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Form 990-PF

Department of the Treasu Internal Revenue Service

Return of Private Foundation

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

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

OMB No 1545-0052

2010

For c	alendar year 2010, or tax year beginning		, and ending		
G C	heck all that apply: Initial return	Initial return of a for	· -	Final return	_
Γ.	Amended return	Address chang		Name change	
Nan	ne of foundation		•	A Employer identification i	number
	SHERMAN FAMILY FOUNDAT			25-6632582	
Num	ther and street (or P O box number if mail is not delivered to street ac	ddress)	Room/suite	B Telephone number	2.0
<u> </u>	20 WEST MARKET STREET			610-997-878	
City	or town, state, and ZIP code BETHLEHEM, PA 18015			C If exemption application is per	F - 1
<u> </u>	theck type of organization: X Section 501(c)(3) exe	mnt private foundation		 D 1. Foreign organizations, 2. Foreign organizations mee check here and attach con 	ting the 85% test,
<u> </u>		Other taxable private founda	tion		
L Fa	ir market value of all assets at end of year J Accounting		X Accrual	E If private foundation state under section 507(b)(1)(
	· · · · · · · · · · · · · · · · · · ·	er (specify)		F If the foundation is in a 6	••
	ĭ			under section 507(b)(1)(- 1 1
Pa	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a),)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received				
	2 Check X if the foundation is not required to attach Sch 8				
	3 Interest on savings and temporary cash investments		4 - 0.0		<u> </u>
	4 Dividends and interest from securities	1589.	1589.		Statement 1
	5a Gross rents				
	b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10	-1232.			
ĭe	b assets on line 6a 6562.	12326			
Revenue	7 Capital gain net income (from Part IV, line 2)		0.		
æ	8 Net short-term capital gain	TREC	SIMED		
	9 Income modifications		- J		
	Gross sales less returns and allowances	S NUV	2 1 2011		
	b Less Cost of goods sold		6		
	c Gross profit or (loss)				
	11 Other income 12 Total, Add lines 1 through 11	357.	1589.	0.	
	12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
	14 Other employee salaries and wages	- 0.	0.	•	
	15 Pension plans, employee benefits				
ses	16a Legal fees				
	b Accounting fees Stmt 2	700.	350.	0.	0.
Exper	c Other professional fees				
tive	17 Interest			\ <u></u>	
stra	18 Taxes Stmt 3	22.	22.	0.	0.
<u>.</u>	19 Depreciation and depletion			 	
Administrative	20 Occupancy 21 Travel, conferences, and meetings			 	
and 4	22 Printing and publications			 	
ā	23 Other expenses Stmt 4	55.	0.	0.	0.
atin	24 Total operating and administrative	<u></u>		1	
Operating	expenses. Add lines 13 through 23	777.	372.	0.	0.
0	25 Contributions, girts, grants paid	4000.			4000.
	26 Total expenses and disbursements.				·
	Add lines 24 and 25	4777.	372.	. 0.	4000.
	27 Subtract line 26 from line 12:	4400			
	a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)	-4420.	1017	 	
	C Adjusted net income (if negative, enter -0-)		1217.	_0.	
023	501 LHA For Panerwork Reduction Act Notice see	1		<u> </u>	Form 990-DE (2010)

Form **990-PF** (2010

Part	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
1 41 (column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	2337.	2805.	2805.
2	Savings and temporary cash investments			
	Accounts receivable ►			-
	Less; allowance for doubtful accounts ▶			
4	Pledges receivable ►			· · · · · · · · · · · · · · · · · · ·
	Less; allowance for doubtful accounts ▶			
5				
6				
ľ	disqualified persons			
7	Other notes and loans receivable			
'	Less; allowance for doubtful accounts			
				
