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Form 990-PF

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

2011

For calendar year 2011 or tax year beginning , and ending Name of foundation A Employer identification number MARK & CAROL HYMAN FUND C/O SUSAN BESHAROV 04-6677395 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 4518 CUMBERLAND AVENUE -(-301)986-1969 City or town, state, and ZIP code C If exemption application is pending, check here CHEVY CHASE, MD 20815 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation Check type of organization: E If private foundation status was terminated ■ Section 4947(a)(1) nonexempt charitable trust
 □ Other taxable private foundation under section 507(b)(1)(A), check here X Cash I Fair market value of all assets at end of year J Accounting method: Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 3,811,069. (Part I, column (d) must be on cash basis.) ▶\$ Analysis of Revenue and Expenses Part I (b) Net investment (d) Disbursements (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not for charitable purposes (cash basis only) expenses per books income income necessarily equal the amounts in column (a).) Contributions, gifts, grants, etc., received N/A 2 Check X if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 46,243 46,236 STATEMENT 39,832 39,832 4 Dividends and interest from securities STATEMENT 5a Gross rents b Net rental income or (loss) ANNEDROGIEN 233,274 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 1,170,139. 233,274 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a and allowances b Less Cost of goops sold
c Gross profit of (loss)
C T 0 1 2012 တို -27.42511 Other income-FS. -27.425 STATEMENT Total, Add lines 1 through 11 .924 291,917 12 Compensation of office 0. 0. Other employee salaries and wag 15 Pension plans, employee benefits 16a Legal fees 0. STMT 4 2,323 2,323 **b** Accounting fees 0. STMT 40,644 40,644 c Other professional fees 17 Interest 1,542 1,542 0. STMT 6 18 Taxes 19 Depreciation and depletion 20 Occupancy 205 0 0. 21 Travel, conferences, and meetings 22 Printing and publications 201 0 0. STMT 7 23 Other expenses Operating 24 Total operating and administrative 44,915 44,509 0. expenses. Add lines 13 through 23 195,000 195,000. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. <u>239,915</u> 44,509 195,000. Add lines 24 and 25 27 Subtract line 26 from line 12: 52,009 & Excess of revenue over expenses and disbursements 247,408 b Net investment income (if negative, enter -0-) N/A Adjusted net income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions.

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Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) 3,827,680.

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

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· , · · · · . · ·

Part IV Capital Gains	and Losses for Tax on In	vestment	Income				01 00 /	7333ago v_
	ribe the kind(s) of property sold (e.g trehouse; or common stock, 200 shs			(b) H	ow acquired Purchase Donation		ate acquired ., day, yr.)	(d) Date sold (mo., day, yr.)
1a							_	
b SEE ATTACHED	STATEMENTS			ļ				
<u>c</u>				├		<u> </u>		
<u>d</u>				<u> </u>		├ -		
<u>- e - </u>				1 -		1		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale		<u>-</u>) Gain or (loss plus (f) minus	
<u>a</u>							*	
<u>b</u>				\dashv				
d				\dashv	- -			
e 1,170,139.	<u></u>		936,86	55.				233,274.
	ng gain in column (h) and owned by	the foundation		-		(I) Gains	s (Col. (h) gair	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (ı) col. (ı), ıf any		(I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))			เก -0-) or
a				.				
_b		 						
<u>c</u>								
								000 004
_e	Ļ			_				233,274.
2 Capital gain net income or (net ca	apıtal loss) $ \begin{cases} & \text{if gain, also enter} \\ & \text{if (loss), enter -0} \end{cases} $			}	2		<u>.</u>	233,274.
3 Net short-term capital gain or (los	•	nd (6):		٦١				
If gain, also enter in Part I, line 8,	• •						AT / 7	
Part V Qualification U	Inder Section 4940(e) for	Reduced	Tax on Net	Inve	stment l	ncome	N/ <i>E</i>	<u> </u>
(For optional use by domestic private							····	
(i or optional use by domestic private	o roundations subject to the section	1010(0) (0)	not invocation in	1001110.	,			
If section 4940(d)(2) applies, leave to	his part blank.							
Was the foundation liable for the sec	tion 4942 tax on the distributable an	nount of any ye	ear in the base pe	rıod?				Yes X No
If "Yes," the foundation does not qua								
1 Enter the appropriate amount in	each column for each year; see instr	uctions before	making any entri	es.				
(a) Base period years	(b)		Nakanka at aa	(c)				(d) bution ratio
Calendar year (or tax year beginni			Net value of no				(col. (b) di	vided by col. (c))
2010		4,000.			877,97			.044869
2009		1,348.			,461,54 ,618,66			.066834 .069570
2008		3,000.			888,46			.035276
2006		7,024.			014,74			.053248
2000	2	7,0220			<u> </u>	- / •		1033240
2 Total of line 1, column (d)							2	.269797
3 Average distribution ratio for the	5-year base period - divide the total	on line 2 by 5,	or by the number	r of yea	ars			
the foundation has been in existe	-	•	•	•		[:	3	.053959
								_
4 Enter the net value of noncharital	ble-use assets for 2011 from Part X,	line 5			-	4	4	3,847,085.
							ļ	
5 Multiply line 4 by line 3						!	5	207,585.
6 Enter 1% of net investment incor	ne (1% of Part I, line 27b)					<u> </u>	6	2,474.
							_ }	010 0=0
7 Add lines 5 and 6						- -	7	210,059.
8 Enter qualifying distributions from	m Part XII, line 4						8	195,000.
	n line 7, check the box in Part VI, line	e 1b, and comp	lete that part usir	ng a 19	6 tax rate.			
See the Part VI instructions.							<u> </u>	

MARK & CAROL HYMAN FUND

	1990-PF (2011) C/O SUSAN BESHAROV Int VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 494	M(a) or 4		66773			Page 4
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.)		300 111	3110	-	13,
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions	.,					
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	" \	1	1		4 9	48.
	of Part I, line 27b	ĺ				<u> </u>	10.
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (I	,]		1			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	,,.)	2				0.
	Add lines 1 and 2		3		-	4.9	48.
•	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4			<u> </u>	0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5			4,9	
			-	<u> </u>		<u> </u>	10.
	· · · · · · · · · · · · · · · · · · ·	3,193.					1
	Exempt foreign organizations - tax withheld at source 6b	<u> </u>	1				
	Tax paid with application for extension of time to file (Form 8868) 6c		1				ı
	Backup withholding erroneously withheld 6d	· · · · · · · · · · · · · · · · · · ·	1				
	Total credits and payments. Add lines 6a through 6d		7			ว 1	93.
	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached		8			<u> </u>	<u> </u>
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9			1 7	55.
			10				<u> </u>
		efunded >	11				
	Int VII-A Statements Regarding Activities	erunueu -		<u> </u>		•	
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participat	e or intervene	- In	— Т		Yes	Ño
	any political campaign?	C OF IIIICI VOIII	111	F	1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for	definition\2		F	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mate.	-	ad ar	<u> </u>	10		
	distributed by the foundation in connection with the activities.	ilais publisii	su oi				1
	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 year:			-	10		
	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$	0.		1			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on fou		-				Ĭ.
	managers. > \$ 0.	indation		l			ı
	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			 			
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of in	corporation	nr .				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	oorporation,	,		3		х
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			-	4a		X
	of "Yes," has it filed a tax return on Form 990-T for this year?		N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			' <i>'</i>	5		х
	If "Yes," attach the statement required by General Instruction T.			-	<u> </u>		
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:						*
	By language in the governing instrument, or						
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict 	with the stat	a law				
	remain in the governing instrument?	with the stat			6		x
7	Did the foundation have at least \$5,000 in assets at any time during the year?			F	7	Х	
	If "Yes," complete Part II, col. (c), and Part XV.			-			
	Enter the states to which the foundation reports or with which it is registered (see instructions)						
ou .	MA						
ь. Ь	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or desi	nnate)					
	of each state as required by General Instruction G? If "No," attach explanation	g.iatoj			8b	Х	
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4943	2(1)(5) for cal	endar	<u> </u>	-		
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV	-(J)(O) IOI Gali	, iuai		9		x
	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and ac	idroscor		 	10		X
-10	and any persons address about the contribution of thing the tax years in less, attach a scriedule listing their names and at	ALI C3303				DE	

