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Return of Private Foundation

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

OMB No 1545-0052

| | ment of the Treasury Revenue Service | Note. The fou | | i reated as a Privat be able to use a copy of this | | orting requirements. | 2009 |
|--|--|---|-----------------|--|---------------------------|---|---|
| | | or tax year beginning | JUL | | , and ending | JUN 30, 2010 | - ! |
| G Ch | eck all that apply: | Initial return Amended re | | Initial return of a fo | ormer public charity | Final return Name change | |
| lai Othe | rwise, C/O S' | FAMILY FO | TIN CO | ON, INC. MPANIES, INC | • . | A Employer identification 20-3142787 | number |
| or t | type 11111 | street (or P O box number | | , | Room/suite | B Telephone number 703-964-500 | 00 |
| See Specific Instructions. City or town, state, and ZIP code Instructions. RESTON, VA 20190 H. Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation I. Fair market value of all assets at end of year J. Accounting method: X. Cash Accrual | | | | | | | check here ting the 85% test, inputation |
| | m Part II, col (c), | line 16) | | ng method: X Cash her (specify) mn (d) must be on cash i | Accrual | under section 507(b)(1)(F If the foundation is in a 6 | O-month termination |
| | | evenue and Expenses runts in columns (b), (c), and il the amounts in column (a) | | (a) Revenue and expenses per books | (b) Net investment income | under section 507(b)(1)((c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
| | 1 Contributions, | gifts, grants, etc., receive | ved | 339,155. | | N/A | (CEST DESIS OTTY) |
| | 3 Interest on saving cash investments | | | 10. 5,264. | 10. 5,264. | | STATEMENT 2 STATEMENT 3 |
| 207 | 5a Gross rents b Net rental income | | | 3,204. | J, 204 | | JIAIEMENI 3 |
| J O | _ | from sale of assets not on l | ne 10 , 765. | <10,541. | <u></u> | | STATEMENT 1 |
| NOV 1 Revenue | | come (from Part IV, line 2) | <u>, 103.</u> | | 23,872. | | |
| SCANNED | 9 Income modific 10a Gross sales less r and allowances— b-Less Cost of goo | ations VED | | | | | |
| | Gross profit or Other income | (loss) (S | | 333,888. | 29,146 | | |
| | | inficers, directors, trustees | , etc | 0. | 0. | | 0. |
| - | | employee benefits | | | | | |
| Expenses | b Accounting feec Other profession | | MT 4 | 2,750. | 1,375. | | 1,375. |
| trati | 17 Interest18 Taxes19 Depreciation ar | nd depletion | | | | | |
| 70 | 20 Occupancy21 Travel, conference22 Printing and put | nces, and meetings | | | | | |
| 힏 | 23 Other expenses | | MT 5 | 818. | 409 | | 409. |
| Oper | expenses. Add | l lines 13 through 23 gifts, grants paid | | 3,568. 118,500. | 1,784. | | 1,784. 118,500. |
| - 1 | 26 Total expenses Add lines 24 an | s and disbursements. nd 25 | | 122,068. | 1,784. | | 120,284. |
| | | o Irom line 12: over expenses and disbur t income (if negative, ente | | 211,820. | 27,362. | | |
| 923501 02-02- | c Adjusted net in | ICOME (if negative, enter - | 0-) | Act Notice, see the instruc | | N/A | Form 990-PF (2009) |

| Form | 990-PF | (2009) |
|---------|--------|--------|
| 1 (111) | フフリードリ | (2003 |

| Form 990-PF (2009) C/O STANLEY MARTIN COMP | | Beginning of year | | 3142787 Page 2 |
|--|--|---------------------------------------|----------------|------------------------|
| Part | Balance Sheets Attached schedules and amounts in the description Column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| 1 | Cash - non-interest-bearing | (a) DOOK Value | (b) DOOK VAIDE | (C) I all Market Value |
| 1 ' | Savings and temporary cash investments | 38,123. | 74,095. | 74,095. |
| | Accounts receivable | | | |
| | Less: allowance for doubtful accounts ▶ | | - | |
| 4 | Pledges receivable | | | *** |
| İ | 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 | | | |
| | Less: allowance for doubtful accounts ▶ | | • | |
| 2 8 | Inventories for sale or use | | | - <u>,</u> |
| Assets | Prepaid expenses and deferred charges | | | |
| ž 10: | Investments - U.S. and state government obligations | | | |
| | Investments - corporate stock STMT 6 | 406,173. | 582,021. | 475,920. |
| - 1 | Investments - corporate bonds | • | • | |
| 11 | Investments - land, buildings, and equipment, basis | | | |
| | Less accumulated depreciation | | | |
| 12 | Investments - mortgage loans | | | |
| 13 | Investments - other | | | |
| 14 | Land, buildings, and equipment; basis | | | |
| | Less accumulated depreciation | · - | • • | |
| 15 | Other assets (describe ► | | | |
| | | | | |
| 16 | Total assets (to be completed by all filers) | 444,296. | 656,116. | 550,015. |
| \neg | Accounts payable and accrued expenses | | | |
| 18 | Grants payable | | | |
| مدا | Deferred revenue | | - | |
| 20 21 21 21 21 21 21 21 21 21 21 21 21 21 | - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | |
| e 21 | Mortgages and other notes payable | | | |
| ا تا | Other liabilities (describe) | | <u> </u> | |
| | | · · · · · · · · · · · · · · · · · · · | | |
| 23 | Total liabilities (add lines 17 through 22) | 0. | 0. | |
| | Foundations that follow SFAS 117, check here | | | |
| | and complete lines 24 through 26 and lines 30 and 31. | | | |
| ဗ္ဗ 24 | Unrestricted | | | |
| 25 | Temporarily restricted | | | |
| ē 26 | Permanently restricted | | | |
| | Foundations that do not follow SFAS 117, check here | | | |
| 코 | and complete lines 27 through 31. | | | |
| Net Assets or Fund Balances | Capital stock, trust principal, or current funds | 0. | 0. | |
| 9 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | 0. | 0. | |
| ğ 29 | Retained earnings, accumulated income, endowment, or other funds | 444,296. | 656,116. | |
| 를 30 | Total net assets or fund balances | 444,296. | 656,116. | |
| _ `` | | | 000/1200 | |
| 31 | Total liabilities and net assets/fund balances | 444,296. | 656,116. | |
| Part | | | | |
| | al net assets or fund balances at beginning of year - Part II, column (a), line 3 | · . | | |
| | | iu | | 111 206 |
| | ist agree with end-of-year figure reported on prior year's return) | | 1 | 444,296. |
| | er amount from Part I, line 27a er increases not included in line 2 (itemize) | | 2 | 211,820. |
| | I lines 1, 2, and 3 | | 3 | 0. 656,116. |
| | reases not included in line 2 (itemize) | | 4 5 | 0.00,110. |
| UGU | rouses not moluucu in inis & HEIHES 🗲 | | 1.5.1 | |