Assets 6 8	1 2002 12 20 20 20 20 20 20 20 20 20 20 20 20 20		70	79.
88			79.	19.
יון	a Investments - U.S. and state government obligations			
Ì	b Investments - corporate stock			
	c Investments - corporate bonds			
11	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation	· · · · · · · · · · · · · · · · · · ·		
12	Investments - mortgage loans			
13	Investments - other Stmt 5	61425.	55209.	52903.
14	Land, buildings, and equipment: basis			
	Less accumulated depreciation			
15	Other assets (describe ►			
16	Total assets (to be completed by all filers)	63762.	58093.	55787.
17				
18				
Liabilities		23.	123.	
를 21		23.	123.	
رِي ا		1349.	0.	
"	2 Other liabilities (describe ► Statement 6)	1343.		
	3. T. (111.3.111) (1.111) (1.111)	1250	100	
- 123	3 Total liabilities (add lines 17 through 22)	1372.	123.	
	Foundations that follow SFAS 117, check here			
S	and complete lines 24 through 26 and lines 30 and 31.			
0 12/				
[25	, •			
<u>c</u> ii 2€				
Ĕ	Foundations that do not follow SFAS 117, check here	[
ŭ	and complete lines 27 through 31			
S 27	7 Capital stock, trust principal, or current funds	2490.	2490.	,
Net Assets or Fund Balanc	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
¥ 29	9 Retained earnings, accumulated income, endowment, or other funds	59900.	55480.	
₹ 30		62390.	57970.	
~				
3	1 Total liabilities and net assets/fund balances	63762.	58093.	
				L
Par	t III Analysis of Changes in Net Assets or Fund B	Balances		
1 To	tal net assets or fund balances at beginning of year - Part II, column (a), line	30		
	nust agree with end-of-year figure reported on prior year's return)	30		62300
	ter amount from Part I, line 27a		1	62390
	her increases not included in line 2 (itemize)		2	-4420
	Id lines 1, 2, and 3		3	57070
	creases not included in line 2 (itemize)		4	57970
		1 (1) /		57070
6 10	ital net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	57970

Multiply line 4 by line 3 5

Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

54935. 2370. 12. 6 2382. 7 4000.

	990-PF (2010) SHERMAN FAMILY FOUNDATION TRUS t VI Excise Tax Based on Investment Income (Section 4940	T (a), 4940(b), 4940(e), or 4	<u>25-</u> 948 -	66325 see in	82 struc		age 4 s)
1a	exempt operating foundations described in section 4940(d)(2), check here and en						
	Date of ruling or determination letter: (attach copy of letter if nece						
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here		1 1			1	.2.
	of Part I, line 27b						
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Part I, line 12, col. (b).					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other		2	l			0.
	Add lines 1 and 2	,	3		· · · · · · ·	1	2.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Of	thers enter -0-)	4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	,	5			1	L2.
	Credits/Payments;						
	2010 estimated tax payments and 2009 overpayment credited to 2010	6a 91.					
	Exempt foreign organizations - tax withheld at source	6b	1	ļ			
	Tax paid with application for extension of time to file (Form 8868)	6c	1				
	Backup withholding erroneously withheld	6d					
	Total credits and payments, Add lines 6a through 6d		7			9	91.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attain	ched	8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	>	9	···			
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10	 		-	79.
	Enter the amount of line 10 to be; Credited to 2011 estimated tax	79. Refunded	11	ļ			0.
	rt VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legis	lation or did it participate or interven	e in			Yes	No
	any political campaign?				1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	ses (see instructions for definition)?			1b		<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	d copies of any materials publish	ed or				
	distributed by the foundation in connection with the activities.	•					
C	Did the foundation file Form 1120-POL for this year?				1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	e year:					
	(1) On the foundation. \blacktriangleright \$ O . (2) On foundation managers	s. > \$)	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expend	iture tax imposed on foundation					
	managers. ► \$O.						
2	Has the foundation engaged in any activities that have not previously been reported to the li	RS?			2		_X
	If "Yes," attach a detailed description of the activities.						ı
3	Has the foundation made any changes, not previously reported to the IRS, in its governing	instrument, articles of incorporation,	or				:
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	es			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	ar?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		1	A\r	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year's	7			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 e	either:					
	By language in the governing instrument, or						
	 By state legislation that effectively amends the governing instrument so that no mandator 	ry directions that conflict with the sta	te law			}	
	remain in the governing instrument?				6	X	.
7	Did the foundation have at least \$5,000 in assets at any time during the year?				7	X	
	If "Yes," complete Part II, col (c), and Part XV						
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ons) 🕨			ļ		
	PA	 					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attorney General (or designate)					1
_	of each state as required by General Instruction G? If "No," attach explanation				8b	X	ļ
9	Is the foundation claiming status as a private operating foundation within the meaning of si		lendar			1	
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes,"				9	<u> </u>	X
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a sched	fule listing their names and addresses			10	L	X

