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Form 990-PF

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 23-6420013 THE TOBIN FAMILY FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 101 CHESWOLD LANE UNIT 5D 610-649-7024 City or town, state, and ZIP code C If exemption application is pending, check here HAVERFORD, PA 19041 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 2, check here and attach computation Address change Name change Check type of organization: Section 501(c)(3) exempt private foundation 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 I' Fair market value of all assets at end of year | J | Accounting method: Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 1,274,679. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (c) Adjusted net (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income income N/A Contributions, gifts, grants, etc., received Check I if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 30,364 30,364 STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 0 6a Net gain or (loss) from sale of assets not on line 10 Revenue Gross sales price for all 295,000. 0 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 445 445 STATEMENT 11 Other income 30 30. 809 809 12 Total. Add lines 1 through 11 0. 0 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages Pension plans, employee beget 16a Lebal fees KEUE b Accounting tees c Other professional tees 1 2012 17 Inte(ខ្ញុំនុំវ 3 2,192 18 <u> 263</u> 0. 19 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications Operating 23 Other expenses 24 Total operating and administrative 2,192 expenses. Add lines 13 through 23 263 177,814 177 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 180,006 263 27 Subtract line 26 from line 12: <149,197. 2 Excess of revenue over expenses and disbursements 30,546 b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-)

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۵	art	Balance Sheets Attached schedules and amounts in the description column should be for end advers a mounts only	Beginning of year	End of y	
<u>-</u>	art	Balance Sneets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	297.	19,159.	<u> 19,159.</u>
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and toans receivable			
	•	Less; allowance for doubtful accounts			
10	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
Ass		· · · · ·			
	1	Investments - U.S. and state government obligations	AEE 241	482,282.	493,446.
	1	Investments - corporate stock STMT 4	455,341.		
	١	Investments - corporate bonds STMT 5	940,000.	745,000.	762,074.
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers)	1,395,638.	1,246,441.	1,274,679.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Ś	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ab.	21	Mortgages and other notes payable			
Ï	1	Other liabilities (describe)	· · · · · · · · · · · · · · · · · · ·		
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_	150	Foundations that follow SFAS 117, check here	<u> </u>		
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted			
Š	25	Temporarily restricted			
3ala	1	Permanently restricted			
B	26	F			
Net Assets or Fund Balance		Foundations that do not follow SFAS 117, check here			
<u></u>		and complete lines 27 through 31.	0	_	
ş	27	Capital stock, trust principal, or current funds	0.	0.	
SSE	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ţ,	29	Retained earnings, accumulated income, endowment, or other funds	1,395,638.	1,246,441.	
Ž	30	Total net assets or fund balances	1,395,638.	1,246,441.	
_	31	Total liabilities and net assets/fund balances	1,395,638.	1,246,441.	
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
_	<u> </u>				
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
	(mus	st agree with end-of-year figure reported on prior year's return)		1	1,395,638.
2	Ente	r amount from Part I, line 27a		2	<149,197.
3	Othe	r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	1,246,441.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	lumn (b), line 30	6	1,246,441.
_		- Joseph Committee of Taren, ou			Form 990-PF (2011)

