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#### **Return of Private Foundation**

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

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0052

For	alen	tar year 2010, or tax year l	· · · · · · · · · · · · · · · · · · ·			, and e	nding	<u> </u>	
G C	heck		nitial return		Initial return of a fo	•	harity	Final return	1
_			Amended return		Address chan	ge		Name change	
Nar	ne of	foundation						A Employer identification	number
								06 2000505	•
Nun	bor a	KIBLAWI FOL			<del></del>		Room/suite	26-3899795	<u> </u>
	100 0	•	CHAPEL ROA	•			Hoomisuite	B Telephone number (703) 759-	2818
Cit	or to	wn, state, and ZIP code	CHAPEL ROA	<u>u</u>			L		
Uny	טו ונ	GREAT FALLS	S 772 220	66-	3910			C If exemption application is p D 1. Foreign organization:	
H C	heck		Section 501(c)(3) ex		<del> </del>			Foreign organizations me check here and attach co	eeting the 85% test,
	~	ction 4947(a)(1) nonexempt			axable private found	ation		1	
1 Fa		rket value of all assets at en				Accr		E If private foundation sta under section 507(b)(1	
(fr	om F	Part II, col (c), line 16)	Ot	ther (spe	ecify)	_	_	F If the foundation is in a	
	\$_	20	, 488 . (Part I, colu	mn (d)	must be on cash	basis.)		under section 507(b)(1	
Pa	rt I	Analysis of Revenue and (The total of amounts in column	Expenses	(a	) Revenue and		vestment	(c) Adjusted net	(d) Disbursements for charitable purposes
		necessarily equal the amounts	in column (a) )	ext	enses per books	inc	ome 	income	(cash basis only)
		Contributions, gifts, grants,	•		26,000.		_		
	2	Check In the foundation is interest on savings and tempora	s not required to attach Sch B						
	3	cash investments	•	<u> </u>				<del></del>	
	4	Dividends and interest from	n securities						
		Gross rents			· · · · · · · · · · · · · · · · · · ·	<u></u>		<del>                                     </del>	<del> </del>
	_	Net rental income or (loss)  Net gain or (loss) from sale of as	enote not on line 10	<del>                                     </del>			<del></del>		
Σe	b	Gross sales price for all assets on line 6a	sets not on line to			-	_	<del></del>	
Revenue	7	Capital gain net income (from Pa	art IV, line 2)				0.		
č	8	Net short-term capital gain							
	9	Income modifications							
	10a	Gross sales less returns and allowances							
	b	Less Cost of goods sold		ļ					
	Ç	Gross profit or (loss)		<u> </u>					
	11	***************************************		<u> </u>	06.000			ļ <u>-</u>	
	12	Total Add lines 1 through		├	26,000. 0.		$-\frac{0}{0}$	<del></del>	<del></del>
	13	Other employee salarres and	tors, trustees, etc	<b></b>	<u> </u>				
	14 15	Pension name employee h	enefits		···				
မွ	16a	Pension ptans, employee b	Eustits Soll SS			-	_		
enses	Ь	Accountingitees							
Ä	C	Other professional less	ent int						
ě	17	Interest	LUVa Com						
and Administrative Exp	18	Taxes		<u></u>					<u></u>
inist	19	Depreciation and depletion		<u> </u>					<u> </u>
Ē	20	Occupancy							
ΨÞ	21	Travel, conferences, and m	ieetings			<del>                                     </del>		<del> </del>	<del> </del>
a	22	Printing and publications	STMT 1	<del></del>	512.	<del>                                     </del>	0.	0.	0.
	23 24	Other expenses  Total operating and admir		-	314.				<u> </u>
era B	24	expenses Add lines 13 thr			512.	ļ	0.	.l o.	
ာဝီ	25	Contributions, gifts, grants	-		5,000.				5,000.
				-,					
IL.	L	Add lines 24 and 25			5,512.		0.	. 0	5,000.
ي	27	Subtract line 26 from line 1	12:						
	a	Excess of revenue over expense	es and disbursements		20,488.				
Z	b	Net investment income (#)	negative, enter -0-)				0.		
70000	<u>c</u>	Adjusted net income (if neg				<u> </u>	<del> </del>	0.	
SENNED JUL	7-10	LHA For Paperwork Re	duction Act Notice, see	the inst	tructions.	4			Form <b>990-PF</b> (2010)
Q.						1			

