

Form 4720, to determine if the foundation had excess business holdings in 2009.)

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

during the year?

14340521 745960 24679

Yes X No

N/A

3b

4a

Form **990-PF** (2009)

X

Form 990-PF (2009) THE OTTO/WHALLEY FAMILY Part VII-B Statements Regarding Activities for Which			52-21356	52 Page 6
5a During the year did the foundation pay or incur any amount to:	101111 4720 May Be 1	required (contin	ided)	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	on 4945(e))?	Y	es X No	1 1
(2) Influence the outcome of any specific public election (see section 4955);		ectly,		-
any voter registration drive?		Y	es X No	
(3) Provide a grant to an individual for travel, study, or other similar purpose	es?	Y	es 🗓 No	1 1
(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)?		Y	es 🗓 No	1 1
(5) Provide for any purpose other than religious, charitable, scientific, literary	y, or educational purposes, or			
the prevention of cruelty to children or animals?		Y	es 🗓 No	1 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u	nder the exceptions described	ın Regulations	l	1 1
section 53.4945 or in a current notice regarding disaster assistance (see insti	ructions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check	here			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption				
expenditure responsibility for the grant?		I/A L Y	es L No	1 1
If "Yes," attach the statement required by Regulations section 53.49-				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Y	es X No	.
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		<u> </u>	Sb X
If "Yes" to 6b, file Form 8870.		г 	F== 1	
7a At any time during the tax year, was the foundation a party to a prohibited tax		Y ₍	es X No	
b If yes, did the foundation receive any proceeds or have any net income attribu		nagara Highl		7b
Part VIII Information About Officers, Directors, Trus Paid Employees, and Contractors	lees, roundation wie	magers, mgm	у	
1 List all officers, directors, trustees, foundation managers and their	r compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
HENRY OTTO	PRESIDENT/DIR			
4212 DRESDEN STREET	7	T	[
KENSINGTON, MD 20895	1.00	0.	0.	0.
JUDY F WHALLEY	SEC/TREAS/DIR			
4212 DRESDEN STREET				
KENSINGTON, MD 20895	5.00	0.	0.	0.
MATTHEW STAGNER	_VICE PRES/DIR	ECTOR		
332 N. SCOVILLE STREET	<u> </u>		1	
OAK PARK, IL 60302	1.00	0.	0.	0.
	_			
	aludad an line d) Manne	ambar IINIONE II	<u> </u>	
2 Compensation of five highest-paid employees (other than those in	(b) Title, and average	enter "NONE."	(d) Contributions to	(a) Eynansa
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
NAME	devoted to position		compensation	allowances
NONE	-		ĺ	
		 	 	
	-]	
	 	 	 	
	-		j l	
	 	 		
	1]	
	7			
Total number of other employees paid over \$50,000				0
			Form 9	90-PF (2009)

923551 02-02-10

Total. Add lines 1 through 3

Form **990-PF** (2009)

P	Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign	foundations, sec	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a		1a	511,920.
b		1b	71,421.
C		10	
d	Total (add lines 1a, b, and c)	1d	583,341.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
		0.	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	583,341.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	8,750.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	574,591.
6	Minimum investment return. Enter 5% of line 5	6	28,730.
P	part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation foreign organizations check here and do not complete this part.)	s and certain	
1	Minimum investment return from Part X, line 6	1	28,730.
2a	Tax on investment income for 2009 from Part VI, line 5	1.	
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	2,731.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	25,999.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	25,999.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	25,999.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	130,000.
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:	, ,	
а	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	130,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	<u>2,731.</u>
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	127,269.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	on qualifies for the	e section

Form **990-PF** (2009)

4940(e) reduction of tax in those years.

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,	<u> </u>			
line 7				25,999.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:				
,		0.		
3 Excess distributions carryover, if any, to 2009:	-			
a From 2004 128,320.				
b From 2005 173,990.				
c From 2006 99,251.				
d From 2007 41.				
e From 2008 15,482.				
f Total of lines 3a through e	417,084.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ► \$ 130,000.			_	
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			05.000
d Applied to 2009 distributable amount	404 004			25,999.
e Remaining amount distributed out of corpus	104,001.			
5 Excess distributions carryover applied to 2009 (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:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	521,085.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously			:	
assessed		0.		
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions				
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				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				
not applied on line 5 or line 7	128,320.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	392,765.			
IO Analysis of line 9;				
a Excess from 2005 173,990.				
b Excess from 2006 99,251.				
c Excess from 2007 41.				
d Excess from 2008 15,482.				
e Excess from 2009 104,001.	<u>.</u>			5 000 DE (0000)