923511 02-02-10

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

| Part IV | Capital Gains | and Los | sses for Tax on In | vestment | Income | | | | | | |
|--|--|-----------------------------|--|--------------------------------------|------------------------------------|----------|-----------------------------------|-----------------------|---------------------------|---|--|
| | (a) List and desci 2-story brick wa | ribe the kin irehouse; o | d(s) of property sold (e.g. r common stock, 200 shs | ., real estate, s. MLC Co.) | | `P-P | v acquired urchase lonation | (c) Date : (mo., d | acquired ay, yr.) | (d) Date sold (mo., day, yr.) | |
| 1a 1,77 | 1a 1,770 SHARES OF ISHARES TRUST RUSSELL 2000 | | | | | | | | | | |
| | X FUND | | | | | | P | 01/1 | | 12/22/09 | |
| | SHARES OF | VIRG | INIA COMMER | CE BAN | CORP INC | | D | 05/2 | 8/10 | 06/11/10 | |
| | | | | | _ | | | | | | |
| <u>e</u> (e) Gr | oss sales price | | epreciation allowed (or allowable) | | t or other basis xpense of sale | | | | ain or (loss (f) minus | | |
| a | | | | | | | | | | | |
| b | 88,586. | | | | 99,54 | | | | | <10,959.> 34,831. | |
| <u> </u> | 64,179. | | | _ | 29,34 | 8. | | | | 34,831. | |
| d | | | | • | | | | | | | |
| Complete | only for assets showing | iu usin in c | olumn (h) and owned by t | the foundation | on 12/31/69 | | | (I) Gains (C | ol (h) gain | minue | |
| | V. as of 12/31/69 | (j |) Adjusted basis | (k) Ex | cess of col. (ı) | | | òl. (k), but r | | n -0-) or | |
| | v. as 01 12/3 1/05 | | as of 12/31/69 | over | col. (j), if any | | | | (110111 001. 1 | | |
| <u>a</u> b | | | | | | | | | | <10,959. | |
| С | | | | | | | | | | 34,831. | |
| d | | | | | | | | | | | |
| е | | | | | | | | | | | |
| 2 Capital gai | n net income or (net ca | ıpıtal loss) | If gain, also enter If (loss), enter -0- | in Part I, line - in Part I, line | 7 7 | } | 2 | | | 23,872. | |
| 3 Net short- | term capital gain or (los | ss) as defin | ed in sections 1222(5) an | ıd (6): | | | | | | | |
| | o enter in Part I, line 8, | column (c) |). | | | | | | NT / 7 | | |
| | nter -0- in Part I, line 8 Qualification U | nder Se | ection 4940(e) for | Reduced | Tax on Net | Inves | tment in | come | N/A | <u> </u> | |
| | | | ns subject to the section 4 | | | | | | | | |
| (FUI OPTIONAL | use by domestic private | 5 Iouiiualio | ns subject to the section - | 1340(a) lax oli | Het myestillent in | come., | | | | | |
| If section 494 | 0(d)(2) applies, leave th | his part bla | nk. | | | | | | | | |
| Was the foun | dation liable for the sec | tion 4942 t | ax on the distributable am | ount of any ye | ear in the base per | od? | | | | Yes X No | |
| | | | ection 4940(e). Do not co | | | | | | | | |
| 1 Enter the | | each colum | nn for each year; see instri | uctions before | making any entrie | es. | | | | /4) | |
| Calendar y | (a) Base period years ear (or tax year beginni | ng ın) | (b) Adjusted qualifying dis | | Net value of no | | | | (col. (b) dı\ | (d) oution ratio yided by col. (c)) | |
| | 2008 | | | 3,680. | | | 325,80 | | | | |
| | 2007 | | | 9,949. | | | 502,84 | | | .178880 | |
| | 2006 2005 | + | | 7,090. 6,006. | | | <u>549,36</u> 150,65 | | | .072517 | |
| | 2004 | | _ | 0,000. | | | ±30,03 | / • | | •037707 | |
| | | <u>-</u> | | | | | · - | | | | |
| 2 Total of lir | ne 1, column (d) | | | | | | | 2 | | .381786 | |
| 3 Average d | istribution ratio for the | 5-year bas | e period - divide the total (| on line 2 by 5, | or by the number | of years | ; | | | | |
| the founda | the foundation has been in existence if less than 5 years 3 .095447 | | | | | | .095447 | | | | |
| 4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5 | | | | | 345,692. | | | | | | |
| 5 Multiply line 4 by line 3 | | | | 5 | <u> </u> | 32,995. | | | | | |
| 6 Enter 1% | of net investment incon | ne (1% of F | Part I, line 27b) | | | | | 6 | | 274. | |
| 7 Add lines | 5 and 6 | | | | | | | 7 | | 33,269. | |
| • | ifying distributions from | • | | dh. a. d | laka dha t | | | . 8 | 120,284. | | |
| | equal to or greater than art VI instructions. | i line 7, che | eck the box in Part VI, line | io, and comp | nete that part usin | y a 1% 1 | ax rate. | _ | | | |

ALLOY FAMILY FOUNDATION, INC.