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

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

Form 4720, to determine if the foundation had excess business holdings in 2011.)

had not been removed from jeopardy before the first day of the tax year beginning in 2011?

b If "Yes," did it have excess business holdings in 2011 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

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X

3b

4a

Yes X No

N/A

MARK & CAROL HYMAN FUND Form 990-PF (2011) C/O SUSAN BESHAROV 04-6677395 Page 6 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (i) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained 」Yes ∟□ No expenditure responsibility for the grant? N/A If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b X If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7b b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation, (d) Contributions to employee benefit plans and deferred compensation (c) Compensation (b) Title, and average hours per week devoted to position (e) Expense account, other (If not paid, enter -0-) (a) Name and address allowances SUSAN HYMAN BESHAROV TRUSTEE 4518 CUMBERLAND AVE. 0. CHEVY CHASE, MD 20815 3.00 0 0 KATHERINE HYMAN COOK TRUSTEE 7869 ESTRELLA COURT SARASOTA, FL 34238 0. 1.00 0 0 DOUGLAS J. BESHAROV TRUSTEE 4518 CUMBERLAND AVE. CHEVY CHASE, MD 20815 3.00 0 0 0. WILLARD T. COOK TRUSTEE 7869 ESTRELLA COURT SARASOTA, FL 34238 1.00 0. 0 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other (b) Title, and average (a) Name and address of each employee paid more than \$50,000 hours per week (c) Compensation devoted to position allowances NONE

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

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Part VIII Information About Officers, Directors, Trustees, Foundary Paid Employees, and Contractors (continued)		<u> </u>
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	<u> </u>	
	-	
Total number of others receiving over \$50,000 for professional services		>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produced.		Expenses
1 N/A	3000, 010.	
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	ines 1 and 2.	Amount
1 N/A		

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Total. Add lines 1 through 3

All other program-related investments. See instructions.

C/O SUSAN BESHAROV 04-6677395 Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) 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 <u>3,679,559.</u> 226,111 Average of monthly cash balances 1b c Fair market value of all other assets 10 905,670. 1d d Total (add lines 1a, b, and c) -e-Reduction claimed for blockage or other factors reported on lines 1a and-0 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 3 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) <u>3,847,085.</u> Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here
and do not complete this part.) 192,354. Minimum investment return from Part X, line 6 1 4,948 Tax on investment income for 2011 from Part VI, line 5 Income tax for 2011. (This does not include the tax from Part VI.) b Add lines 2a and 2b C 3 187,406. Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 406. 5 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 6 187 406. 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: 195,000. 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 4 195,000. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 195,000. Adjusted qualifying distributions. Subtract line 5 from line 4

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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4940(e) reduction of tax in those years.

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C/O SUSAN BESHAROV

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,	33753			
line 7				187,406.
2 Undistributed income, if any, as of the end of 2011			101 207	
a Enter amount for 2010 only			191,387.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2011:		0.		
a From 2006				
b From 2007	ļ			
c From 2008				
d From 2009				
e From 2010				E
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2011 from				
Part XII, line 4: ► \$ 195,000.				
a Applied to 2010, but not more than line 2a			191,387.	
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 2011 distributable amount				3,613.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2011 (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:				
·	0.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'		0.		
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 2010. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011. Subtract			-	
lines 4d and 5 from line 1. This amount must				
be distributed in 2012				183,793.
7 Amounts treated as distributions out of				<u> </u>
corpus to satisfy requirements imposed by				•
section 170(b)(1)(F) or 4942(g)(3)	0.			'
8 Excess distributions carryover from 2006			 -	
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012.	-			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2007				
b Excess from 2008				
c Excess from 2009				
d Excess from 2010				
e Excess from 2011				- 000 DE

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Pa	art XIV Private Operating Fo	oundations (see in:	structions and Part VII-	A, question 9)	N/A	, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>			
1 a	If the foundation has received a ruling or	determination letter that	it is a private operating						
	foundation, and the ruling is effective for 2011, enter the date of the ruling								
b	Check box to indicate whether the found	ation is a private operatir	ng foundation described i	n section	4942(J)(3) or 49	42(_J)(5)			
2 a	LEnter the lesser of the adjusted net	Tax year		Prior 3 years	*				
	income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(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;								
á	a "Assets" alternative test - enter;								
	(1) Value of all assets								
	(2) Value of assets qualifying								
	under section 4942(j)(3)(B)(i)								
t	"Endowment" alternative test - enter 2/3 of minimum investment return								
	shown in Part X, line 6 for each year								
	listed								
("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				1				
P	art XV Supplementary Info			if the foundation	had \$5,000 or mo	ore in assets			
	at any time during t		ructions.)						
1	Information Regarding Foundation	_							
	a List any managers of the foundation where			ributions received by the	foundation before the clos	se of any tax			
	year (but only if they have contributed n	iore man 45,000). (See s	section 507(u)(2).)						
	ONE			· · · · · · · · · · · · · · · · · · ·					
1	 List any managers of the foundation who other entity) of which the foundation has 			or an equally large portion	on of the ownership of a pa	artnership or			
BT/		Ja 1070 of greater filteres	ou .						
	ONE				· · · · · · · · · · · · · · · · · · ·				
2	Information Regarding Contributi								
	Check here X if the foundation of the foundation makes gifts, grants, etc.	•	•	•					
		<u> </u>		•	omplete items za, b, e, and				
•	a The name, address, and telephone num	per of the person to who	m applications should be	addressed,					
_	b The form in which applications should b	on cubmitted and informa	tion and materials they sh	ould include:					
,	The form in which applications should be	e supmitted and informa	mon and materials mey si	iodia iliciade.					
_	c Any submission deadlines:								
,	sary Submission doddings.								
_	d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields	kinds of institutions, or	other factors:				
	, , content of mindion on and a	., o, goograpino							
1226	301 12-02-11					Form 990-PF (2011)			

C/O SUSAN BESHAROV

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3 Grants and Contributions Paid During the You		Dowmont		
Recipient	If recipient is an individual,	Payment	T	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	Теорин		
AMERICAN CAMPING FOUNDATION	NONE	EXEMPT	EXEMPT	
5000 STATE ROAD, 67 NORTH		ORGANIZATION		2 000
MARTINSVILLE, IN 46151-7902	<u> </u>			3,000.
AMERICAN TASK FORCE FOR LEBANON	NONE	EXEMPT	EXEMPT	
1100 CONNECTICUT AVE., NW #1250		ORGANIZATION		
WASHINGTON DC 20037				5,000.
DAY WITHOUT MIGHING OF ARM	TONE	EVENDO	EVENDM	
BALTIMORE MUSEUM OF ART 10 MUSEUM DRIVE	NONE	EXEMPT ORGANIZATION	EXEMPT	
BALTIMORE MD 21218-3898		ORGANIZATION		5,000.
BADIIMORE, MD 21210-3090				5,000.
BROOKLYN TECH ALUMNI FOUNDATION	NONE	EXEMPT	EXEMPT	
29 FORT GREENE PLACE BROOKLYN NY 11217		DRGANIZATION		2,500.
DROWN, NI 1121,				2,300,
CHILDREN FIRST	NONE	EXEMPT	EXEMPT	
1273 NORTH ORANGE AVE		ORGANIZATION		
SARASOTA FL 34234				13,000
-	TINUATION SHEE	et(s)	<u>▶ 3a</u>	195,000.
b Approved for future payment				
NONE				
HOME				
Total		<u>-•</u>	▶ 3b	0.00 DE (2014)