Form **990-PF** (2009)

Part XIV Private Operating F		AMILY FOUND			135652 Page 10
			i-A, question 9)	N/A	· · · · · · · · · · · · · · · · · · ·
1 a If the foundation has received a ruling o		• • •	.		
foundation, and the ruling is effective fo		•		40.40(.)(0)	0.40(-)(5)
b Check box to indicate whether the found		ng toundation described		4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2009	(b) 2008	Prior 3 years (c) 2007	(d) 2006	(e) Total
income from Part I or the minimum	(a) 2003	(0) 2000	(6) 2007	(u) 2000	(e) Iotai
investment return from Part X for					
each year listed			 		
b 85% of line 2a					
c Qualifying distributions from Part XII,	II				
line 4 for each year listed d Amounts included in line 2c not		 	 		
used directly for active conduct of					
exempt activities		}	Ì		}
e Qualifying distributions made directly					
for active conduct of exempt activities.			(
Subtract line 2d from line 2c			1		Ì
3 Complete 3a, b, or c for the					
alternative test relied upon:			Ì		}
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					1
2/3 of minimum investment return			İ		
shown in Part X, line 6 for each year listed		ļ			
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)			Í		
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	on had \$5,000 or m	ore in assets
at any time during t	he year-see the i	instructions.)			<u> </u>
1 Information Regarding Foundatio	•				
a List any managers of the foundation who			ributions received by	the foundation before the clo	se of any tax
year (but only if they have contributed m	iore than \$5,000). (See s	ection 507(d)(2).)			
HENRY OTTO			 		
 List any managers of the foundation who other entity) of which the foundation has 			or an equally large po	ortion of the ownership of a p	artnership or
• •	a 1070 of greater interes	5 1.			
NONE 2 Information Regarding Contributi	an Crant Cift Laga	Cabalanahin ata Di			
2 Information Regarding Contributi Check here ► X if the foundation of		• •	_	as not accept upsolicited regi	agete for funde. If
the foundation makes gifts, grants, etc. (•	•	-		
a The name, address, and telephone numb				,	
a The name, address, and telephone numb	oei of the person to who	ii applications sticale oc	audi coscu.		
b The form in which applications should b	e submitted and informat	tion and materials they st	nould include;		
c Any submission deadlines:					
d Any restrictions or limitations on awards	, such as by geographica	al areas, charitable fields.	kinds of institutions.	or other factors:	
			-,		
					
					000 DE

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) or substantial contributor a Paid during the year SEE STATEMENT 9 130,000. **▶** 3a Total **b** Approved for future payment NONE 0. Total

923611 02-02-10

Form 990-PF (2009) THE OTTO/WHALL	EY FAMIL	Y FOUNDAT	ION, IN	<u> 52-2</u>	135652 Page 1
Part XVI-A Analysis of Income-Produ	icing Activitie	es			
Enter gross amounts unless otherwise indicated.		ousiness income		y section 512, 513, or 514	(e)
1 Program service revenue:	Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income
ab	-				
b			 - -		
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments			 		
3 Interest on savings and temporary cash			14	126	
Investments 4 Dividends and interest from securities			14	126.	
5 Net rental income or (loss) from real estate:			14	14,631.	
a Debt-financed property					
b Not debt-financed property	 				
6 Net rental income or (loss) from personal				·	-
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	260,462.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					· · · · · · · · · · · · · · · · · · ·
1 Other revenue:					
<u> </u>					
b	·				
C	1 1		- 		
G	· -				
12 Subtotal. Add columns (b), (d), and (e)).	273,219.	0
13 Total. Add line 12, columns (b), (d), and (e)				13	273,219
See worksheet in line 13 instructions to verify calculations.)					2,0,7245
Part XVI-B Relationship of Activities	to the Accon	plishment of	Exempt Pu	ırposes	
				<u> </u>	lighment of
Explain below how each activity for which income the foundation's exempt purposes (other than				importantly to the accomp	iisiiiieiit oi
	, , p. 61.12	,,			

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Form **990-PF** (2009)