| | 990-PF (2009) C/O STANLEY MARTIN COMPANIES, INC. 20-314 rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see | | | Page 4 ns) | | |
|---|--|----------------|-----|---------------|--|--|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. | | | | | |
| | Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) | | | | | |
| b | b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% | | | | | |
| | of Part I, line 27b | | | | | |
| C | c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) | | | | | |
| 2 | 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | | | | |
| 3 | Add lines 1 and 2 | | 2 | <u>74.</u> | | |
| 4 | Subtitle A (incomé) 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 | <u>74.</u> | | |
| 6 | Credits/Payments: | | | 1 | | |
| | 2009 estimated tax payments and 2008 overpayment credited to 2009 6a 506. | | | , | | |
| | Exempt foreign organizations - tax withheld at source | | | 1 | | |
| | Tax paid with application for extension of time to file (Form 8868) | | | i | | |
| | Backup withholding erroneously withheld 6d | • | | | | |
| _ | Total credits and payments. Add lines 6a through 6d | | 5 | <u>06.</u> | | |
| 8 | —————————————————————————————————————— | | | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | | | | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | <u> </u> | 2 | 32. | | |
| 11 Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ 232 • Refunded ▶ 11 Part VII-A Statements Regarding Activities | | | | | | |
| 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in | | | | No | | |
| ıα | any political campaign? | 1a | 163 | X | | |
| h | 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 | 10 | | A- | | |
| | distributed by the foundation in connection with the activities | | | | | |
| c | c Did the foundation file Form 1120-POL for this year? | | | | | |
| | d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | | | | |
| - | (1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 . | | | | | |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | | | | | |
| managers. > \$ 0. | | | | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | _X_ | | |
| | If "Yes," attach a detailed description of the activities. | | | , | | |
| 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or | | | | 1 | | |
| | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | 3 | | <u>x</u> | | |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | X | | |
| | b If "Yes," has it filed a tax return on Form 990-T for this year? N/A | | | | | |
| 5 | 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | | | |
| | 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 | | | ĺ | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law | | | - 1 | | |
| _ | remain in the governing instrument? | 7 | X | <u> </u> | | |
| 7 | 7 Did the foundation have at least \$5,000 in assets at any time during the year? | | | | | |
| If "Yes," complete Part II, col. (c), and Part XV. | | | | + | | |
| 8a Enter the states to which the foundation reports or with which it is registered (see instructions) | | | | | | |
| L | MD If the appropriate line 7, has the foundation framehold a new of Farm 2000 DF to the Attender Consult (or describe). | | | | | |
| D | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) | ۱ ۵. | ₹. | ' | | |
| 0 | 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 calendar year 2009 or the tayable year happing in 2009 (see instructions for Part XIV/2 if "You " complete Part XIV/2 | | | v | | |
| 10 | year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | <u>9</u> 10 | | X | | |
| | big any persons assessing substantial continuators during the tax year if "Yes," attach a schedule listing their names and addresses | I IU | | | | |

Form **990-PF** (2009)

ALLOY FAMILY FOUNDATION, INC. Form 990-PF (2009) Page 5 20-3142787 C/O STANLEY MARTIN COMPANIES. INC. Part VII-A Statements Regarding Activities (continued) 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) X 12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? 12 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A 14 The books are in care of ▶ THE FOUNDATION Telephone no. $\triangleright 703-964-5000$ Located at ▶11111 SUNSET HILLS ROAD, SUITE 200, RESTON, ZIP+4 **►20190** VA 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. No Yes 1a During the year did the foundation (either directly or indirectly): Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No (5) Transfer any income or assets to a disqualified person (or make any of either available ___ Yes X No for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after Yes X No termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? 1b Organizations relying on a current notice regarding disaster assistance check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected X before the first day of the tax year beginning in 2009? 1¢ 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(1)(3) or 4942(1)(5): a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? If "Yes," list the years b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) N/A 2b

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?

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Х

3b

4a

🗌 Yes 🗶 No

N/A

during the year?

Form **990-PF** (2009)

Total number of other employees paid over \$50,000

Page 7

| Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued) | | |
|---|----------------------------|---------------------------|
| 3 Five highest-paid independent contractors for professional services. If none, enter "N | ONE." | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | | ▶ 0 |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical | information such as the | Expenses |
| number of organizations and other beneficiaries served, conferences convened, research papers produce | d, etc. | Expenses |
| 1 <u>N/A</u> | | |
| | | |
| | | |
| 2 | | |
| | | |
| 3 | | |
| · · · · · · · · · · · · · · · · · · · | | |
| | | |
| 4 | | - |
| | | |
| | | |
| Part IX-B Summary of Program-Related Investments | | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines | s 1 and 2. | Amount |
| 1 <u>N/A</u> | | |
| | | |
| | | • |
| 2 | | |
| | | |
| All other program-related investments. See instructions. | | |
| 3 | | |
| | | |
| | | |
| Total, Add lines 1 through 3 | | 0. |
| | | Form 990-PF (2009) |

Form 990-PF (2009) 20-3142787 C/O STANLEY MARTIN COMPANIES, INC. Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) Part X Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: a Average monthly fair market value of securities <u>290,417.</u> 1a 60,539. b Average of monthly cash balances 1b c Fair market value of all other assets 10 350,956. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 3 350,956. Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 5,264. 4 345,692. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 17,285. Minimum investment return Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain Part XI foreign organizations check here
and do not complete this part.) 17,285. Minimum investment return from Part X, line 6 274. Tax on investment income for 2009 from Part VI, line 5 2a Income tax for 2009. (This does not include the tax from Part VI.) 2b c Add lines 2a and 2b 2c 3 Distributable amount before adjustments. Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 120,284. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a **b** Program-related investments - total from Part IX-B 1b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a **b** Cash distribution test (attach the required schedule) 3b Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 120,284. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

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

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274.