Form 990-PF (2011)

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Part XVI-A Analysis of Income-Producing Activities

	I I I I I I I I I I I I I I I I I I I				
Enter gross amounts unless otherwise indicated.	(a) Business	usiness income (b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue: a	code	Amount	code	Amount	Tunction income
b	_				
- C- <u></u>					· · · · · · · ·
d			\vdash		
e	-		\vdash		
g Fees and contracts from government agencies	-				
Membership dues and assessments		- 			· · · · · · · · · · · · · · · · · · ·
3 Interest on savings and temporary cash					
investments			14	46,243.	
4 Dividends and interest from securities			14	39,832.	
5 Net rental income or (loss) from real estate:		· · · · · · · · · · · · · · · · · · ·		3370321	
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property				1	
7 Other investment income	900099	-27,425.			
8 Gain or (loss) from sales of assets other					
than inventory			18	233,274.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a 2008 TAX REFUNDS	-				
MISCELLANEOUS	-				
c			-		
d	-		\vdash		
6	-	-27,425.		319,349.	
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		-41,445.	LI		
(See worksheet in line 13 instructions to verify calculations.)				13 <u>—</u>	<u> </u>
		aliahment of E		Dumassa	
Part XVI-B Relationship of Activities				<u> </u>	
Explain below how each activity for which income the foundation's exempt purposes (other than			contrib	uted importantly to the accom	plishment of
with reduced to exemple purposes (exits) the	an by providing lands	, tor dadir parposasji			.
		-			
	•			- ·	
			·		
	·				
	<u>. </u>			·	
		 			
					
I					

12-02-11

Form 990-PF (2		USAN BESHAROV	r UND	04-66	77395	Pa	ge 13	
Part XVII			and Transactions ar	nd Relationships With Nonch			ye is	
•	Exempt Organ							
	rganization directly or indi	rectly engage in any of the follow)(3) organizations) or in section 5				Yes	No	
		ation to a noncharitable exempt of		zanons.				
(1) Cash					1a(1)		X	
(2) Other					1a(2)		Х	
b -Other tran	nsactions:					-		
(1) Sales	s of assets to a noncharita	ble exempt organization			1b(1)		X	
(2) Purchases of assets from a noncharitable exempt organization								
• •	al of facilities, equipment,				1b(3)		X	
• •	bursement arrangements				1b(4)		X	
• •	ns or loan guarantees	omborohin or fundroising collectat	2000		1b(5)		X X X X X	
		embership or fundraising solicitat ailing lists, other assets, or paid e			1b(6) 1c		X	
_				ays show the fair market value of the goods		ets.		
				e in any transaction or sharing arrangement		J.0,		
	• • •	other assets, or services received		, , , , ,	•			
(a) Line no	(b) Amount involved	(c) Name of noncharitat	ole exempt organization	(d) Description of transfers, transactions, ar	nd sharing arra	angeme	nts	
		N/A						
		<u> </u>		· · · · · · · · · · · · · · · · · · ·				
	<u> </u>		· · · · · · · · · · · · · · · · · · ·	<u> </u>				
				-				
-								
	. <u> </u>	<u> </u>						
	•	ctly affiliated with, or related to, or	, ,	ations described		72	٦	
		er than section 501(c)(3)) or in se	ection 527?		Yes	LX	No	
b If Yes, c	complete the following sch (a) Name of or		(b) Type of organization	(c) Description of relatio	nshin			
	N/A	gamzadon	(b) Type of organization	(b) bescription of relation	nonp			
	14/21							
		-				-		
					May the IRS d			
Sign			i e la alia		return with the shown below			
Here Susan H. Kesharar 19/28/12 Trustec						<u> </u>	∐ No	
	Print/Type preparer's p		Date	Title Check if PTI	N			
	Print/Type preparer's n	Preparer s	alyliatule)	self- employed	14			
Paid	MARNETTE N	AVERS IVIU	THAX CHAI	11125113	00853	721		
Preparer			P.C.		11567		·	
Use Only		_,,, ~,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_ , _ ,		/			
		360 BEVERLY ROA	D, SUITE 300					
	1	CLEAN, VA 22101		Phone no. (70	3)821	<u>-07</u>	02	
			· · · · · · · · · · · · · · · · · · ·		Form 990	-PF	(2011)	

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution any foundation manager or substantial contributor status of Name and address (home or business) recipient CORCORAN GALLERY OF ART NONE EXEMPT EXEMPT 500 SEVENTEENTH ST. N.W. DRGANIZATION 500. WASHINGTON DC 20006 CRADLEROCK CHILDREN'S CENTER NONE EXEMPT EXEMPT 9243 RED CART COURT ORGANIZATION COLUMBIA MD 21045 5,000. NONE EXEMPT EXEMPT FOLGER THEATRE 201 EAST CAPITAL ST, SE ORGANIZATION 5,000. WASHINGTON DC 20003 FRIENDS OF THE NATIONAL ZOO NONE EXEMPT EXEMPT NATIONAL ZOOLOGICAL PARK ORGANIZATION WASHINGTON _ DC 20008 2,000. HOPE LODGE AMERICAN CANCER SOCIETY NONE EXEMPT EXEMPT 125 SOUTH HUNTINGTON AVE. organization 2,500. BOSTON MA 02130 LEBANESE LADIES CULTURAL SOCIETY NONE EXEMPT EXEMPT ORGANIZATION 1499 WEMBLEY ROAD SAN MARINO, CA 91108 1,000. NONE EXEMPT MOTE MARINE LABORATORY EXEMPT 1600 KEN THOMPSON PARKWAY DRGANIZATION 20 000. SARASOTA FL 34236-1096 NATIONAL GALLERY OF ART NONE EXEMPT EXEMPT 2000B SOUTH CLUB DRIVER DRGANIZATION LANDOVER MD 20785 22,500. PHILLIPS COLLECTION NONE EXEMPT EXEMPT ORGANIZATION 1600 TWENTY-FIRST STREET, N.W. WASHINGTON, DC 20009 5,000. EXEMPT EXEMPT PILCHUCK GLASS SCHOOL NONE ORGANIZATION 430 YALE AVENUE NORTH 3,000. SEATTLE WA 98109 Total from continuation sheets 166 500.