Part III   Balance Sheets   Ansute sheater state development of the (b) Book Value   (c) For Market Value   (c)	Forr	n 99	0-PF(2010) KIBLAWI FOUNDATION		26-3	3899795	Page 2
Cash - non-interest bearing   Q. 20,488   20,488	P	art	Balance Sheets Attached schedules and amounts in the description				
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Present evaluation transfer   Less: allowance for doubtiful accounts		6					
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Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶  5 Oo.  6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  6 20, 488.	ž	30	Total net assets or fund balances	U•	20,400.		
Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶  5 Oo.  6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  6 20, 488.			Table Habilities and not accepte found belonged	ا ۱	20 488		
1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ►  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ►  5 Oo.  6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  6 20, 488.	_				_20,4001		
(must agree with end-of-year figure reported on prior year's return)10.2 Enter amount from Part I, line 27a220,488.3 Other increases not included in line 2 (itemize)30.4 Add lines 1, 2, and 3420,488.5 Decreases not included in line 2 (itemize)50.6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30620,488.	LP	art	Analysis of Changes in Net Assets or Fund B	aiances			
(must agree with end-of-year figure reported on prior year's return)10.2 Enter amount from Part I, line 27a220,488.3 Other increases not included in line 2 (itemize)30.4 Add lines 1, 2, and 3420,488.5 Decreases not included in line 2 (itemize)50.6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30620,488.	1	Tota	al net assets or fund balances at beginning of year - Part II, column (a), line	30			
3 Other increases not included in line 2 (itemize) ► 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5 Oc. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 20,488.					1		
4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  4 20, 488.	2	Ente	er amount from Part I, line 27a		2	20,	
5 Decreases not included in line 2 (itemize) ► 5 0. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 20,488.							
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 20, 488.	4				4	<u> </u>	
	5						
	<u>6</u> _	Tota	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30			

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	990-PF (2010) KIBLAWI FOUNDATION rt VI Excise Tax Based on Investment Income (Section 4940)	(2)	1940(b) 4940(a)	or A	<u> 26 -</u>	3899	795	ction	age 4
	Exempt operating foundations described in section 4940(d)(2), check here \to \to and and entermine and entermine the control of the con			, 01 4	<del></del>	300	11300	Ctioi	13)
	Date of ruling or determination letter: (attach copy of letter if neces Domestic foundations that meet the section 4940(e) requirements in Part V, check here				1				0.
	of Part I. line 27b		and chief 176	<b>'</b>		<u> </u>			<del>- • •</del>
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% o	of Dart	t Lline 12 col (h)						
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other				2				0.
	Add lines 1 and 2	CI 3 CII	ner -0- <i>)</i>	1	3				0.
-	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Other	ers er	nter -0-1		4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	1013 01	intel 0 )		<del></del> -				0.
	Credits/Payments:								
	2010 estimated tax payments and 2009 overpayment credited to 2010	6a							
	Exempt foreign organizations - tax withheld at source	6b	·						
	Tax paid with application for extension of time to file (Form 8868)	6c	-						
	Backup withholding erroneously withheld	6d							
	Total credits and payments. Add lines 6a through 6d				7				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attach	ned			8			_	
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				9				0.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				10				
	Enter the amount of line 10 to be: Credited to 2011 estimated tax		Refund	ed 🕨	11				
	rt VII-A Statements Regarding Activities								
	During the tax year, did the foundation attempt to influence any national, state, or local legislat	tion o	or did it participate or in	tervene	ın			Yes	No
	any political campaign?						1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purpose	es (see	e instructions for defin	tion)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and of				d or				
	distributed by the foundation in connection with the activities.	•	, .						
	Did the foundation file Form 1120-POL for this year?						1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the y	/ear:							
	(1) On the foundation. > \$ (2) On foundation managers.			0.					
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditu								
	managers. ▶ \$0.								
	Has the foundation engaged in any activities that have not previously been reported to the IRS	S?					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 ins	strum	ent, articles of incorpo	ration, c	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	s					3		X
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	I/A	4b	_	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?						5		<u>X</u>
	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 eith	her:							
	By language in the governing instrument, or								
	• By state legislation that effectively amends the governing instrument so that no mandatory	direct	tions that conflict with	the state	law		Ì		
	remain in the governing instrument?						6	_X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?						7_	X	
	If "Yes," complete Part II, col (c), and Part XV								
8a	Enter the states to which the foundation reports or with which it is registered (see instructions <b>VA</b>	s) <b>&gt;</b>			_				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Atte	torney	General (or designate	)					
	of each state as required by General Instruction G? If "No," attach explanation						8b	X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of sect	tion 4	942(j)(3) or 4942(j)(5)	for cale	ndar				
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," co						9		X
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule			es			10	L	<u> </u>
						Fo	rm <b>990</b>	-PF	(2010)