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

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

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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, | | 7 54.5 \$7151 10 2000 | 2500 | 2000 |
| line 7 | | | | 17,011. |
| 2 Undistributed income, if any, as of the end of 2009 | | | one steems or | |
| a Enter amount for 2008 only | | | 0. | |
| b Total for prior years: | | | | |
| Excess distributions carryover, if any, to 2009: | | 0. | | |
| a From 2004 | | | | |
| b From 2005 3,577. | | | | |
| c From 2006 16,130. | | | | |
| d From 2007 65,053. | | | | , |
| e From 2008 7,521. | | | | |
| f Total of lines 3a through e | 92,281. | | | |
| 4 Qualifying distributions for 2009 from | | | | |
| Part XII, line 4: ▶\$ 120,284. | | | | |
| 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. | | | |
| d Applied to 2009 distributable amount | | | | 17,011. |
| e Remaining amount distributed out of corpus | 103,273. | | | |
| 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)) | | ν | | |
| 6 Enter the net total of each column as indicated below: | | | | |
| 2 Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 195,554. | | | |
| b Prior years' undistributed income. Subtract | | , | | |
| line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' | | <u></u> | | |
| 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 | | | | 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 | 0. | - | | |
| 9 Excess distributions carryover to 2010. | 105 554 | | | |
| Subtract lines 7 and 8 from line 6a | 195,554. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2005 3, 577. | | | | |
| b Excess from 2006 16,130. c Excess from 2007 65,053. | | | | |
| c Excess from 2007 65,053. d Excess from 2008 7,521. | | | | |
| e Excess from 2009 103, 273. | | | | |
| ELACOSS HUITI ZUUS LUJ, Z/J. | | | | |

| | NLEY MARTIN | | | 20-31 | 42787 Page 1 |
|--|--------------------------|----------------------------|------------------------------|-------------------------------|---------------------|
| Part XIV Private Operating F | | _ | | <u> N/A</u> | |
| 1 a If the foundation has received a ruling of | | | · | | |
| foundation, and the ruling is effective for | • | • | ▶ └ | | |
| b Check box to indicate whether the found | | ng foundation described | | 4942(j)(3) or 49 | 42(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | T | |
| 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 | | | | | |
| b 85% of line 2a | | _ | | | |
| c Qualifying distributions from Part XII, | | | | | |
| line 4 for each year listed | | | | | |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | | | |
| 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: | | | | | ı |
| (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 | had \$5 000 or mo | re in assets |
| at any time during t | | | , | | 455515 |
| 1 Information Regarding Foundation | | | · • | | |
| a List any managers of the foundation wh | - | than 2% of the total co | ntributions received by the | foundation before the clos | se of any tay |
| year (but only if they have contributed n | | | iti ibations received by the | s touridation before the clos | se of any tax |
| STEVEN B. ALLOY | | | | | |
| b List any managers of the foundation wh | o own 10% or more of th | e stock of a corporation | or an equally large port | on of the ownership of a na | artnership or |
| other entity) of which the foundation has | | | · (or all oqually large port | on or the owner only or a pr | artiforomp of |
| NONE | | | | | |
| 2 Information Regarding Contributi | on, Grant, Gift, Loan | Scholarship, etc., F | Programs: | | |
| Check here ▶ ☐ If the foundation o | | • • • • | • | not accept unsolicited requ | ests for funds. If |
| the foundation makes gifts, grants, etc. | | | | | |
| a The name, address, and telephone num | | | | ' | |
| MR. MARTIN K. ALLOY, | | | c addi coscu. | | |
| 11111 SUNSET HILLS R | | | N VA 20190 | | |
| b The form in which applications should b | • | | | | |
| LETTER EXPLAINING PU | | | Silodia iliolado. | | |
| c Any submission deadlines: | THE ODE OF OR | 444 | | | |
| NO DEADLINES | | | | | |
| d Any restrictions or limitations on awards | s, such as by geographic | al areas, charitable field | s, kinds of institutions. or | other factors: | |
| NO RESTRICTIONS OR L | | | | | |
| | | ·- | <u>.</u> | | . |

Form 990-PF (2009) C/O STANLEY MARTIN COMPANIES, INC.

Part XV | Supplementary Information (continued)

20-3142787 Page 11

| Recipient an individual of substantial contributor of substantial contribut | 3 Grants and Contributions Paid During the | | Payment | | |
|--|--|---|-----------|----------------------------------|----------|
| SEE STATEMENT 7 Total Approved for future payment NONE | | If recipient is an individual, | | | |
| SEE STATEMENT 7 Total Approved for future payment NONE | | show any relationship to any foundation manager | status of | Purpose of grant or contribution | Amount |
| SEE STATEMENT 7 Total b Approved for future payment NONE | | or substantial contributor | recipient | | |
| Total ▶ 3a 118,500. ▶ Approved for future payment NONE | a raid during the year | | | | |
| Total ▶ 3a 118,500. ▶ Approved for future payment NONE | | | | | |
| Total ▶ 3a 118,500. ▶ Approved for future payment NONE | | | | | |
| Total ▶ 3a 118,500. ▶ Approved for future payment NONE | | | | | |
| Total ▶ 3a 118,500. ▶ Approved for future payment NONE | | | | | |
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| Total Approved for future payment NONE 118,500. | | | | | 1 |
| Total ▶ 3a 118,500. ▶ Approved for future payment NONE | | | | | |
| Total ▶ 3a 118,500. ▶ Approved for future payment NONE | | | | | |
| Total ▶ 3a 118,500. ▶ Approved for future payment NONE | | | | | |
| Total ▶ 3a 118,500. ▶ Approved for future payment NONE | 677 671 771 F | | | | |
| NONE NONE | | <u> </u> | <u> </u> | | 110 500 |
| NONE | | T · · · | T | <u> </u> | 118,500. |
| | b / pp/oved for fatalo payment | | | | |
| | | | | | |
| | | | | | |
| | NONE | | | | |
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| | | | | | |
| Total ≥ 3b 0. 23611 02-02-10 | | | | | |
| Total 23611 02-02-10 500 2900 DE (2000) | | | 1 | | |
| 10tal | Tabl | | | | |
| | 223611 02-02-10 | | | <u>▶ 3b</u> | U . |