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor EXEMPT PLANNED PARENTHOOD OF SOUTHWEST AND NONE EXEMPT CENTRAL FLORIDA, INC. ORGANIZATION 736- CENTRAL-AVENUE ~ 10,000. SARASOTA FL 34236 QUEENS COLLEGE FOUNDATION NONE EXEMPT EXEMPT 65-30 KISSENA BLVD. ORGANIZATION FLUSHING NY 11367 2,500. NONE EXEMPT EXEMPT SCOPE DRGANIZATION 1226 N. TAMIAMI TRAIL SARASOTA, FL 34326 10,000. SHAKESPEARE THEATRE NONE EXEMPT EXEMPT 516 EIGHTH STREET, S.E. DRGANIZATION WASHINGTON DC 20003 5,000. STUDIO PLACE ARTS NONE EXEMPT EXEMPT 201 NORTH MAIN STREET DRGANIZATION BARRE, VT 05641 5,000. THE STUDIO THEATRE NONE EXEMPT EXEMPT 1333 P STREET, N.W. ORGANIZATION 3,500. WASHINGTON DC 20005 NONE U.U.C.S. (UNITARIAN UNIVERSALIST EXEMPT EXEMPT CHURCH OF SARASOTA) ORGANIZATION 3975 FRUITVILLE ROAD SARASOTA FL 34232 6,500, UNIVERSITY OF MARYLAND SYSTEM NONE EXEMPT EXEMPT ORGANIZATION FOUNDATION 3300 METZEROTT ROAD 37,500. ADELPHI MD 20873 VAN WEZEL FOUNDATION NONE EXEMPT EXEMPT ORGANIZATION 777 N TAMIAMI TRAIL 5,000. SARASOTA, FL 34236 WILDLIFE CENTER OF VENICE NONE EXEMPT EXEMPT ORGANIZATION 3252 BORDER ROAD 5,000. VENICE FL 34292 Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or contribution show any relationship to status of recipient Amount any foundation manager Name and address (home or business) or substantial contributor EXEMPT YMCA FOUNDATION OF SARASOTA, INC. NONE EXEMPT DRGANIZATION ONE -SOUTH--SCHOOL AVENUE #302-5,000. SARASOTA FL 34237 YOUTH EXPERIENCING ART, INC. NONE EXEMPT EXEMPT DRGANIZATION 2751 DONALD ROSS RD. E 5,000. SARASOTA, FL 34240 Total from continuation sheets

Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo., day, yr.) D - Donation 1a AMERRA DISTRIBUTIONS VARIOUS VARIOUS b BOARDWALK PIPELINE PT - 500SH P VARIOUS VARIOUS c BUCKEYE PARTNERS UTS 235SH P VARIOUS 12/20/11 d BUCKEYE PARTNERS UTS 320SH P <u>09/21/1012/20/11</u> P e CHESAPEAKE MIDSTREAM 435SH VARIOUS |12/20/11 f CHESAPEAKE MIDSTREAM - 80SH P 09/21/1012/20/11 g COPANO ENERGY - 115SH P 09/21/10VARIOUS 335SH h COPANO ENERGY LLC P 09/21/1012/20/11 | CRESTWOOD MIDSTREAM -P 04/29/1112/20/11 DCP MIDSTREAM PARTNERS 09/21/1012/20/11 170SH P 09/21/1008/11/11 70SH P k DCP MIDSTREAM PARTNERS 9293SH P I DELAWARE SELECT GROWTH 09/17/1006/21/11 m EL PASO PIPELINE PTNR 415SH P VARIOUS |12/20/11 770SH P VARIOUS 12/20/11 n EL PASO PIPELINE PTNR P o EMERGING FREE MARKETS COUNTRY FUND VARIOUS VARIOUS (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (or allowable) (e) plus (f) minus (g) plus expense of sale 0. 10,999. 10,999. а 13,592. 14,259. -6<u>67.</u> b 14,790. 1,315. 13,475. C 1,790. 20,139. 18,349. d 11,729. 10,517. 1,212. 2.157. 223. 1,934. 1,863. 3,838. 1,975. 5,253. 11,006. 5,753. h 2,287. 2,047. 240. 2,919. 7,492. 4,573. 2,670. 787. 1,883. k 275,000. 340,557. 65,557. <u>13,9</u>27. <u>1,868</u>. 12,059. m 25,840. 22,373. 3.467. п 1,013. -1,013. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any 0. a -6<u>67.</u> b ,315. 1,790. d ,212. 223. f 1,863. g 5,253. ħ 240. 2,919. 787. k 65.557. 1 1,868. m 3,467. n -1,013. 0 If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 2 Capital gain net income or (net capital loss) Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8

Part IV Capital Gains and Lo		04-007	_1333 E	AGE Z OF 5
	sses for Tax on Investment Income	i o a rool oatata	(h) How acquired	(c) Date acquired (d) Date sold
2-story bi	describe the kind(s) of property solo rick warehouse; or common stock, 20	00 shs. MLC Co.	P - Purchase D - Donation	(c) Date acquired (d) Date sold (mo., day, yr.)
1a EMERGING FREE	MARKETS COUNTRY	FUND	P	VARIOUS VARIOUS
b ENBRIDGE ENERG	Y PARTNERS - 450	SH	P	09/21/1012/20/11
c ENERGY TRANSFE	R PARTNERS - 415	SH	P	09/21/10VARIOUS
d ENERGY TRANSFE	R EQUI - 50SH		P	05/09/1112/20/11
e ENERGY TRANSFE	R EQUITY - 430 S	H	P	09/21/1010/06/11
1-ENERGY TRANSFE			P	10/05/1112/20/11
9 ENTERPRISE PRD	PRTNR - 50SH		P	VARIOUS 12/20/11
h ENTERPRISE PRD			P	VARIOUS 12/20/11
HOLLY ENERGY P			P	09/21/1012/20/11
HOLLY ENERGY P			P	09/21/1004/19/11
	0SH		P	09/21/1009/23/11
	OBAL TIMBER & FO	RESTRY - 100SH	P	02/09/1106/28/11
m KINDER MORGAN			P	09/21/1012/20/11
n KINDER MORGAN			P	VARIOUS VARIOUS
o KINDER MORGAN			P	VARIOUS 12/20/11
	(f) Depreciation allowed	(g) Cost or other basis) Gain or (loss)
(e) Gross sales price	(or allowable)	plus expense of sale		olus (f) minus (g)
<u>a</u>		1,337.		-1,337.
b 13,967.		9,906.		4,061.
c 18,684.		14,593.		4,091.
d 1,985.		1,405.		580.
e 16,785.		12,083.		4,702.
f 2,701.		2,110.		591.
g 2,242.		1,496.		746.
h 43,231.		28,880.		14,351.
8,661.		7,156.		1,505.
2,467.		1,952.		515.
k 7,147.		9,187.		-2,040.
4,207.		4,889.		-682.
m 16,113.		10,744.		5,369.
n 7,317.		5,103.		2,214.
o 8,551.		8,328.		223.
Complete only for assets shown	ng gain in column (h) and owned by	the foundation on 12/31/69		sses (from col. (h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess but r	of col. (h) gain over col. (k), not less than "-0-")
a				-1,337.
b	-			4,061.
C				4,091.
d				580.
e				4,702.
<u> </u>				591.
<u>.</u>				746.
h				14,351.
"				1,505.
		· · · · · · · · · · · · · · · · · · ·		515.
1				-2,040.
1				-2,040· -682·
<u></u>				5,369.
<u>m</u>	-			2,214.
<u>n</u>				2,214.
0		D-41 line 7		443.
2 Capital gain net income or (net c	apital loss) { If gain, also enter "-C	in Part I, line /)-" in Part I, line 7	2	
3 Net short-term capital gain or (lo If gain, also enter in Part I, line 8 If (loss), enter "-0-" in Part I, line		d (6):	3	
	· - 			