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

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	dations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	53922.
	Average of monthly cash balances	1b	53922. 1850.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	55772.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.	i	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	55772.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	837.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	54935.
6	Minimum investment return. Enter 5% of line 5	6	2747.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	2747.
2a	Tax on investment income for 2010 from Part VI, line 5		
	Income tax for 2010. (This does not include the tax from Part VI.)		
	Add lines 2a and 2b	2c	12.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2735.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2735.
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	2735.
P	Part XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	4000.
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	(2.1.2.7.1.2.	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	4000.
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	12.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3988.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies	for the section

ons)
ļ

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7				2735.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			2124.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005			j	
b From 2006				
c From 2007				
d From 2008				
e From 2009				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ► \$ 4000.				
a Applied to 2009, but not more than line 2a			2124.	
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 2010 distributable amount				1876.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2010 (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;				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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	· · · · · ·			
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				859.
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 2005				
not applied on line 5 or line 7	0	•		
9 Excess distributions carryover to 2011.	•			
Subtract lines 7 and 8 from line 6a	0	·		
10 Analysis of line 9:				
a Excess from 2006 b Excess from 2007				
c Excess from 2007				
d Excess from 2009				
e Excess from 2010				
		<u> </u>	<u> </u>	5 000 DE (00 (0)

023581 12-07-10

023601 12-07-10

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year 1000. CHILDREN'S HOME OF EASTON PUBLIC TO SUPPORT THEIR 2000 25TH STREET EASTON, CHARITY GENERAL PROGRAMS PA 18042 WOUNDED WARRIOR PROJECT 1000. PUBLIC TO SUPPORT THEIR CHARITY 7020 AC SKINNER PKWY, STE GENERAL PROGRAMS 100 JACKSONVILLE, FL 32256 BUCKS COUNTY SPCA PUBLIC 1000. TO SUPPORT THEIR 1665 STREET ROAD, PO BOX CHARITY GENERAL PROGRAMS 277 LAHASKA, PA 18931 MID-ATLANTIC BULLDOG PUBLIC 500. TO SUPPORT THEIR RESCUE CHARITY GENERAL PROGRAMS PO BOX 155 BELMAR, NJ 07719 LEHIGH VALLEY COMMUNITY PUBLIC 500. TO SUPPORT THEIR FOUNDATION CHARITY GENERAL PROGRAMS 968 POSTAL ROAD, SUITE 100 ALLENTOWN, PA 18109 4000. Total ▶ 3a b Approved for future payment None Total 0. 023611 12-07-10

XVI-Δ	Analysis of	Income-Producing	Activities
VAI-M	Analysis of	income-Froducing	ACTIVITIES

Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income		y section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code	711100111	
a	_				
b	_				
С					
d	_				
e	_				
f	_		_		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments .		···			
4 Dividends and interest from securities					1589
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal			1 1		
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			_		-1232
9 Net income or (loss) from special events				,	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:	1				
a		_			
b	_				
c					
d		····			
e	_				
12 Subtotal. Add columns (b), (d), and (e)			0.	0.	357
13 Total. Add line 12, columns (b), (d), and (e)				13	357