923621 02-02-10

Form 990-PF (2009) THE OTTO/WHALLEY FAMILY FOUNDATION, INC 52-2135652 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1	Did 1	he organization directly or indi	rectly engage in any of the followir	ng with any other organiza	ation described in se	ction 501(c) of		Yes	No
	the (Code (other than section 501(c))(3) organizations) or in section 52	27, relating to political org	janizations?				
	a Tran	sfers from the reporting founda	ation to a noncharitable exempt or	ganization of:					
	(1)	Cash					1a(1)		<u> </u>
	(2)	Other assets					1a(2)		<u> </u>
	b Othe	r transactions:							-
		Sales of assets to a noncharital	ble exempt organization				1b(1)		\mathbf{x}_{-}
			ncharitable exempt organization				1b(2)		X
		Rental of facilities, equipment,	· -				1b(3)		X
	٠,	Reimbursement arrangements							X
	٠.	•					1b(4)		
		Loans or loan guarantees					1b(5)		X
			mbership or fundraising solicitation				1b(6)	-	<u>X</u>
			iling lists, other assets, or paid em				1 <u>c</u>		X
			"Yes," complete the following sche	• •				ets,	
			oundation. If the foundation receiv		alue in any transactio	on or sharing arrangeme	ent, show in		
_	colu		other assets, or services received.						
a	Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Descripti	on of transfers, transactions,	and sharing arr	angeme	nts
			N/A						
								-	
_		 		 		· · · · · · · · · · · · · · · · · · ·			
		 	 						
			 						
		 	 						
					 -				
		 	<u> </u>						
		<u></u>	 						
			<u> </u>						
			<u></u>						
					T =				
2	ı İs th	e foundation directly or indirect	lly affiliated with, or related to, one	or more tax-exempt orga	nizations described				
			than section 501(c)(3)) or in sect				Yes	X	l No
		s," complete the following sche	, , , , ,						,
_	<u>,, , , , , , , , , , , , , , , , ,</u>	(a) Name of orga		(b) Type of organization	1	(c) Description of relat	ionship		
		N/A		(-) ()	-	(-,			
		M/A							
									
					 				
					<u> </u>				
			ave examined this return, including acco r than taxpayer or fiduciary) is based on			of my knowledge and belief,	it is true, correc	ct,	
		(b.d. 1)	160/11		,				
	N -	Juny W	namy						
<u>=</u>	S	ignature of officer or trustee	, 0	Date 6/8/10		reasurer			
		Preparer's	1/1/1/1/1	10.		heck if Pro	eparer's identify	ing numi	ber
ğ	_ % ≥	signature 🖊 🛂 🗸	LUE WILKE	· y1	1/14/11 8	mployed 🕨 🔲			
•	Paid Preparer's Use Only	Firm's name (or yours GELM	AN, ROSENBERG &	FREEDMAN		EIN ►			
	T P	rf self-employed), 4550	MONTGOMERY AVE		0 NORTH				
	_ م	address, and ZIP code BETH		20814-2930		Phone no. (30	01) 95	1-90	090
						, 301	Form 990		
								(*	-5001

FORM 990-PF INTEREST ON SAVI	NGS AND I	EMPORARY	CASH II	NVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
					1	26.
TOTAL TO FORM 990-PF, PART I,	LINE 3,	COLUMN A			1	26.
FORM 990-PF DIVIDEND	S AND INT	EREST FRO	M SECUI	RITIES	STATEMENT	2
SOURCE	GRO	SS AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT)
CITIBANK/SMITHBARNEY VANGUARD INTL MKT INDEX VANGUARD STK MKT INDEX		8,571 1,763 2,297	•	0. 0. 0.	8,5 1,7 2,2	63.
TOTAL TO FM 990-PF, PART I, L	N 4	12,631	· -	0.	12,6	31.
FORM 990-PF	Т	'AXES			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOK		VEST-	(C) ADJUSTED NET INCOM		
FOREIGN TAXES	10	5.	105.			0.
TO FORM 990-PF, PG 1, LN 18 =	10	5.	105.			0.
FORM 990-PF	OTHER	EXPENSES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOK		VEST-	(C) ADJUSTED NET INCOM		
BANK CHARGES	7	2.	0.			0.
TO FORM 990-PF, PG 1, LN 23	7	2.	0.			0.