C/O SUSAN BESHAR		04-66	17395	PAGE 3 OF 5					
Part IV Capital Gains and Los	sses for Tax on Investment Income	<u></u>	·						
(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co. (b) How acquired P - Purchase D - Donation (mo., day, yr.) (d) Date sold (mo., day, yr.)									
1a KINDER MORGAN	MGMT - 142SH		P	09/21/1012/20/11					
b LYNX GLOBAL RE			P	01/03/11					
c MAGELLAN MIDST	REAM - 60SH		P	08/18/1112/20/11					
d MAGELLAN MIDST			P	VARIOUS VARIOUS					
e MARKWEST ENERG			P	09/21/1012/20/11					
MARKWEST ENERG			- P	09/21/1006/03/11					
g NISKA GAS STOR			P	09/21/1005/19/11					
h NUSTAR ENERGY			P	09/21/10VARIOUS					
OILTANKING PTN			P	VARIOUS 12/20/11					
ONEOK PARTNERS			P	09/21/1012/20/11					
k PAA NATURAL GA	S STORAGE - 80SH		P	09/21/1006/10/11					
PLAINS ALL AME			P	09/21/1012/20/11					
m PLAINS ALL AME			P	VARIOUS 12/20/11					
	DISTRIBUTIONS		P	VARIOUS VARIOUS					
0 PTP - PASSTHRO	UGH LT CAP GAIN/	LOSS	P	VARIOUS VARIOUS					
(a) Crops gales prins	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (loss)					
(e) Gross sales price a 10,519.	(or allowable)	plus expense of sale) plus (f) minus (g) 2 , 635 •					
015 010		200,000.		17,912.					
2 000		2,826.		1,072.					
20.000		28,965.		10,924.					
10 000		5,788.		4,432.					
f 10,220.		457.		231.					
2 124		2,815.	 -	319.					
4 5 5 3 3	<u></u>	14,385.		1,148.					
h 15,533.	<u> </u>	2,190.	- 	474.					
24,939.		12,225.		12,714.					
1 600		1,815.		-118.					
$\frac{k}{1,697.}$	<u> </u>	21,739.		5,620.					
m 4,911.		3,902.		1,009.					
n 26,035.		26,035.		0.					
0 373.	L	20,033.		373.					
	ng gain in column (h) and owned by	the foundation on 12/31/69	(0.1	osses (from col. (h))					
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (exces	s of col. (h) gain over col. (k), t not less than "-0-")					
a				2,635.					
b				17,912.					
С				1,072.					
d				10,924.					
е				4,432.					
f				231.					
<u>g</u>				319.					
h				1,148.					
1				474.					
1				12,714.					
k				-118.					
1				5,620.					
m				1,009.					
n				0 <u>.</u>					
0				373.					
2 Capital gain net income or (net ca	apital loss) { If gain, also enter	r in Part I, line 7)-" in Part I, line 7	2						
3 Net short-term capital gain or (logging also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line		oa (6):	3						
			-						

Part IV Capital Gains and Los	sses for Tax on Investment Income			
(a) List and	describe the kind(s) of property sold ick warehouse; or common stock, 20	I, e.g., real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (d) Date sold (mo., day, yr.)
1a PTP - PASSTHRO	UGH ST CAP GAIN/	LOSS	P	VARIOUS VARIOUS
b REGENCY ENERGY	PARTNERS - 140S	H	P	VARIOUS 12/20/11
c REGENCY ENERGY	PARTNERS - 665	SH	P	09/21/1012/22/11
d SPDR GOLD TR			P	02/09/11VARIOUS
e SPECTRA ENERGY		SH	P	09/21/1012/20/11
f SPECTRA ENERGY		<u> </u>	P	VARIOUS VARIOUS
g SUNOCO LOGISTI			P	09/21/10VARIOUS
h SUNOCO LOGISTI			P	09/21/10VARIOUS
I TARGA RESOURCE			P	12/06/10VARIOUS
J TARGA RESOURCE			P	09/21/10/12/20/11
k TARGA RESOURCE			P	09/21/1012/20/11
TC PIPELINES L			P	09/21/1008/30/11
m TESORO LOGISTI			P P	VARIOUS 12/20/11
n WESTERN GAS PA			P	09/21/1012/20/11
o WESTERN GAS PA			P	VARIOUS 12/20/11
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		n) Gain or (loss) plus (f) minus (g)
a 2.255		172.		<u>-172.</u>
b 3,357.		2,349.		1,008.
c 15,946.		11,158.	<u> </u>	4,788.
d 89.		75.		14.
e 6,079.		5,599.		480.
f 2,453.		2,379. 15,219.	· · ·	74. 4,746.
$\frac{g}{h} = \frac{19,965}{5073}$		1,773.		3,300.
h 5,073.		2,643.		1,320.
14,613.		7,084.		7,529.
k 1,344.		717.		627.
4,044.		3,711.		333.
m 3,074.		2,041.	·····	1,033.
n 6,269.		4,547.		1,722.
08,897.		6,453.		2,444.
	ng gain in column (h) and owned by t		(I) Lo	sses (from col. (h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		of col. (h) gain over col. (k), not less than "-0-")
a	_			-172.
b				1,008.
<u>c</u>				4,788.
<u>d</u>				
<u>e</u>				480.
<u>f</u>				74.
<u>g</u>			·	4,746.
h				3,300.
1				1,320.
				7,529.
<u>k</u>				627.
<u> </u>				333.
<u>m</u>				1,033.
<u>n</u>		<u> </u>		1,722.
0	<u> </u>			2,444.
2 Capital gain net income or (net ca	apital loss) { If gain, also enter "-0	in Part I, line 7 In Part I, line 7	2	
If gain, also enter in Part I, line 8,		d (6):		
If (loss), enter "-0-" in Part I, line	0		3	

	Capital Gains and Los	sses for lax on investment income					
	(a) List and 2-story br	describe the kind(s) of property sold ick warehouse; or common stock, 20	l, e.g., real estate, 10 shs. MLC Co.		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	WILLIAMS PARTN	ERS LP - 130SH			P	VARIOUS	VARIOUS
	WILLIAMS PARTN				P	09/21/10	
_	CAPITAL GAINS						
d							
e					_		
f							
g							
h							
1							
-							
k							
ī							
m	1						
n					_		
_0							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(e) p	Gain or (loss)	
_	7,523.		4,908.				2,615.
<u>a</u> b	30,822.		19,633.				11,189.
C	11,776.		19,099.				11,776.
d d							11,770.
e							
f							
g							
h h							
"	-		-			_	
÷							
k							
${1}$							
m							
n							
0							
<u>-</u>	Complete only for assets shown	ng gain in column (h) and owned by t	the foundation on 12/31/69		(I) L o	sses (from col. (h)	
_	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		Gains (excess	of col. (h) gain ove not less than "-0-")	r col. (k),
_		45 01 12/0 1/00	Over our (j), it ally				2 61 5
<u>a</u>							2,615.
<u>b</u>			<u></u>				11,189. 11,776.
<u>c</u>				-			TT' / / O ·
<u>d</u>				-		-	
<u>e</u>							
<u>f</u>				 			
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0		<u> </u>	<u> </u>	 	Γ		
2	Capital gain net income or (net ca	apital loss) { If gain, also enter If (loss), enter *-0	in Part I, line 7	2			233,274.
				├			400,414.
3	Net short-term capital gain or (los If gain, also enter in Part I, line 8,	ss) as defined in sections 1222(5) an	d (6):	1	1		
	If (loss), enter "-0-" in Part I, line 8,		J	3	1	N/A	

FORM 990-PF INTEREST ON SAVINGS A	ND TI	EMPORARY CA	ASH :	INVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
AMERRA AGRI OFFSHORE FUND LP EMERGING FREE MARKETS COUNTRY FUND	<u>)</u>		-	·		13.
FIDELITY GAMMA FUND PTP ACTIVITY					23,7	25. 97. 34.
TOTAL TO FORM 990-PF, PART I, LINE	2 3, (COLUMN A		-	46,2	43.
FORM 990-PF DIVIDENDS AND) INT	EREST FROM	SEC	JRITIES	STATEMENT	2
SOURCE	GROS	SS AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT)
CHARLES SCHWAB DELAWARE SELECT 20 EMERGING FREE MARKETS COUNTRY		147. 104.		0.		47. 04.
FUND FIDELITY PTP ACTIVITY		5,212. 45,642. 503.		0. 11,776. 0.	5,2 33,8 5	
TOTAL TO FM 990-PF, PART I, LN 4		51,608.		11,776.	39,8	32.
FORM 990-PF C	THER	INCOME			STATEMENT	3
DESCRIPTION		(A) REVENUE PER BOOKS	5	(B) NET INVEST- MENT INCOME		
PTP ACTIVITY		-27,42527,42		-27,425	•	
TOTAL TO FORM 990-PF, PART I, LINE	· 11	-27,	425.	-27,425	•	