Part XVI-A Analysis of Income-Producing Activities

| nter gross amounts unless otherwise indicated. | | business income | | by section 512, 513, or 514 | (e) |
|---|---|-------------------------|--|-----------------------------|-----------------------------------|
| 1 Program service revenue: | (a) Business code | (b) Amount | (C) Exclu- sion code | (d) Amount | Related or exempt function income |
| a | | | | | |
| b | | * - | | | |
| С | | | | | |
| d | l l | | | | |
| e | 1 1 | | | | |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| Membership dues and assessments | | | | | |
| Interest on savings and temporary cash | | | | | |
| investments | | | 14 | 10. | |
| Dividends and interest from securities | | ******* | 14 | 5,264. | _ _ |
| Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | - | | | | |
| Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| Other investment income | | | | | |
| Gain or (loss) from sales of assets other | | | | 10 541 | |
| than inventory | | | 18 | <10,541. | <u> </u> |
| Net income or (loss) from special events | | | | | |
| Gross profit or (loss) from sales of inventory | | | +++- | | - |
| Other revenue: | | | | | |
| a | | | | | |
| b | | | - | | |
| <u> </u> | | | + | | |
| d | - - | - | + | _ | |
| Subtotal. Add columns (b), (d), and (e) | - | 0 | | <5,267. | · |
| Total Add line 12, columns (b), (d), and (e) | <u> </u> | | | | <5,26 |
| art XVI-B Relationship of Activitie ne No. Explain below how each activity for which i | s to the Accor | column (e) of Part XVI- | | | olishment of |
| the foundation's exempt purposes (other the | ian by providing fund | is for such purposes). | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 3621 02-10 | | | | · <u>-</u> - | Form 990-PF (2 |

9) C/O STANLEY MARTIN COMPANIES, INC. 20-3142787 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations**