	990-PF (2010) KIBLAWI FOUNDATION	26-3899	795	Page 5
Pa	rt 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)		11	X_
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?		12	<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X
	Website address N/A	<b>&gt;</b> /702\	759-	2010
14	The books are in care of THE FOUNDATION  Telephone no.	ZIP+4 ▶ <u>22</u>		
4-	Located at > 9715 ARNON CHAPEL ROAD, GREAT FALLS, VA	ZIP+4 <u>24</u>	000-	3910
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	15	N/	<b>&gt;</b>
4.0	and enter the amount of tax-exempt interest received or accrued during the year  At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank,	[ 10 ]		es No
10	securities, or other financial account in a foreign country?		16	X
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of			<del> </del>
	the foreign country			
Pa	art 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.		Y	es No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	res 🗶 No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
		Yes X No		ĺ
	(6) 1 2 1 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	Yes X No		
	(i) tay compensation e.g. pay or commence any a margin are provided in	Yes X No	1	
	(5) Transfer any income or assets to a disqualified person (or make any of either available	Yes X No		
	to the general of any of a mediantic beauty	res 🔼 No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after	Yes X No		
	termination of government service, if terminating within 90 days.) If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	168 (22) 110		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	N/A	1b	
	Organizations relying on a current notice regarding disaster assistance check here	<b></b>		
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2010?		1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1		
	defined in section 4942(j)(3) or 4942(j)(5)):			
:	a At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginn	ing	1	
	before 2010?	Yes X No		
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,	-1		
ı	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorre			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attack	N/A	0.	
	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.			İ
,	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
0	during the year?	Yes X No		
	b If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons a			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to			
	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,		
	Form 4720, to determine if the foundation had excess business holdings in 2010.)	N/A	3b	
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	<u> X</u>
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpo	se that		
_	had not been removed from jeopardy before the first day of the tax year beginning in 2010?	<del></del>	4b	N X
		For	m 990-	<b>PF</b> (2010)

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orm 990-PF (2010) KIBLAWI FOUNDATION			<u> 26-38997</u>	<u>95 Par</u>	ge <b>6</b>
Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	☐ Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955); or	r to carry on, directly or indire				
any voter registration drive?			s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	>	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		☐ Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or			
the prevention of cruelty to children or animals?			s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ler the exceptions described i				
section 53.4945 or in a current notice regarding disaster assistance (see instru		Ū	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check hi					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ned			
expenditure responsibility for the grant?		[/A □ Ye	s No		
If "Yes," attach the statement required by Regulations section 53.4945					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p			ĺ		
a personal benefit contract?	ouy promiumo on	☐ Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal henefit contract?			6Ь	X
If "Yes" to 6b, file Form 8870.	orsonal benefit bontract:				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	□ v <sub>e</sub>	s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	
Information About Officers Directors Trust		nagers, Highly			
Part VIII Paid Employees, and Contractors	oo, roundation ma		•		
1 List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expen	nșe
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, of allowanc	ither ces
	to position	0.1107	<u> </u>		
SEE STATEMENT 2		0.	0.		0.
SEE STATEMENT Z					
			ļ		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1\ If none	enter "NONE "	1		—
Z Compensation of five highest-paid employees (other than those inc		J.II.O. ITOITE	(d) Contributions to	(e) Exper	nse
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Exper	other
	devoted to position		compensation	allowand	762
NONE					
	<del></del>	<del> </del>		<del>                                     </del>	
				<del> </del>	
	-		1		
		<del> </del> -	<del> </del>		
		<u> </u>		<del> </del>	
	Į		1		
	L	<u> </u>	1	<u> </u>	
Total number of other employees paid over \$50,000			<b></b>		0
			Form	990-PF (2	:010)

Form **990-PF** (2010)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, 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	0.
Ь	Average of monthly cash balances	1b	20,000.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	20,000.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.	:	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	20,000.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	300.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	19,700.
6	Minimum investment return Enter 5% of line 5	6	985.
P	postributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	_
1	Minimum investment return from Part X, line 6	1	985.
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	985.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	985.
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	985.
P	art 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	5,000.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)		
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	5,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	5,000.
	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

Form **990-PF** (2010)

4940(e) reduction of tax in those years.

### Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,	ОСТРИС	Total o prior to a coo		
line 7				985.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years:			•	
g real so prior yours.		0.		
3 Excess distributions carryover, if any, to 2010:	·	0.		
a From 2005		-		
b From 2006	ľ			
c From 2007				
d From 2008				
e From 2009				
<del></del>	^			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ► \$ 5,000.			•	
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		<del></del>
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			005
d Applied to 2010 distributable amount	4 045			985.
e Remaining amount distributed out of corpus	4,015.			
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:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,015.			
b Prior years' undistributed income. Subtract	1,013.		<del></del>	
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				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 2005				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011				
Subtract lines 7 and 8 from line 6a	4,015.			
10 Analysis of line 9:				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008	,			
d Excess from 2009				J
e Excess from 2010 4,015.				
			•	Form 000 DE (0010)

form 990-PF (2010) KIBLAWI	FOUNDATION	<u> </u>			<u>-3899795</u>	Page 10
Part XIV Private Operating Fo		•	I-A, question 9)	N/A		
1 a If the foundation has received a ruling or						
foundation, and the ruling is effective for			▶ └	<del>-</del>		
<b>b</b> Check box to indicate whether the found		ng foundation described			4942(j)(5)	
2 a Enter the lesser of the adjusted net	Tax year	41,0000	Prior 3 years	(4) 0007		
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) To	181
investment return from Part X for						
each year listed					<del></del>	
<b>b</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		-		<u> </u>	<del>-  </del>	
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	<del></del>	1				
alternative test relied upon:						
"Assets" alternative test - enter:     (1) Value of all assets						
` '						
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)						
<b>b</b> "Endowment" alternative test - enter						
2/3 of minimum investment return shown in Part X, line 6 for each year listed						
c "Support" alternative test - enter:						
(1) Total support other than gross				:		
investment income (interest,						
dividends, rents, payments on securities loans (section						
512(a)(5)), or royalties)						
(2) Support from general public						
and 5 or more exempt organizations as provided in						
section 4942(j)(3)(B)(III)						
(3) Largest amount of support from						
an exempt organization						
(4) Gross investment income  Part XV Supplementary Info		to this most amb	if the foundation	n had \$5 000	or more in acc	ote
Part XV Supplementary Info at any time during t			ii the ioundatio	n nau \$5,000	or inore in ass	CIS
		instructions.,				
<ul> <li>Information Regarding Foundation</li> <li>List any managers of the foundation wh</li> </ul>		than 2% of the total con	tributions received by the	ne foundation hefore	the close of any tay	
vear (but only if they have contributed n	nore than \$5,000). (See	section 507(d)(2).)	mibunons received by the	ic touridation before	the close of any tax	
SEE STATEMENT 3	, ,					
b List any managers of the foundation wh	o own 10% or more of t	he stock of a corporation	(or an equally large por	tion of the ownershi	p of a partnership or	
other entity) of which the foundation has						
NONE						
2 Information Regarding Contributi	ion, Grant, Gift, Loar	n, Scholarship, etc., P	rograms:			
Check here ▶ 🗶 If the foundation of						i. If
the foundation makes gifts, grants, etc.	<del>'</del>			complete items 2a, l	b, c, and d.	
a The name, address, and telephone num	ber of the person to who	om applications should b	e addressed:			
<b>b</b> The form in which applications should t	pe submitted and inform	ation and materials they s	should include:			
c Any submission deadlines:						
d Any restrictions or limitations on award	s, such as by geographi	cal areas, charitable fields	s, kınds of ınstitutions, c	r other factors:		

Total				<b>▶</b> 3b	0
	NONE				
		!			
	oved for future payment				
Total				<b>▶</b> 3a	5,000
				}	
16TH F	LOOR NEW YORK, NY			SPORTS	
10 ROC	KEFELLER PLAZA,			ACCOUNT FOR CHILDRENS'	
	EAUDOIN FOUNDATION		ACTIVE	TO GO TO THE FOUNDATION'S PACES	5,000
	unng the year	or substantial contributor	recipient		
Nam	Recipient ne and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	D				