FORM 990-PF	ACCOUNTI	NG FEES	S.	PATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITA PURPOS	
ACCOUNTING	2,323.	2,323.			0.
TO FORM 990-PF, PG 1, LN 16B	2,323.	2,323.			0.
FORM 990-PF C	THER PROFES	SIONAL FEES	S	PATEMENT	 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS	
INVESTMENT MANAGEMENT FEES - FIDELITY	150.	150.			0.
INVESTMENT MANAGEMENT FEES - LYNX	16,398.	16,398.			0.
PORTFOLIO DEDUCTION - GAMMA CONVERTIBLE FUND LP PTP - PASSTHROUGH EXPENSES	4,404. 399.				0. 0.
INVESTMENT MANAGEMENT FEES - AMERRA	4,375.	4,375.			0.
INVESTMENT MANAGEMENT FEES - CHARLES SCHWAB PORTFOLIO DEDUCTION -	5,632.	5,632.			0.
EMERGING FREE MARKETS COUNTRY FUND	9,286.	9,286.			0.
TO FORM 990-PF, PG 1, LN 16C	40,644.	40,644.			0.
FORM 990-PF	TAX	ES	S	TATEMENT	6
DESCRIPTION		(B) NET INVEST- MENT INCOME			
FOREIGN TAXES - PLAINS ALL AMERICAN PIPELINE LP	66.	66.			0.
FOREIGN TAXES - NUSTAR ENERGY LP	29.	29.			0.
FOREIGN TAXES - NISKA GAS STORAGE PARTNERS LLC	4.	4.			0.
FOREIGN TAXES - KINDER MORGAN ENERGY PARTNERS	1.	1.			0.

MARK & CAROL HYMAN FUND C/O	O SUSAN BESH	IAR			04-6677	395
FOREIGN TAXES - FIDELITY	1,169.	1,	169.			0.
EMERGING FREE MARKETS COUNTRY FUND	273.		273.			0.
TO FORM 990-PF, PG 1, LN 18	1,542.	1,	542.			0.
FORM 990-PF	OTHER E	EXPENSES			STATEMENT	7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
CHARITABLE REGISTRATIONS MISCELLANEOUS WIRE FEES	35. 166.		0.			0.
TO FORM 990-PF, PG 1, LN 23	201		0.			0.
FORM 990-PF	OTHER IN	ESTMENTS			STATEMENT	8
DESCRIPTION		LUATION METHOD	во	OK VALUE	FAIR MARKE VALUE	T
GRT VALUE ADVISOR CL	_	COST		284,863.	321,6	56.
BLACKROCK INTL OPPORT INST C		COST		257,592.	238,3	
PIMCO LOW DURATION INSTITUTI		COST		420,212.	408,6	
TEMPLETON GLOBAL BOND ADVISO	R CLASS	COST		436,988.	401,3	
DELAWARE SELECT GROWTH CL		COST		0.		0.
BOARDWALK PIPELINE PARTNERS,	гъ −	COST		0		^
500SH BUCKEYE PARTNERS, L.P - 320S	U	COST		0. 0.		0.
CHESAPEAKE MIDSTREAM PARTNER		COST		•		٠.
80SH	D, 21	CODI		0.		0.
COPANO ENERGY LLC - 450SH		COST		0.		0.
DCP MIDSTREAM PARTNERS, LP -	240SH	COST		0.		0.
EL PASO PIPELINE PARTNERS LP	_	COST				
770SH				0.		0.
ENBRIDGE ENERGY PARTNERS LP		COST		0.		0.
ENERGY TRANSFER EQUITY LP -		COST		0.		0.
ENERGY TRANSFER PARTNERS LP		COST		0.		0.
ENTERPRISE PRODUCTS PARTNERS	האם –	COST		0.		0.
965SH HOLLY ENERGY PARTNERS, LP		COST		0.		0.
INERGY LP - 280SH		COST		0.		0.
KINDER MORGAN ENERGY PARTNER	S LP -	COST		•		•
235SH		JUD 1		0.		0.
KINDER MORGAN MGMT LLC - 130	SH	COST		0.		Ö.
WAGELLAN MIDSERAM DARRIEDS		COST		• •		٠,

COST

0.

0.

615SH

MAGELLAN MIDSTREAM PARTNERS LP -

MARKWEST ENERGY PARTNERS LP - 205SH	COST	0.	0.
NISKA GAS STORAGE PARTNERS LLC -	COST		
160SH		0.	0.
NUSTAR ENERGY LP - 270SH	COST	0.	0.
ONEOK PARTNERS LP - 220SH	COST	0.	0.
PAA NATURAL GAS STORAGE LP - 80SH	COST	0.	0.
PLAINS ALL AMERICAN PIPELINE LP -	COST		
390SH		0.	0.
REGENCY ENERGY PARTNERS LP - 665SH	COST	0.	· · · · · · · · · · · · · · · · · · ·
SPECTRA ENERGY PARTNERS LP - 240SH	COST	0.	0.
SUNOCO LOGISTICS PARTNERS LP -	COST		
245SH		0.	0.
TC PIPELINES LP - 95SH	COST	0.	0.
TARGA RESOURCES CORP - 119SH	COST	0.	0.
TARGA RESOURCES PARTNERS LP - 435SH	COST	0.	0.
WESTERN GAS PARTNERS LP - 155SH	COST	0.	0.
WILLIAMS PARTNERS LP - 550SH	COST	0.	0.
GAMMA CONVERTIBLE FUND LP	COST	528,809.	526,641.
EMERGING FREE MARKETS COUNTRY FUND	COST	394,106.	411,773.
ALLEN ARBITRAGE OFFSHORE	COST	250,000.	240,307.
LYNX GLOBAL REAL ASSET FUND	COST	·	·
OFFSHORE		0.	0.
AMERRA	COST	238,446.	238,446.
TORTOISE ENERGY CAP - 3159SH	COST	84,511.	84,756.
TORTOISE MLP FUND INC - 8370SH	COST	214,364.	215,695.
DELAWARE SELECT 20	COST	350,104.	378,275.
ISHARES S&P GLOBAL TIMBER	COST	36,276.	27,890.
POWERSHARES XTF UNITS GLOBAL WATER	COST	5,923.	5,086.
POWERSHARES GLOBAL EXCHANGE WATER	COST	4,025.	3,164.
SPDR GOLD TR GOLD SHARES	COST	23,283.	26,599.
SPECTOR SPDR TR SHS ENERGY	COST	3,207.	3,486.
ALLIANZ RCM GLOBAL WATER	COST	22,688.	21,912.
BLACKROCK ALL CAP ENERGY	COST	35,000.	28,656.
VANGUARD ENERGY INVESTOR	COST	30,536.	26,639.
VANGUARD PRECIOUS METALS	COST	10,613.	8,095.
WELLS FARGO PRECIOUS METALS	COST	20,505.	18,001.
TOTAL TO FORM 990-PF, PART II, LINE 13		3,652,051.	3,635,440.