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

Line No.					e is reported in column (e) o providing funds for such p			ited importantly to the ac	complishment of
3	Invest't	Income	that	is	distributed	to	other	charitable	organizations
4									organizations
								<u> </u>	
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orm 990-PF	(2010) SHERM	AN FAMILY	FOUNDA	ATION_TRUST		25-66	32582	Page 13
Part XV	II Information Re	garding Tran	sfers To a	nd Transactions an	d Relationsl	nips With Nonch	naritable	
1 Did the the Coo a Transfe (1) Ca (2) Ot b Other t (1) Sa (2) Pu (3) Re (4) Re (5) Lc	Exempt Organi organization directly or indirectly or indirectly or indirectly or indirectly or indirectly or indirectly organization for the reporting foundation.	ectly engage in any (3) organizations) o ition to a noncharita ble exempt organiza incharitable exempt or or other assets	of the following r in section 527 ble exempt orga tion organization	with any other organization 7, relating to political organiz anization of	described in secti			Yes No X X X X X X X X X X X X
d If the a	g of facilities, equipment, ma answer to any of the above is	"Yes," complete the	following sched	dule. Column (b) should alw	-			ets,
	vices given by the reporting for n (d) the value of the goods,			d less than fair market value	in any transaction	or sharing arrangeme	nt, show in	
(a) Line no	(b) Amount involved	(c) Name o	f noncharitable	exempt organization	(d) Description	of transfers, transactions,	and sharing arr	angements
			N/A					
	 							
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					- 			
								
		 						
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			. <u> </u>					
		<u></u>						
ın sec	foundation directly or indirection 501(c) of the Code (others, complete the following sch	er than section 501(i		tion 527?	rations described		Yes	X No
	(a) Name of or	ganization	 	(b) Type of organization		(c) Description of relat	ionship	
	N/A	· · _ · _ · _ · _ · · · · · · · · ·						
								
						··· · · ··-		
	LIGAT	- Ab - 111		<u></u>				
Sign Here	Under penalties of peruty, I declar and complete Declaration of prep Signature of difficer or tr	arer (other than taxpaye	this return, includes or fiduciary) is b	ased on all information of which p	2011 L C	ne best of my knowledge ai vledge <u>hairman</u> Title	nd belief, it is tr	ue, correct,
	Print/Type preparer's n	ame	Preparer's s	signature /	Date	Check X if P	TIN	
	Loretta M		$\# \searrow$	IN	4/10/	self- employed		
Paid	Tubiello-F		Lorett	a M Tubiell	1/3///			
Prepar Use Or		oiello-Ha	rr & As	sociates, LL	С	Firm's EIN		

610-871-8202

Firm's address ► 110 N Main Street

Coopersburg, PA 18036

Phone no.

Form 990-PF Dividends	s and	Intere	est from	Secur	ities	State	ement	1
Source		Gross	Amount		tal Gains vidends		umn (A) mount	
Lincoln Financial Securities	•		1589.		0.		158	9.
Total to Fm 990-PF, Part I, 1:	n 4		1589.		0.		158	9.
Form 990-PF	Ac	counti	ng Fees			Stat	ement	2
Description	Expe	a) nses Books	(b) Net Inv ment In	est-	(c) Adjusted Net Incom		(d) haritah Purpose	
ACCOUNTING FEES		700.		350.		0.		0.
To Form 990-PF, Pg 1, ln 16b		700.		350.		0.		0.
Form 990-PF		Tax	es			Stat	ement	3
Description	Expe	a) enses Books	(b) Net Inv ment In	rest-	(c) Adjusted Net Incom		(d) harital Purpose	
Federal Excise Tax		12.		12.	***************************************	0.		0.
Foreign Taxes Paid on Investments		10.		10.		0.		0.
To Form 990-PF, Pg 1, ln 18 =		22.		22.		0.		0.
Form 990-PF	(Other E	xpenses			Stat	ement	4
Description	Expe	(a) enses Books	(b) Net Inv	rest-	(c) Adjusted Net Incom		(d) Charita Purpos	
Bank Fees		55.		0.		0.		0.
To Form 990-PF, Pg 1, ln 23		55.		0.		0.		0.

Form 990-PF	Other	Investments		Statement	5
Description		Valuation Method	Book Value	Fair Market Value	t
Mutual Funds		COST	55209.	529	03.
Total to Form 990-PF, Part II	, line	13	55209.	529	03.
Form 990-PF	Other	Liabilities		Statement	6
Form 990-PF Description	Other	Liabilities	BOY Amount	Statement EOY Amount	6
	Other	Liabilities	BOY Amount 9. 1340.		0.