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

Enter gross amounts unless otherwise indicated.	Unrelated	d business income	Exclu	ded by section 512, 513, or 514	(e)
•	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b					_
c	I I				
d					
e					
f	-		ļ		
g Fees and contracts from government agencies					
2 Membership dues and assessments			ļ		<del></del>
3 Interest on savings and temporary cash					
investments		<del></del>			
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:	<del>                                     </del>				
a Debt-financed property				<del></del>	·
b Not debt-financed property			<del> </del>		
6 Net rental income or (loss) from personal					
property 7 Other investment income		<del></del>			
8 Gain or (loss) from sales of assets other		<del></del>	<u> </u>	<del></del>	
than inventory					
9 Net income or (loss) from special events	<del>                                     </del>	<del></del>	-		
10 Gross profit or (loss) from sales of inventory	-		_		-
11 Other revenue:		<del></del>			
a					
b					-
С					
d		- <u>-</u>			
e _					
12 Subtotal. Add columns (b), (d), and (e)		0.		0.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	0.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Acco	mplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which inc		n solumn (a) of Dort V/I A	aantril	hutad importantly to the appar	anliahmant of
Explain below how each activity for which inc the foundation's exempt purposes (other tha			CONTR	outed importantly to the accor	npasament or
ine realization o example parposes (either tha	by providing its				
				<del></del>	
		··			
		<del>_</del>			
				<del></del>	
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				<del></del>	
	<del></del>	<del></del> -			
		· · · · · · · · · · · · · · · · · · ·			<del></del>
023621 12-07-10	<del></del>				Form <b>990-PF</b> (2010)
12-07-10					101111 220-1 1 (2010)

Part	XVII	Information Re Exempt Organ	-	and Transactions a	ind Relationships with Noncha	ntable	
4 D	d the see		rectly engage in any of the following	a with any other areas areas	on described in section 501/c) of	Tyes	No
					-		1
	•		(3) organizations) or in section 52	·	Eations?		
		om the reporting founds	ation to a noncharitable exempt or	ganization oi:		12/11	x
•	) Cash					1a(1)	$+\frac{\alpha}{x}$
	-	ssets				18(2)	+
	her trans						x
	•		ble exempt organization			16(1)	
	•		ncharitable exempt organization			1b(2)	X
(3	) Rental	of facilities, equipment, i	or other assets			1b(3)	X
(4	) Remb	irsement arrangements				10(4)	X
(5	) Loans	or loan guarantees				1b(5)	X
			mbership or fundraising solicitation			1b(6)	X
c Si	naring of	iacilibes, equipment, ma	ling lists, other assets, or paid en	nployees		16	X
d if	the answ	er to any of the above is	"Yes," complete the following schi	edule, Column (b) should ah	ways show the far market value of the goods, o	other assets,	
Of	services	given by the reporting fo	oundation. If the foundation receiv	red less than fair market valu	ie in any transaction or sharing arrangement, s	how in	
CC	ilumn (d)	the value of the goods,	other assets, or services received.	•			
(&)Line	no (	b) Amount involved	(c) Name of nonchantable	e exempt organization	(d) Description of transfers, transactions, and	apanyod accouder	nonts
			A\N				
						<u> </u>	
						<del>"</del>	
	丁						
							•
***************************************							
	$\neg$						
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	<del>                                     </del>						······································
*****	<del></del>						
				··········			
0- 1-	**- (	4-1				····	
			tly affiliated with, or related to, one				
			r than section 501(c)(3)) or in sec	tion 527?	L	! Yes!	X No
<b>D</b> II	Yes, co	nplete the following sch		· · · · · · · · · · · · · · · · · · ·	<u> </u>	<del></del>	
		(a) Name of org	ent/auon	(b) Type of organization	(c) Description of relations	pib	
		N/A				···	
			<u> </u>				<del></del>
					<u> </u>		
	[11				<u> </u>		
٠.	and co	pe <u>nations of normal Ligacian</u> M <u>ode</u> tal Declaration of a prepa	o that I have exemined this return, includ mer (other than texnover or fictucient) is n	Ting accompanying achedules an based on all information of which:	id statements, and to the best of my knowledge and be	tref, it is true, co	Tect.
Sigr	η,		V		- to		
Here		<u> </u>	Maure	7.12.	20 PRESIDENT		
		ignature of officer or tru	istee	Date	Title	· · · · · · · · · · · · · · · · · · ·	
		Print/Type preparer's na	ime , Preparer's s	agnature	Date Check if PTIN		
_	Paid Scientiff Elicla Scretti Piers 6/30/11 self-employed P01258708						
Paid	( L	July.	Elida	DETTI-TIES	h 610411	יומט ט	- 50
Prep		Firm's name PIT		CPAS, P.C.	Firm's EIN		
Use	- L	79	00 WESTPARK DRI		00 57-158	7999	
	Γ	um s address MC	LEAN, VA 22102	-	Phone no (703	847-4	600
		<u></u>			1	, <b>-</b> ·	•

#### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

#### Schedule of Contributors

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

OMB No 1545-0047

2010

**Employer identification number** 

26-3899795 KIBLAWI FOUNDATION 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., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. 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).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Schedule B (F	orm 990, 990-EZ, or 990-PF) (2010)			Page $oldsymbol{1}$ of $oldsymbol{1}$ of Part (
Name of or			Employ	er identification number
KIBLA	WI FOUNDATION		26	-3899795
Part I	Contributors (see instructions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribut	tions	(d) Type of contribution
1	NAZEEH AND NADA KIBLAWI  9715 ARNON CHAPEL ROAD  GREAT FALLS, VA 22066-3910	\$26,0	<u>00.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribut	tions	(d) Type of contribution
		\$		Person Payroll Oncash Occash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribut	tions	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II of there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribu	tions	(d) Type of contribution
		\$		Person Payroll Omnocash Omnocash (Complete Part II if there is a noncash contribution )
(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contribu	tions	(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 contribu	tions	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

023452 12-23-10

of Part II

Name of organization

Employer identification number

### KIBLAWI FOUNDATION

26-3899795

art 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
		\$	
(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
		s	
(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
		\$	990, 990-EZ, or 990-PF) (

n 990, 990-EZ, or 990-PF) (2010)		Page of of Part Employer identification number						
inzation		Employer identification number						
I FOUNDATION		26-3899795						
more than \$1,000 for the year. Complete Part III, enter the total of exclusively religion	e columns (a) through (e) and the fo ous, charitable, etc , contributions o	ollowing line entry For organizations completing of						
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
(e) Transfer of gift								
Transferee's name, address, a	Relationship of transferor to transferee							
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
(e) Transfer of gift								
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee						
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
(e) Transfer of gift								
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee						
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
(e) Transfer of gift								
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee						
n	Exclusively religious, charitable, etc., in more than \$1,000 for the year. Complete Part III, enter the total of exclusively religions \$1,000 or less for the year (Enter this info (b) Purpose of gift  Transferee's name, address, a (b) Purpose of gift  Transferee's name, address, a (b) Purpose of gift  (b) Purpose of gift  Transferee's name, address, a (b) Purpose of gift	I FOUNDATION  Exclusively religious, charitable, etc., individual contributions to section more than \$1,000 for the year. Complete columns (a) through (e) and the f Part III, enter the total of exclusively religious, charitable, etc., contributions c \$1,000 or less for the year. (Enter this information once. See instructions).)  (b) Purpose of gift.  (c) Use of gift.  (d) Transfer of gift.  (e) Transfer of gift.  Transferee's name, address, and ZIP + 4.  (e) Transfer of gift.  (f) Use of gift.  (g) Transfer of gift.  (h) Purpose of gift.  (e) Transfer of gift.  (f) Use of gift.  (g) Transfer of gift.  (h) Purpose of gift.  (h) Purpose of gift.  (c) Use of gift.  (e) Transfer of gift.  (e) Transfer of gift.  (e) Transfer of gift.						