Form **8868**

(Rev. January 2012)

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

-						
a 12	are filing for an Automatic 3-Month Extension, complet	te only Pa	rt I and check this box			▶ X
■ if you	are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	omplete only Part II (on page 2 of	this form).		
	complete Part II unless you have already been granted a				m 8868.	
Electror	nic filing (e-file). You can electronically file Form 8868 if y	ou need a	3-month automatic extension of til	ne to file (6	months fo	or a corporation
required	to file Form 990-T), or an additional (not automatic) 3-mor	nth extens	sion of time. You can electronically t	ile Form 88	68 to requ	iest an 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	Transfers A	ssociated	With Certain
Personal	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details	on the elec	tronic filing	g of this form,
visit www	v irs gov/efile and click on e-file for Charities & Nonprofits	<u> </u>				
Part I	Automatic 3-Month Extension of Time	o. Only s	submit original (no copies ne	eded).		
A corpor	ation required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and	complete		
Part I on	ly					
	corporations (including 1120-C filers), partnerships, REM come tax returns.	ICs, and to	rusts must use Form 7004 to reque	st an exten	sion of time	e
Type or	Name of exempt organization or other filer, see instru	ctions.		Employer	ıdentıfıcat	ion number (EIN) or
print	MARK & CAROL HYMAN FUND					, ,
	C/O SUSAN BESHAROV			X 04-6677395		
File by the due date fo	Number street and some security as Ka DO haves	ee instruc	tions.	Social se	cunty num	
filing your	4518 CUMBERLAND AVENUE				•	,
return See instructions	City, town or post office, state, and ZIP code. For a for CHEVY CHASE, MD 20815	oreign add	ress, see instructions.			
Enter the	e Return code for the return that this application is for (file	a separa	te application for each return)			0 4
Applicat	tion	Return	Application			Return
ls For	•••	Code	Is For			Code
Form 99	0	01	Form 990-T (corporation)			07
Form 99		02	Form 1041-A			08
Form 99		01	Form 4720			09
Form 99	· · · · · · · · · · · · · · · · · · ·	04	Form 5227			10
	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	0-T (trust other than above)	06	Form 8870			12
	5 · (1.051 5.115, 1.107, 0.051 5)					
	TRUSTEES					
	TRUSTEES pooks are in the care of ► 4518 CUMBERLANI	D AVE	CHEVY CHASE. M	D 208	15	
• The b	books are in the care of 4518 CUMBERLANI	D AVE		D 208	15	
• The b	oooks are in the care of ► <u>4518_CUMBERLANI</u> shone No.► <u>(301)</u> 986–1969		FAX No 🕨	D 208	15	
The bTelepIf the	ooks are in the care of ► 4518 CUMBERLANI whone No. ► (301) 986-1969 organization does not have an office or place of business	s in the Ur	FAX No ▶			e group, check this
 The b Telep If the If this 	books are in the care of 4518 CUMBERLANI Shone No. (301) 986-1969 organization does not have an office or place of business is for a Group Return, enter the organization's four digit	s in the Ur Group Exe	FAX No inted States, check this box emption Number (GEN)	If this is fo	the whole	
● The b Telep ● If the ● If this	ooks are in the care of ► 4518 CUMBERLAND whone No. ► (301) 986-1969 organization does not have an office or place of business is for a Group Return, enter the organization's four digit	s in the Ur Group Exe	FAX No ▶ inted States, check this box emption Number (GEN) inch a list with the names and EINs o	If this is foi	the whole	
● The b Telep ● If the ● If this	ooks are in the care of ► 4518 CUMBERLAND whone No. ► (301) 986-1969 organization does not have an office or place of business is for a Group Return, enter the organization's four digit . If it is for part of the group, check this box ► equest an automatic 3-month (6 months for a corporation	s in the Ur Group Exe and atta	FAX No	If this is for	the whole	tension is for.
• The b Telep • If the • If this box ▶ 1 If	ooks are in the care of ► 4518 CUMBERLAND whone No. ► (301) 986-1969 organization does not have an office or place of business is for a Group Return, enter the organization's four digit . If it is for part of the group, check this box ► equest an automatic 3-month (6 months for a corporation AUGUST 15, 2012 , to file the exemp	s in the Ur Group Exe and atta	FAX No ▶ inted States, check this box emption Number (GEN) inch a list with the names and EINs o	If this is for	the whole	tension is for.
• The b Telep • If the • If this box • I Ire	ooks are in the care of ► 4518 CUMBERLAND whone No. ► (301) 986-1969 organization does not have an office or place of business is for a Group Return, enter the organization's four digit . If it is for part of the group, check this box ► equest an automatic 3-month (6 months for a corporation AUGUST 15, 2012 , to file the exemp for the organization's return for:	s in the Ur Group Exe and atta	FAX No	If this is for	the whole	tension is for.
The b Telep If the If this box If this	ooks are in the care of ► 4518 CUMBERLAND whone No. ► (301) 986-1969 organization does not have an office or place of business is so for a Group Return, enter the organization's four digit . If it is for part of the group, check this box ► equest an automatic 3-month (6 months for a corporation AUGUST 15, 2012 , to file the exemp for the organization's return for: X calendar year 2011 or	s in the Ur Group Exe and atta required t organiza	FAX No inted States, check this box emption Number (GEN) ich a list with the names and EINs of the file Form 990-T) extension of time tion return for the organization name.	If this is for	the whole	tension is for.
• The b Telep • If the • If this box • I Ire	ooks are in the care of ► 4518 CUMBERLAND whone No. ► (301) 986-1969 organization does not have an office or place of business is for a Group Return, enter the organization's four digit . If it is for part of the group, check this box ► equest an automatic 3-month (6 months for a corporation AUGUST 15, 2012 , to file the exemp for the organization's return for:	s in the Ur Group Exe and atta required t organiza	FAX No inted States, check this box emption Number (GEN) ich a list with the names and EINs of the file Form 990-T) extension of time tion return for the organization name.	If this is for	the whole	tension is for.
The b Telep If the If this box 1 Ir	ooks are in the care of ► 4518 CUMBERLAND whone No. ► (301) 986-1969 organization does not have an office or place of business is so for a Group Return, enter the organization's four digit . If it is for part of the group, check this box ► equest an automatic 3-month (6 months for a corporation AUGUST 15, 2012 , to file the exemp for the organization's return for: X calendar year 2011 or	s in the Ur Group Exe and atta required t organiza	FAX No inted States, check this box emption Number (GEN) inch a list with the names and EINs of the file Form 990-T) extension of time tion return for the organization named and ending	If this is for	the whole ers the ext The extens	tension is for.
The b Telep If the If this box I I re Is	ooks are in the care of ▶ 4518 CUMBERLAND whone No. ▶ (301) 986-1969 organization does not have an office or place of business is so for a Group Return, enter the organization's four digit □ . If it is for part of the group, check this box ▶ equest an automatic 3-month (6 months for a corporation AUGUST 15, 2012 , to file the exempt for the organization's return for: □ X calendar year 2011 or □ tax year beginning the tax year entered in line 1 is for less than 12 months, concerning contains accounting period	s in the Ur Group Exe and atta required t organiza , an	FAX No inted States, check this box emption Number (GEN) inch a list with the names and EINs of the file Form 990-T) extension of time tion return for the organization named ending inch a list with the names and EINs of the file Form 990-T) extension of time tion return for the organization named ending inch a list with the names and EINs of the file file file file file file file fil	If this is foi of all memb ountil ed above	the whole ers the ext The extens	tension is for.
The b Telep If the If this box I Irr	ocoks are in the care of ▶ 4518 CUMBERLAND whone No. ▶ (301) 986-1969 organization does not have an office or place of business is for a Group Return, enter the organization's four digit ☐ . If it is for part of the group, check this box ▶ equest an automatic 3-month (6 months for a corporation AUGUST 15, 2012 , to file the exempt for the organization's return for: ☐ X calendar year 2011 or ☐ tax year beginning the tax year entered in line 1 is for less than 12 months, or a corporation of the tax year entered in line 1 is for less than 12 months, or a corporation of the tax year entered in line 1 is for less than 12 months, or a corporation of the tax year entered in line 1 is for less than 12 months, or a corporation of the tax year entered in line 1 is for less than 12 months, or a corporation of the tax year entered in line 1 is for less than 12 months, or a corporation of the tax year entered in line 1 is for less than 12 months, or a corporation of the tax year entered in line 1 is for less than 12 months, or a corporation of the tax year entered in line 1 is for less than 12 months, or a corporation of the tax year entered in line 1 is for less than 12 months, or a corporation of the tax year entered in line 1 is for less than 12 months, or a corporation of the tax year entered in line 1 is for less than 12 months, or a corporation of the tax year entered in line 1 is for less than 12 months, or a corporation of the tax year entered in line 1 is for less than 12 months, or a corporation of the tax year entered in line 1 is for less than 12 months, or a corporation of the tax year entered in line 1 is for less than 12 months.	s in the Ur Group Exe and atta required t organiza , an	FAX No inted States, check this box emption Number (GEN) inch a list with the names and EINs of the file Form 990-T) extension of time tion return for the organization named ending inch a list with the names and EINs of the file Form 990-T) extension of time tion return for the organization named ending inch a list with the names and EINs of the file file file file file file file fil	If this is forms of all members on the second of all members on the second of the seco	the whole ers the ext The extens	tension is for.
The b Telep If the If this box I Irr Is 2 If I	books are in the care of 4518 CUMBERLANI	s in the Ur Group Exe and atta required t organiza , an theck reas	FAX No inted States, check this box emption Number (GEN) ich a list with the names and EINs of the file Form 990-T) extension of time tion return for the organization named ending inter the tentative tax, less any	If this is foi of all memb ountil ed above	the whole ers the ext The extens	tension is for.
The b Telep If the If this box I Ir 3a Iff nc b Iff	books are in the care of ▶ 4518 CUMBERLAND Shone No. ▶ (301) 986-1969 organization does not have an office or place of business is for a Group Return, enter the organization's four digit ☐ . If it is for part of the group, check this box ▶ equest an automatic 3-month (6 months for a corporation AUGUST 15, 2012 , to file the exempt for the organization's return for: ☐ X calendar year 2011 or ☐ tax year beginning the tax year entered in line 1 is for less than 12 months, or ☐ Change in accounting period this application is for Form 990-BL, 990-PF, 990-T, 4720, onerefundable credits See instructions. this application is for Form 990-PF, 990-T, 4720, or 6069, this application is for Form 990-PF, 990-T, 4720, or 6069,	s in the Ur Group Exe and atta required t organiza , an theck reas or 6069, e	FAX No Inted States, check this box emption Number (GEN) In the list with the names and EINs of the file Form 990-T) extension of time tion return for the organization named ending Initial return Initial return	If this is for	the whole ers the ext The extens	tension is for.
The b Telep If the If this box I Irr 3a If 1 nc b If 1	books are in the care of ► 4518 CUMBERLAND whone No. ► (301) 986-1969 organization does not have an office or place of business is for a Group Return, enter the organization's four digit	s in the Ur Group Exe and atta required t organiza , an check reas or 6069, e enter any	FAX No Interpretation in the tentative tax, less any refundable credits and credits.	If this is forms of all members on the second of all members on the second of the seco	the whole ers the ext The extens	tension is for.
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The b Telep If the If this box If the Is	books are in the care of ► 4518 CUMBERLAND whone No. ► (301) 986-1969 organization does not have an office or place of business is for a Group Return, enter the organization's four digit	s in the Ur Group Exe and atta required t organiza , an check reas or 6069, e enter any payment a ayment wit See instru	FAX No Interpretation in the tentative tax, less any refundable credits and allowed as a credit. In this form, if required, inches in the form, if required, inches in the form, if required, inches in the state of the content in the	If this is for in all members of all	the whole ers the ext	0. 3,193.