| 1 Dut the organization directly or indirectly engage in any of the following with any other organization discribed in section 50 ft(c) of the Code (other than section 50 ft(c)) granizations (in section 52 ft(c)) at the Code (other than section 50 ft(c)) granizations (in section 52 ft(c)) granizations (in section 53 ft(c)) graniz | 1 | Did the erganization directly or indi | reath, anguage in any of the follower | a with any other organization | a described in costion E01(a) of | | Yes | No |
|--|-----|---|--|-------------------------------------|--|-------------|----------------|--------|
| a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other assets 11(2) X (3) Sites of assets from a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Renatiol or adolesse, equipment, or other assets (4) Renation stockes, equipment, or other assets (5) Loans or loan gluranties (6) Performance of services or membership or fundrasing solicitations (7) Sites of a services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (1) Expensive or services give the fundration of services give the fundration of services or services give the fundration of services or services give the fundration of services (services give the fundration of services or services give the fundration of services give the services gin | ' | | | | • • | - | 163 | 140 |
| (1) Sable sold assets to a noncharitable exempt organization (2) Purchase of assets from a noncharitable exempt organization (3) Rehalt of Tacilities, equipment, or other assets (4) Remitturement arrangements (5) Loss or loss or ton a quarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) If the assets of the services of the sesses, or paid employees. (8) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services given by the regoriting foundation. If the fundation received less than fair market value in any transaction or sharing arrangement, show in column (9) the value of the goods, other assets, or services received. (9) Amount involved (9) Amount involved (1) Name of noncharitable exempt organization (1) N/A (1) The contraction of the code (other than section 501(c)(3)) or in section 52?? (4) Description of relationship (5) Loss of the Code (other than section 501(c)(3)) or in section 52?? (6) The code (other than section 501(c)(3)) or in section 52?? (9) If Yes, Complete the following schedule. (1) Name of organization (9) The Code (other than section 501(c)(3)) or in section 52?? (9) If Yes is a section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? (9) If Yes is a section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? (1) In the code (other than section 501(c)(3)) or in section 52?? (1) If Yes is complete the following schedule. (1) Name of organization (1) N/A (2) Description of relationship (3) Restriction of prepary, Longing that I have searmined the return, excluding | | | | | zations | | | |
| (2) Other assets bother transcriones: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Remitturement arrangements (5) Loss or of any quarantes (6) Performance of services or well-benefits per or fundrasing solicitations (6) Performance of services or well-benefits per fundrasing solicitations (7) Loss or of any quarantes (8) Performance of services or well-benefits per fundrasing solicitations (9) Loss or of any quarantes (19) Loss or of the above is "Yes," complete the following schedule. Column (9) should always show the fair market value of the goods, other assets, or services received. (1) Loss or of the above is "Yes," complete the following schedule. Column (10) should always show the fair market value of the goods, other assets, or services received. (1) Loss or of the dode (10) Amount myolved (10) Marie of noncharitable exempt organization (10) Description of transfers, transactions, and sharing arrangements. (2) Loss or of the dode (10) Amount myolved (10) Marie of noncharitable exempt organization (10) Description of transfers, transactions, and sharing arrangements. (3) Loss or of the dode (10) Amount myolved (10) Marie of noncharitable exempt organization (10) Description of transfers, transactions, and sharing arrangements. (a) Name of organization (10) Amount myolved (10 | Č | | ation to a noncharitable exempt of | yanızatıon ol. | | 1 | | ~_ ' |
| b Other transactions: (1) Sales of assets to a nonchartable exempt organization (2) Prurchase of assets from a nonchartable exempt organization (3) Rental of facilities, equipment, or other assets (4) Remthusement arrangements (5) Loans or loan guarantees (6) Parformance of services or membership or fundraising solicitations (6) Parformance of services or membership or fundraising solicitations (7) Straining of facilities, equipment, mailing lists, other assets, or paid employees (8) Parformance of services or membership or fundraising solicitations (8) Parformance of services or membership or fundraising solicitations (9) Parformance of services or membership or fundraising solicitations (9) Parformance of services or membership or fundraising solicitations (9) Parformance of services or membership or fundraising solicitations (9) Parformance of services or membership or fundraising solicitations (9) Parformance of services or membership or fundraising solicitations (9) Parformance of services or membership or fundraising solicitations (9) Parformance of the above is 7'vs; complete the following plonation of the following participation of services or services greatered. 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization (9) Amount involved (9) Amount involved (1) Amount involved (1) Amount involved (1) Amount involved (1) Amount involved (2) Mame of organization (3) Parformance organization (4) Name of organization (8) Type of organization (9) Description of relationship (1) Prescription of relationship (1) Prescription of relationship (1) Prescription of relationship (2) Description of relationship (3) Rame of organization (4) Name of organization (5) Loans or fund a market value in any knowledge and belef, if a true, correct, entrophysic booksteeper's identifying number services or prescription below of the propagate internation, relationship Preparer's identifying number services and propagate internationship Pr | | ` ' | • | | | | | |
| (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rentifications, equipment, or other assets (5) Loans or foat guarantees (5) Loans or foat guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) Loans or on any of the above is "Vest," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services growen by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line so (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, banascions, and sharing arrangements. N/A In the service of the goods, other assets, or services received. N/A (b) Name of organization (c) Description of relationship N/A In the service of prays, I desting that have examined the return, including accompanying schedules and distingents, and to the baset of my knowledge and beind, if a true, correct, and complete Decirities of Prepays, I desting that have examined the return, including accompanying schedules and distingents, and to the baset of my knowledge and beind, if a true, correct, and complete Decirities of Prepays, I desting that have examined the return, including accompanying schedules and distingents, and to the baset of my knowledge and beind, if a true, correct, and complete Decirities of Prepays, I desting that have examined the return, including accompanying schedules and distingents, and to the baset of my knowledge and beind, if a true, correct, and complete Decirities of Prepays, I desting that have examined the return, including accompanying schedules and distingents, and to the baset of my knowledge and beind, if a true, correct, and complet | | • • | | | | 18(2) | | |
| (2) Purchases of assets from a nonchariable exempt organization (3) Rental of flootities, equipment, or other assets (4) Reimbursament arrangements (5) Loans or loan guarantees (6) Coans or loan guarantees (6) Performance of services or membership or fundraising solicitations (5) Entern of flootities, equipment, making lists, other assets, organization (5) Individual purpose or services given by the reporting foundation. If the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. 2a List the foundation directly or indirectly affiliated with, or related to, one or more tax-evempt organization (d) Description of transactions, and sharing arrangements 2a. Is the foundation directly or indirectly affiliated with, or related to, one or more tax-evempt organization (d) Description of transactions, and sharing arrangements 2a. Is the foundation directly or indirectly affiliated with, or related to, one or more tax-evempt organization (d) Description of transactions, and sharing arrangements 2a. Is the foundation directly or indirectly affiliated with, or related to, one or more tax-evempt organization described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52(?? 2b. If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Dubter penalties of person, I design that have examined the return, excluding accompanying schedules and distancements, and to the best of my knowledge and belief, it is true, correct, and complete Occlaring a fire-free plant following a fire-free plant followin | | | ble evernt ergenization | | | 1 | | ~ • |
| (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (6) It is answer to any of the above is "Yes," complete the following scheduls. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received iss than fair market value in any transaction or sharing arrangement, show in column (d) he value of the goods, other assets, or services given by the reporting foundation. If the foundation received is stan fair market value in any transaction or sharing arrangements or services given by the reporting foundation. If the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? 3 In Yes, complete the following schedule. 3 In Yes, complete the following schedule. 4 In India penalties of parties, I section 527 in the section 5 | | | · • | | | | | |