FORM 990-PF	OTHER EXPENSES			STATEMENT 1			
DESCRIPTION	(A) EXPENSES PER BOOKS		ST-		STED C	(D) CHARITABLE PURPOSES	
STATE REGISTRATION FEES BANK CHARGES	25. 487.		0.		0.	0.	
TO FORM 990-PF, PG 1, LN 23	512.	0.			0.		
	- LIST OF OF S AND FOUNDA			TORS	STAT	EMENT 2	
NAME AND ADDRESS		LE AND HRS/WK	-		EMPLOYEE BEN PLAN CONTRIB	EXPENSE	
NAZIH KIBLAWI 9715 ARNON CHAPEL ROAD GREAT FALLS, VA 22066-3910		PRESIDENT 5.00			0.	0.	
NADA H. KIBLAWI 9715 ARNON CHAPEL ROAD GREAT FALLS, VA 22066-3910	DIRECTOR 1.00			0.	0.	0.	
SAMER N. KIBLAWI 9715 ARNON CHAPEL ROAD GREAT FALLS, VA 22066-3910	DIRECTOR 1.00			0.	0.	0.	
ZEINA N. KIBLAWI 9715 ARNON CHAPEL ROAD GREAT FALLS, VA 22066-3910	DIRECTOR 1.00			0.	0.	0.	
FADI N. KIBLAWI 9715 ARNON CHAPEL ROAD GREAT FALLS, VA 22066-3910	DIREC 1	TOR .00	0.		0.	0.	
TOTALS INCLUDED ON 990-PF, P.	AGE 6, PART	VIII		0.	0.	0.	

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

3

NAME OF MANAGER

NAZIH KIBLAWI NADA H. KIBLAWI

#### 3868

(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

Form 8868 (Rev 1-2011)

If you	are filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box					
<ul><li>If you</li></ul>	are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of this	form)				
Do not o	complete Part II unless you have already been granted a	an automa	itic 3-month extension on a previously fi	led For	rm 8868			
Electron	nic filing (e-file). You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of time t	o file (6	6 months for a co	orporation		
required	to file Form 990-T), or an additional (not automatic) 3-more	nth extens	sion of time. You can electronically file F	orm 88	368 to request ar	n extension		
of time to	o file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for Tran	sfers A	Associated With	Certain		
	Benefit Contracts, which must be sent to the IRS in pap							
	v.irs.gov/efile and click on e-file for Charities & Nonprofits				J			
Part I	Automatic 3-Month Extension of Time	Only su	ibmit original (no copies needed)					
A corpor	ration required to file Form 990-T and requesting an autor			nplete				
Part I on	,			•		▶ □		
	corporations (including 1120-C filers), partnerships, REM come tax returns	ICs, and t	rusts must use Form 7004 to request ar	n exten	sion of time			
Type or	Type or Name of exempt organization					ion number		
print	KIBLAWI FOUNDATION	26-3899795						
File by the due date fo filing your	Number stands and an arrangement of the DO have a second and the DO hav							
return See instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions							
	GREAT FALLS , VA 22066-3910							
Enter the	e Return code for the return that this application is for (file	a separa	te application for each return)			0 4		
Annlica	tion	Return	Application					
Application Is For		Code	Is For		Return Code			
Form 990		01	Form 990-T (corporation)		07			
Form 990-BL		02	Form 1041-A		08			
Form 990-EZ		03		Form 4720				
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			
	THE FOUNDATION			•				
• The b	books are in the care of > 9715 ARNON CHA	PEL R	OAD - GREAT FALLS, V	/A 2	2066-391	0		
	phone No ► (703) 759-2818		FAX No ▶					
	organization does not have an office or place of business	s in the Ur	nited States, check this box			ightharpoonup		
	s is for a Group Return, enter the organization's four digit			ıs ıs fo	r the whole group	p, check this		
box 🕨	If it is for part of the group, check this box	and atta	ach a list with the names and EINs of all	memb	ers the extension	n is for		
1 In	equest an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time un	tıl				
	AUGUST 15, 2011 , to file the exemp	t organiza	ition return for the organization named a	above	The extension			
IS	for the organization's return for							
<b>&gt;</b>	<b>▶</b> X calendar year <u>2010</u> or							
<b>&gt;</b>	tax year beginning	, ar	nd ending		<u></u>			
2 If	If the tax year entered in line 1 is for less than 12 months, check reason. Initial return Final return  Change in accounting period							
3a If	this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any					
nonrefundable credits See instructions. 3a \$				\$	<u> </u>			
b If	this application is for Form 990-PF, 990-T, 4720, or 6069,	069, enter any refundable credits and				_		
_	stimated tax payments made Include any prior year overg		nt allowed as a credit 3b \$			0.		
	alance due. Subtract line 3b from line 3a Include your pa	•	• •			_		
	using EFTPS (Electronic Federal Tax Payment System)			3c	\$	0.		
Caution	. If you are going to make an electronic fund withdrawal	with this F	orm 8868, see Form 8453-EO and Form	8879-	EO for payment	instructions		

LHA

For Paperwork Reduction Act Notice, see Instructions.