Form 886	8 (Rev. 1-2012)					Page		
	re filing for an Additional (Not Automatic) 3-Month Ext	tension, c	complete only Part II and check this	box	•	► X		
Note. Onl	y complete Part II if you have already been granted an a	utomatic	3-month extension on a previously fil	ed Form	3868.			
If you a	re filing for an Automatic 3-Month Extension, complet	te only Pa	art I (on page 1).					
Part II	Additional (Not Automatic) 3-Month Ex	xtensio	n of Time. Only file the origin	al (no c	opies nee	ded).		
			Enter filer's	identifyir	g number, :	see instructions		
Type or						nployer identification number (EIN) or		
print	int MARK & CAROL HYMAN FUND							
File by the	C/O-SUSAN BESHAROV			X	04-66	77395		
due date for filing your	ate for Number, street, and room or suite no. If a P.O. box, see instructions.			Social se	curity numb	er (SSN)		
eturn See	4518 CUMBERLAND AVENUE							
nstructions	City, town or post office, state, and ZIP code. For a fo	reign add	lress, see instructions.					
	CHEVY CHASE, MD 20815							
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)			0 4		
Applicati	on	Return	Application			Return		
ls For		Code	Is For			Code		
Form 990		01						
Form 990	BL	02	Form 1041-A			08_		
Form 990	-EZ	01	Form 4720			09		
Form 990	-PF	04	Form 5227			10_		
Form 9 <u>9</u> 0	-T (sec. 401(a) or 408(a) trust)	05	Form 6069					
	-T (trust other than above)	06	Form 8870			12		
STOP! Do	not complete Part II if you were not already granted	l an autor	matic 3-month extension on a prev	iously file	d Form 886	8		
	TRUSTEES							
	ooks are in the care of ► 4518 CUMBERLANI	D AVE		D 208	15			
	ione No. ► <u>(301)</u> 986-1969		FAX No. ▶			. —		
	organization does not have an office or place of business					▶		
-	s for a Group Return, enter the organization's four digit	3						
box 🕨		_	ach a list with the names and EINs of	all memb	ers the exte	nsion is for		
	· —	NOVEM	BER 15, 2012.					
	calendar year 2011, or other tax year beginning		, and ending					
6 If th	ne tax year entered in line 5 is for less than 12 months, c	neck reas	on: Initial return	Fınal r	eturn			
	_ Change in accounting period							
	te in detail why you need the extension IE TAXPAYER IS AWAITING RECE:	TDM O	P ADDITIONAL INFOR	MATTO	N TN O	RDER TO		
	ISURE A COMPLETE AND ACCURATE			MALIO	N IN O	KDER IO		
<u>151</u>	BOKE A COMPLETE AND ACCORDI	G FID	1110.					
8a If th	nis application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069 e	enter the tentative tax less any					
	nrefundable credits. See instructions.	0, 0000, 0	inter the terrative tax, loss any	8a	s	0		
	his application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated	Ju	- 			
	payments made. Include any prior year overpayment all							
	eviously with Form 8868	.01104 40	a oroan and any amount paid	8b	s	3,193		
	ance due. Subtract line 8b from line 8a. Include your pa	vment w	th this form, if required, by using		· * · · · · · · · · · · · · · · · · · · ·	<u> </u>		
	TPS (Electronic Federal Tax Payment System). See instru	-		8c	s	0		
	 		st be completed for Part II o		I T	. · ·		
Under pen	alties of perjury, I declare that I have examined this form, includ	ling accom		-	f my knowled	ge and belief.		
ıt ıs true, c	orrect, and complete, and that I am authorized to prepare this fo	orm.			•	-		
Signature	► R. Matth > + Title ► (CPA		Date				
					Form 8	8868 (Rev. 1-201		

1. T. C. C.