| (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (7) Experiment of facilities, equipment, making lists, other assets, or paid employees (8) Sharing of facilities, equipment, making lists, other assets, or paid employees (8) The assets of any of the above is "Yes, complete the following schedule. Column (9) should always show the fair market value of the goods, other assets, or services received. 3) Line in (9) Amount involved (1) Name of innohilation directly or indirectly affiliated with, or related to, one or more tax-exempt organization (2) Amount involved (3) Amount involved (4) Name of innohilation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (a) If Yes, complete the following schedule. (a) Reim of organization (b) Type of organization (c) Description of relationship (c) Description of relationship (d) Description of relationship (e) Description of relationship (f) Description of relationship (g) Description of relationship (h) Type of organization (g) Description of relationship (g) Description of relationship (h) Type of organization (g) Description of relationship (g) Description of relationship (h) Type of organization (h) Type of organi | | , , | · = | | | | | |
| (6) Performance of servoes or membership or fundrasing solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services grower by the reporting foundation. If the foundation received lists than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of variaties, banasactions, and sharing arrangements N/A 2a. Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization (d) Description of variaties, banasactions, and sharing arrangements in section 501(c) of the Code (other than sections 501(c)(3)) or in section 527? b If Yes, "complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perpy, I decige that I have examined their return, including accompanying schedules and distensives, and to the best of my knowledge and belief, it is true, correct, and complete Declarations frightly (cities that pagaper by facility) is based on all information of which pregive has any knowledge and belief, it is true, correct, and complete Declarations frightly (cities that pagaper by facility) is based on all information of which pregive has any knowledge and belief, it is true, correct, and complete Declarations frightly (cities that pagaper by facility) is based on all information of which pregive has any knowledge and belief, it is true, correct, and complete Declarations frightly (cities that pagaper by facility) is based on all information of which pregive has any knowledge and belief, it is true, correct, and complete Declarations frightly (cities that pagaper by facility) is employed. Signature of officer or trust | | • | | | | | | |
| (6) Performance of services or membership or fundrasing solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under pensitities of perput, I design that I have examined the return, including accompanying schedules and statements, and to the beat of my knowledge and belief, it is true, correct, and complete Declarimes Friendly either time plansing in the section of all information of inhich prepare has any horseledge in the section of trustee Date | | • • | | | | | | |
| c Sharing of facilities, equipment, mailing lists, other assets, or paid employees If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. A] I.m. no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of vanishers, transactions, and sharing arrangements N/A | | | ambarahin ar fundraiaing galiaitatis | 200 | | | | |
| d if the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Decomption of transfers, transactions, and sharing arrangements N/A | | • • | | | | | | |
| or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. a) Line no (b) Amount involved (c) Name of noncharitable exempl organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)) 3) or in section 52?? If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of person, I decigate that I have examined this return, including accompanying schedules and sistaments, and to the beat of my knowledge and belief, it is true, correct, self-exemption of control of the code (other than tippolyer or fiduciary) is based on all information of which prepare has any knowledge and belief, it is true, correct, self-exemption of officer or trustee Date PRESIDENT Title Date Preparer's identifying number employed Signature of officer or trustee Date Preparer's identifying number employed signature of officer or trustee Date Preparer's identifying number employed signature of officer or trustee Date Preparer's identifying number employed signature of officer or trustee Date Preparer's identifying number employed signature of officer or trustee Date Preparer's identifying number employed signature of officer or trustee Date Preparer's identifying number employed signature of officer or trustee Date Preparer's identifying number employed signature of officer or trustee Date Preparer's identifying number employed signature of officer or trustee Date Preparer's identifying number employed signature of officer or trustee Date Preparer's identifying number employed signature of officer or trustee Date Preparer's identifying number employed | | | | • | ave show the fair market value of the goods of | | ata. | |
| column (d) the value of the goods, other assets, or services received. a) Line no (b) Amount myolved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements | ١ | | | • • | - | | eis, | |
| a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of wansfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? Yes X No If Yes, complete the following schedule. | | | | | in any transaction of sharing arrangement, si | OW III | | |
| N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? □ Yes ▼ No □ If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A □ Under penalties of person, illeging that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and discriptions of office of trustee □ And complete Declaracy of effects that I have examined their return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and discriptions of office of trustee □ And complete Declaracy of effects that I have examined their return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and discriptions of the control of t | a) | | | | (d) Description of transfers, transactions, and si | haring an | 20.0000 | unte |
| 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? Yes X No | | (B) / undant millioned | | | (b) Description of transfers, transactions, and si | laining air | anyeme | |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes | | | IN/A | _ | | | | |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes | | | | | | | | |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes | - | | | | | | | |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes | | - | - | | | | | |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes | | | | | | | | |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes | - | | | | | | | |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes | | | | | | | | |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes | - | | | | | | | |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes | _ | | _ | | | | | |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes | | | | | | | | |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes | | | | | | | | |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes | | | | | | | | |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes | | | | • | | | | |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes | | | | • • | | | | |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes | | | | • • | | | - | |
| In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes | 2: | a Is the foundation directly or indirec | tly affiliated with or related to one | or more tax-exempt organiza | ations described | | | |
| Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of prepare (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge Date PRESIDENT | | | | | | 7 vec | Γ Υ | T No |
| (c) Description of relationship N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge Date PRESIDENT | | | | | | 163 | | טויו ב |
| Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of prepare (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge Date | | | | (b) Type of organization | (c) Description of relationsh | ıp | | |
| Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of prepaler (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge PRESIDENT | | | ` | 1 | | · | | |
| and complete Declaration of prepaler (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge PRESIDENT | | | | | | | | |
| and complete Declaration of prepaler (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge PRESIDENT | | | | | | | | |
| and complete Declaration of prepaler (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge PRESIDENT | | | | | | | | |
| and complete Declaration of prepaler (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge PRESIDENT | _ | | | | | | • | |
| Signature of officer or trustee Date Date Dat | | | | | | ue, corre | ct, | |
| Signature of officer or trustee Date Title | | and complete Declaration of preparer (other | er than taxpayer or fiduciary) is based on | all information of which preparer h | as any knowledge | | | |
| Firm's name (or your SMYDER COHN), PC of self-employed). address, and ZIPcode BETHESDA, MD 20814-3338 Phone no. 301-652-6700 | | | (Rull) | 1///// | ► PRESIDENT | | | |
| Firm's name (or your SMYDER COHN), PC of self-employed). address, and ZIPcode BETHESDA, MD 20814-3338 Phone no. 301-652-6700 | ere | Signature of officer or trustee | | Date | | | | |
| Firm's name (or your SMYDER COHN), PC of self-employed). address, and ZIPcode BETHESDA, MD 20814-3338 Phone no. 301-652-6700 | I | Preparer's \ | 1 // | Da | te / Check if Preparer | s identify | ing num | nber |
| Firm's name (or your SMYDER COHN), PC of self-employed). address, and ZIPcode BETHESDA, MD 20814-3338 Firm's name (or your SMYDER COHN), PC EIN | ซี | signature | water | | 2/27//o sell- employed ► □ | | | |
| | | Firm's name (or yours SMYD | ER COHN, PC | / | ''' | | | |
| | | f self-employed), 4520 | EAST WEST HIGH | WAY, SUITE 52 | | | | |
| | | address, and ZIP code BETH | | | | <u> 52-</u> | 670 | 0 |
| | | | | | | | | |