Form **8868**

(Rev. January 2011)

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

 $\triangleright X$ If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs gov/efile and click on e-file for Chanties & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed) A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Type or Name of exempt organization **Employer identification number** print 25-6632582 SHERMAN FAMILY FOUNDATION TRUST File by the Number, street, and room or suite no. If a P.O box, see instructions due date for filing your 20 WEST MARKET STREET return See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions PA BETHLEHEM, 18015 0 4 Enter the Return code for the return that this application is for (file a separate application for each return) Application Return **Application** Return Is For Code Code Is For Form 990 Form 990-T (corporation) 01 07 Form 990-BL 02 Form 1041-A 08 Form 990-EZ 03 Form 4720 09 Form 990-PF 10 04 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 12 SHELLEY BROWN The books are in the care of ▶ 20 WEST MARKET STREET - BETHLEHEM, PA 18018 FAX No. Telephone No If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this If it is for part of the group, check this box 🕨 💹 and attach a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until August 15, 2011 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2010 or tax year beginning If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 3a nonrefundable credits. See instructions. 91. 3a If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and b estimated tax payments made. Include any prior year overpayment allowed as a credit. 91. 3b Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions LHA For Paperwork Reduction Act Notice, see Instructions. Form 8868 (Rev. 1-2011)

Form 8	868 (Rev. 1-2011)					Page 2	
	u are filing for an Additional (Not Automatic) 3-Month Ext	tension, c	omplete only Part II and check this bo	X		ightharpoonup	
	Only complete Part II if you have already been granted an a				868.		
	u are filing for an Automatic 3-Month Extension, complet						
Part	II Additional (Not Automatic) 3-Month E	xtensior	n of Time. Only file the original (no c	opies n	eeded)		
Type o	Name of exempt organization				Employer identification number		
print	SHERMAN FAMILY FOUNDATION TRUST			25-6632582			
File by th	the Name and an advantage of a DO have an approximations						
extended due date	e date for 20 WEST MARKET STREET						
filing you return Se	eturn See City, town or post office, state, and ZIP code For a foreign address, see instructions						
instructio	BETHLEHEM, PA 18015		·				
Enter t	he Return code for the return that this application is for (file	a separa	te application for each return)			0 4	
Application			Application			Return	
Is For		Code	Is For			Code	
Form 990		01					
Form 990-BL		02	Form 1041-A	41-A			
Form 990-EZ		03	Form 4720			09	
Form 990-PF		04	Form 5227			10	
Form 990-T (sec 401(a) or 408(a) trust)		05	Form 6069			11	
Form 990-T (trust other than above)		06	Form 8870			12	
STOP!	Do not complete Part II if you were not already granted	an auton	<u>natic 3-month extension on a previou</u>	isly file	d Form 8868.		
Shelley Brown							
• The books are in the care of ▶ 20 West Market Street - Bethlehem, PA 18018							
Telephone No. ► 6109978780 FAX No ►							
• If the organization does not have an office or place of business in the United States, check this box							
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box \blacktriangleright and attach a list with the names and EINs of all members the extension is for.							
box				memb	ers the extension	1 IS TOT.	
4 I request an additional 3-month extension of time until <u>November 15, 2011</u> .							
	For calendar year 2010, or other tax year beginning, and ending						
6	If the tax year entered in line 5 is for less than 12 months, check reason Initial return Final return						
	Change in accounting period						
	State in detail why you need the extension Additional time is needed to gather the information necessary to file a						
	complete and accurate return.						
	complete and accurate return.						
	If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069 e	enter the tentative tax less any	T			
-	nonrefundable credits. See instructions	0, 0000, 6	site the terrative tax, loss any	8a	\$	0.	
	If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated				
	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid						
	previously with Form 8868.				\$	0.	
c Balance due. Subtract line 8b from line 8a. Include your payment v			th this form, if required, by using	8b			
EFTPS (Ejectronic Federal Tax Payment System). See instructions.				8c	\$	0.	
			nd Verification			· -	
Under (penalities of perjury, I deglare that I have examined this form, include, concect and complete and that I am authorized to prepare this f	ding accom		ne best o	f my knowledge ar	nd belief,	
					815	2011	
Oignatt	The state of the s	CHALL	******	Pate		(Rev 1-2011)	
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