FORM 990-PF	COI	RPORATE STOCK	-		STAT	TEMENT	5
DESCRIPTION			воок л	/ALUE		R MARKE' VALUE	Т
CITIBANK/SMITHBAF	NEY		55	57,991.		336,2	84.
VANGUARD INTL STE VANGUARD STK MKT				52,67 4. 37,370.		71,1: 118,5	
							
FOTAL TO FORM 990)-PF, PART II, LINI	E 10B	75	8,035.		525,9	54.
FORM 990-PF	INTEREST	AND PENALTIE	S		STAT	EMENT	6
TAX DUE FROM FOR LATE PAYMENT I LATE PAYMENT F						1,4	43. 5. 7.
TOTAL AMOUNT DUE						1,4	
TOTAL AMOUNT DUE	3	PAYMENT PENA	LTY		STAT	1,4	55.
TOTAL AMOUNT DUE	3	PAYMENT PENA	LTY BALANC	CE M	STAT		55.
TOTAL AMOUNT DUE FORM 990-PF DESCRIPTION TAX DUE	LATE	AMOUNT 1,443	BALANC	CE M	<u> </u>	EMENT	55.
	DATE 05/15/10 06/15/10	AMOUNT 1,443	BALANC	443.	ONTHS	EMENT	55. 7
TOTAL AMOUNT DUE FORM 990-PF DESCRIPTION TAX DUE DATE FILED FOTAL LATE PAYMEN	LATE DATE 05/15/10 06/15/10	AMOUNT 1,443	BALANC 1,	443.	ONTHS	EMENT	7 TY 7.
TOTAL AMOUNT DUE FORM 990-PF DESCRIPTION TAX DUE DATE FILED FOTAL LATE PAYMEN	LATE DATE 05/15/10 06/15/10 T PENALTY LATE	AMOUNT 1,443	BALANC 1,	443.	ONTHS	PENAL	7. 7. 8
TOTAL AMOUNT DUE FORM 990-PF DESCRIPTION TAX DUE DATE FILED	LATE DATE 05/15/10 06/15/10 T PENALTY LATE	AMOUNT 1,443	BALANC 1, 1,	443.	ONTHS 1 STAT	PENAL?	7. 7. 8

9

STATEMENT

FORM 990-PF

	DURING THE YEAR	STAT	EMENT 9
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
ART LEAGUE OF ALEXANDRIA 105 NORTH UNION STREET ALEXANDRIA, VA 22314	NONE GENERAL OPERATING	PUBLIC CHARITY	2,500.
CAPITAL AREA FOOD BANK 645 TAYLOR STREET WASHINGTON, DC 20017	NONE GENERAL OPERATING	PUBLIC CHARITY	5,000.
EPISCOPAL CENTER FOR CHILDREN 5901 UTAH AVENUE, NW WASHINGTON, DC 20015	NONE GENERAL OPERATING	PUBLIC CHARITY	7,500.
FOOD AND FRIENDS 219 RIGGS ROAD, NE WASHINGTON, DC 20011	NONE GENERAL OPERATING	PUBLIC CHARITY	5,000.
HOPE FOR CHILDREN US 5801 SEARL TERRACE BETHESDA, MD 20816	NONE GENERAL OPERATING	PUBLIC CHARITY	2,500.
PEDIATRIC AIDS/HIV CARE INC P.O. BOX 77543 WASHINGTON, DC 200137543	NONE GENERAL OPERATING	PUBLIC CHARITY	5,000.
SAMARITAN MINISTRY OF WASHINGTON, DC 1516 HAMILTON STREET, NW WASHINGTON, DC 20011	NONE GENERAL OPERATING	PUBLIC CHARITY	2,500.
THE SEED FOUNDATION 1776 MASSACHUSETTS AVE, NW, STE 600 WASHINGTON, DC 20036	NONE GENERAL OPERATING	PUBLIC CHARITY	10,000.