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

Schedule of Contributors ► Attach to Form 990, 990-EZ, or 990-PF.

| OMB No | 1545-0047 |
|--------|-----------|
|--------|-----------|

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

ALLOY FAMILY FOUNDATION, INC. C/O STANLEY MARTIN COMPANIES. 20-3142787 Organization type (check one). Filers of: Section: Form 990 or 990-EZ ___ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II Special Rules 🔟 For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (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. 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, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc.,

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF). but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

religious, charitable, etc., contributions of \$5,000 or more during the year.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Page 1 of 1 of Part I

Name of organization

ALLOY FAMILY FOUNDATION, INC.

C/O STANLEY MARTIN COMPANIES, INC.

Employer identification number

20-3142787

| Part I | Contributors (see instructions) | | |
|------------|--|-----------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 1 | MARTIN K. ALLOY 5610 WISCONSIN AVENUE, #20-B CHEVY CHASE, MD 20815 | \$339,155. | Person Payroll Noncash X (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 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) |

Name of organization

ALLOY FAMILY FOUNDATION, INC.

C/O STANLEY MARTIN COMPANIES, INC.

20-3142787

Employer identification number

| Part II | Noncash Property (see instructions) | | |
|------------------------------|---|--|-----------------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| 1 | 50,000 SHARES OF VIRGINIA COMMERCE BANCORP INC. | | 05/28/10 |
| (a) No. from Part i | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | -10 | \$ | 0, 990-EZ, or 990-PF) (2009 |

| FORM 990-PF G | AIN OR (LOSS) I | FROM SALE | OF A | SSETS | | STA | TEMENT | 1 |
|--------------------------------|---------------------------------|------------------------|------|-----------------|-------------|------|----------------|----------|
| (A) DESCRIPTION OF PROPERTY | | | | ANNER QUIRED | DA' ACQU | | DATE SO | OLD |
| 1,770 SHARES OF ISHARES | TRUST RUSSELL | 2000 | PUR | CHASED | 01/18 | 8/07 | 12/22 | /09 |
| (B) GROSS SALES PRICE | (C) COST OR OTHER BASIS | (D) EXPENSE SALE | OF | (E) DEPRE | | | (F) OR LOSS | 5 |
| 88,586. | 99,545. | | 0. | | 0. | | <10,95 | 59.> |
| (A) DESCRIPTION OF PROPERTY | | | | ANNER QUIRED | DA' | | DATE SO | OLD |
| 9400 SHARES OF VIRGINIA | . COMMERCE BANCO | ORP INC | DO | NATED | 05/28 | 8/10 | 06/11, | /10 |
| (B) GROSS SALES PRICE | (C) VALUE AT TIME OF ACQ. | (D) EXPENSE SALE | OF | (E) DEPRE | | | (F) OR LOSS | 5 |
| 64,179. | 63,761. | | 0. | | 0. | _ | 41 | L8. |
| CAPITAL GAINS DIVIDENDS | FROM PART IV | | | | | | | 0. |
| TOTAL TO FORM 990-PF, P | ART I, LINE 6A | | | | = | | <10,54 | 11. |
| FORM 990-PF INTEREST O | N SAVINGS AND 1 | EMPORARY | CASH | INVEST | MENTS | STAT | PEMENT | 2 |
| | | | | | | | | |
| SOURCE | | | | | | 2 | TRUOMA | |
| SOURCE CARDINAL BANK | | | | | | | | LO. |

| FORM 990-PF DIVIDENT | OS AND | INTER | EST FROM | SECU | RITIES | STATEMENT | 3 |
|-------------------------------|--------|---------------------|-----------------------------|-------|------------------------------|---------------------|-----|
| SOURCE | | GROSS | AMOUNT | | ITAL GAINS | COLUMN (A AMOUNT |) |
| BAIRD DIVIDENDS | - | | 5,264. | | 0. | 5,2 | 64. |
| TOTAL TO FM 990-PF, PART I, I | LN 4 | | 5,264. | | 0. | 5,2 | 64. |
| FORM 990-PF | AC | COUNTI | NG FEES | | | STATEMENT | 4 |
| DESCRIPTION | EXPE | A) NSES BOOKS | (B) NET INVI MENT INC | EST- | (C) ADJUSTED NET INCOM | | |
| ACCOUNTING FEES | : | 2,750. | 1, | ,375. | | 1,3 | 75. |
| TO FORM 990-PF, PG 1, LN 16B | | 2,750. | 1 | ,375. | | 1,375. | |
| FORM 990-PF | O' | THER E | XPENSES | | | STATEMENT | 5 |
| DESCRIPTION | EXPE | A) NSES BOOKS | (B) NET INVE MENT INC | ST- | | | |
| INVESTMENT FEES | | 818. | | 409. | | 4 | 09. |
| TO FORM 990-PF, PG 1, LN 23 | | 818. | | 409. | | 4 | 09. |
| FORM 990-PF | COI | RPORAT | E STOCK | | | STATEMENT | 6 |
| DESCRIPTION | | | | вос | OK VALUE | FAIR MARKE VALUE | T |
| BAIRD SECURITIES | | | | | 582,021. | 475,9 | 20. |
| TOTAL TO FORM 990-PF, PART II | , LIN | E 10B | | | 582,021. | 475,9 | 20. |

FORM 990-PF

STATEMENT 7

| | DURING THE YEAR | DIATEMENT / | | |
|--|--|-------------------|---------|--|
| RECIPIENT NAME AND ADDRESS | RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT | | AMOUNT | |
| FLINT HILL SCHOOL 3320 JERMANTOWN RD OAKTON, VA 22124 | N/A EDUCATION | PUBLIC CHARITY | 62,500. | |
| HOMEAID NOVA 14160 NEWBROOK DR CHANTILLY, VA 20151 | N/A GENERAL | PUBLIC CHARITY | 2,000. | |
| THE JEWISH FEDERATION OF GREATER WASHINGTON 6101 MONTROSE RD ROCKVILLE, MD 20852 | N/A GENERAL | PUBLIC CHARITY | 500. | |
| UNIVERSITY OF PENNSYLVANIA 3299 K STREET, NW, SUITE 700 WASHINGTON, DC 20007 | N/A EDUCATION | PUBLIC CHARITY | 50,000. | |
| WOUNDED WARRIOR PROJECT 1120 G STREET NW, SUITE 700 WASHINGTON, DC 20005 | N/A GENERAL | PUBLIC CHARITY | 100. | |
| VIENNA YOUTH SOCCER 9961 CAPPERTON DRIVE OAKTON, VA 22124 | N/A GENERAL | PUBLIC CHARITY | 1,000. | |
| AMERICAN RED CROSS - HAITI RELIEF FUND 8901 WISCONSIN AVE. BETHESDA, MD 20889 | N/A GENERAL | PUBLIC CHARITY | 500. | |
| CNEWA 1011 FIRST AVENUE NEW YORK, NY 10022 | N/A GENERAL | PUBLIC CHARITY | 200. | |

GRANTS AND CONTRIBUTIONS

| ALLOY FAMILY FOUNDATION, INC. | C/O STANLE | | 20-3142787 |
|--|----------------|-------------------|------------|
| WOMEN GIVING BACK 3901 CENTERVIEW DRIVE, SUITE E CHANTILLY, VA 20151 | N/A GENERAL | PUBLIC CHARITY | 500. |
| ISRAELI GUIDE DOG CENTER 732 S. SETTLERS CIRCLE WARRINGTON, PA 18976 | n/a GENERAL | PUBLIC CHARITY | 100. |
| AVON WALK FOR BREAST CANCER 2000 L STREET, NW, SUITE 717 WASHINGTON, DC 20036 | n/a GENERAL | PUBLIC CHARITY | 100. |
| BOYS AND GIRLS CLUB OF GREATER WASHINGTON 4103 BENNING ROAD, NE WASHINGTON, DC 20019 | N/A GENERAL | PUBLIC CHARITY | 1,000. |
| TOTAL TO FORM 990-PF, PART XV, L | INE 3A | | 118,500. |