GRANTS AND CONTRIBUTIONS

THE OTTO/WHALLEY FAMILY FOUNDAT	CION, INC		52-2135652
WASHINGTON SCHOLARSHIP FUND 1100 17TH STREET, NW, STE 330 WASHINGTON, DC 20036	NONE GENERAL OPERATING	PUBLIC CHARITY	10,000.
FRANKLIN ACADEMY 105 RIVER ROAD EAST HADDAM, CT 06423	NONE GENERAL OPERATING	PUBLIC CHARITY	25,000.
HANDS ON DC P.O. BOX 57094 WASHINGTON, DC 20037-0094	NONE GENERAL OPERATING	PUBLIC CHARITY	2,500.
COLLEGIATE DIRECTIONS 4833 RUGBY AVE. SUITE 301 BETHESDA, MD 20814	NONE GENERAL OPERATING	PUBLIC CHARITY	2,500.
CARLETON COLLEGE 1 N COLLEGE ST NORTHFIELD , MN 55057	NONE GENERAL OPERATING	PUBLIC CHARITY	25,000.
GRACE EPISCOPAL DAY SCHOOL 1607 GRACE CHURCH ROAD SILVER SPRING , MD 20910	NONE GENERAL OPERATING	PUBLIC CHARITY	5,000.
GRACE EPISCOPAL CHURCH 1607 GRACE CHURCH ROAD SILVER SPRING, MD 20910	NONE GENERAL OPERATING	PUBLIC CHARITY	20,000.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		130,000.

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

Form 8868 (Rev. 4-2009)

	u are filing for an Automatic 3-Month Extension, complete only Part I and check this box u are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	form)		► X
	complete Part II unless you have already been granted an automatic 3-month extension on a previously fi			
Part	Automatic 3-Month Extension of Time. Only submit original (no copies needed).			
A corpo	oration required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete		
Part I o	nly			▶
	r corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar come tax returns.	exter	ision of time)
noted b (not aut you mu:	nic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic lomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or cost submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files of the formal submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files of the formal submit the fully completed and click on e-file for Charities & Nonprofits.	cally rinsolid	f (1) you wai ated Form 9	nt the additional 990-T. Instead,
Type or		Emp	loyer ident	fication number
print	THE OTTO/WHALLEY FAMILY FOUNDATION, INC	5	2-2135	652
File by the due date f filing your	Number, street, and room or suite no. If a P.O. box, see instructions 4212 DRESDEN STREET		<u> </u>	
eturn See				
Check 1	type of return to be filed (file a separate application for each return):			
	prm 990 Form 990-T (corporation) Form 47	20		
$\overline{}$	orm 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52			
_	orm 990-EZ Form 990-T (trust other than above) Form 60			
$\overline{}$	orm 990-PF			
• The I	BOARD OF TRUSTEES books are in the care of ▶ 4212 DRESDEN STREET - KENSINGTON, MD 20	895		
Telep	phone No. ► 301-933-1248 FAX No. ►			
If the	organization does not have an office or place of business in the United States, check this box			ightharpoons
• If this	s is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	s is fo	r the whole	group, check this
oox 🕨	If it is for part of the group, check this box and attach a list with the names and EINs of all	memb	ers the exte	ension will cover.
_	request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt <u>AUGUST 15, 2010</u> , to file the exempt organization return for the organization named a for the organization's return for:		The extens	on
_	X calendar year 2009 or			
	The second and and and and and and and and and a		_ •	
	tax year beginning, and ending			
•	this tax year is for less than 12 months, check reason:initial return Final return		Change in a	accounting period
2 If 3a If	this tax year is for less than 12 months, check reason: initial return Final return this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		Change in a	
2 If 3a If	this tax year is for less than 12 months, check reason: Initial return Final return this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any onrefundable credits. See instructions.		Change in a	accounting period
2 If 3a If no b If	this tax year is for less than 12 months, check reason: Initial return Final return this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any onrefundable credits. See instructions. this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	3a	\$	0.
2 If 3a If b If ta	this tax year is for less than 12 months, check reason: Initial return Final return this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any correfundable credits. See instructions. this application is for Form 990-PF or 990-T, enter any refundable credits and estimated by payments made. Include any prior year overpayment allowed as a credit		Change in a	0.
2 If 3a If no b If ta c Ba	this tax year is for less than 12 months, check reason: Initial return Final return this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any parefundable credits. See instructions. this application is for Form 990-PF or 990-T, enter any refundable credits and estimated ax payments made. Include any prior year overpayment allowed as a credit alance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	3a	\$	
2 If 3a If no b If ta c Ba de	this tax year is for less than 12 months, check reason: Initial return Final return this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any correfundable credits. See instructions. this application is for Form 990-PF or 990-T, enter any refundable credits and estimated by payments made. Include any prior year overpayment allowed as a credit	3a	\$	0.

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