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THE TOBIN FAMILY FOUNDATION

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Part IV	_ Capital Gains a	and Losses for Tax on Ir	nvestment	Income					
•		ube the kind(s) of property sold (e.g rehouse; or common stock, 200 sh			`P-P	v acquired urchase lonation	(c) Date a (mo., da	acquired ay, yr.)	(d) Date sold (mo., day, yr.)
1a AME	R EXP BK FS	B UT US RT				P	04/0	1/09	04/08/11
b BAN	CO POPULAR	PR RT				P	09/0		09/19/11
c CON	TESTOGA BK	CHSTR PA US				P	06/1	<u>5/09</u>	06/27/11
<u>d</u>					ļ				
<u>e</u>	 	<u> </u>	,		L.,				L
(e)	Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				ain or (loss (f) minus	
<u>a</u>	100,000.	·		100,00					0.
<u>b</u>	95,000.			95,00		-· ·· ·· -·			0.
C	100,000.			100,00	0.				
<u>d</u>									
<u>e</u>			11.4.11	10/04/00					
Comple	ete only for assets showin	g gain in column (h) and owned by	i .				(I) Gains (Cool. (k), but n		
(i) F.N	M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any				(from col. ((h)) ´
_a			ļ						0.
_b			<u> </u>						0.
<u> </u>									0.
<u>d</u>									
<u>e</u>									
2 Capital (gain net income or (net ca	pital loss) { If gain, also ente If (loss), enter -0	r in Part I, line)- in Part I, line	7 7	}	2			0.
3 Net sho	rt-term capital gain or (los	s) as defined in sections 1222(5) ai				ļ			
	also enter in Part I, line 8,		(-).		}				
If (loss)	enter -0- in Part I, line 8	nder Section 4940(e) for			نلا	3		N/A	·
If section 4	940(d)(2) applies, leave the	ion 4942 tax on the distributable an	nount of any ye	ear in the base pe	·				Yes X No
		ify under section 4940(e). Do not co each column for each year; see instr			es.				
	(a) Base period years	(b)		Net value of no	(c)	hle-use asse	ts	Distril	(d) bution ratio vided by col. (c))
Calendar	year (or tax year beginnii 2010	19 111/	4,425.	7101 74145 51 110		708,43		(cor (b) an	•523533
	2009		20,250.	,		335,37			.120003
	2009		2,380.			543,96			.141353
	2007		7,765.			525,17			.18867
	2006		9,841.			197,44			.225348
			770 220						
2 Total of	line 1, column (d)						2		1.198914
		5-year base period - divide the total	on line 2 by 5,	or by the number	of years	3			
the foun	dation has been in exister	nce if less than 5 years			_		3		.239783
4 Enter the	e net value of noncharitab	le-use assets for 2011 from Part X,	line 5				4		1,394,815
5 Multiply	line 4 by line 3						5		334,453
6 Enter 1%	6 of net investment incom	ne (1% of Part I, line 27b)					6		305
7 Add line	s 5 and 6						7		334,758
•	alifying distributions from						8		177,814
	is equal to or greater than Part VI instructions.	line 7, check the box in Part VI, line	e 1b, and comp	lete that part usin	ng a 1%	tax rate.			

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			6420			age 4
<u> Pa</u>	rt VI . Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	<u>48</u> -	· see ir	nstru	ction	<u>s)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.		1			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1			6	11.
	of Part I, line 27b					
e	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
	Add lines 1 and 2	3			6	11.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			- 6	11.
	Credits/Payments:					<u> </u>
	- I I					
	2011 estimated tax payments and 2010 overpayment credited to 2011 6a					
	Exempt foreign organizations - tax withheld at source					
	Tax paid with application for extension of time to file (Form 8868) 6c 600.		İ			
	Backup withholding erroneously withheld 6d	_			_	^ ^
7	Total credits and payments. Add lines 6a through 6d	7	├		6	00.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	<u> </u>			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				<u> 11.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	<u> </u>			
	Enter the amount of line 10 to be: Credited to 2012 estimated tax	11				
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene i	n			Yes	No
	any political campaign?			1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or				
	distributed by the foundation in connection with the activities.					
c	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:				-	
_	(1) On the foundation. \blacktriangleright \$ 0. (2) On foundation managers. \blacktriangleright \$ 0.					
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
•	managers. ►\$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
•	If "Yes," attach a detailed description of the activities.					
2	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or					
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		x
4.				4a		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year?	ъ.	I/A			
	·	77	I/ A	4b 5		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?					
_	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	aw				
	remain in the governing instrument?			6	Х	
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)					
	PA					
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for caler	dar				
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		_X_
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X
			For	m 990	-PF(2011)

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orm 990-PF (2011) THE TOBIN FAMILY FOUNDAT	ION		23-64200	13 Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)	
 5a During the year did the foundation pay or incur any amount to: Carry on propaganda, or otherwise attempt to influence legislation (section Influence the outcome of any specific public election (see section 4955); or any voter registration drive? Provide a grant to an individual for travel, study, or other similar purposes' Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)? 	r to carry on, directly or indire	ectly, Ye	S X No S X No S X No S X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?		☐ Ye	s X No	
 b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance (see instru Organizations relying on a current notice regarding disaster assistance check h c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the companion of the	ctions)? ere	-	N/A ►□	ib
expenditure responsibility for the grant? 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	N 5-5(d).	ī∕A □ Ye	s No	
 a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a p If "Yes" to 6b, file Form 8870. 				Sb X
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				<u>'b </u>
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	inagers, nigni	y	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SYLVAN M. TOBIN 101 CHESWOLD LANE UNIT 5D	TRUSTEE			0
HAVERFORD, PA 19041 FRANCES E. TOBIN 101 CHESWOLD LANE UNIT 5D HAVERFORD, PA 19041	0.00 SECRETARY 0.00	0.	0.	0.
HAVERFORD, FA 19041	0.00		0.	
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	L (al) Out to Nove to	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000				. 0

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Total. Add lines 1 through 3

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	dations, s	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	1,384,524.
	Average of monthly cash balances	1b	31,532.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,416,056.
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	1,416,056.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	21,241.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,394,815.
6	Minimum investment return. Enter 5% of line 5	6	69,741.
Р	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	69,741.
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	611.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	69,130.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	69,130.
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	69,130.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	177,814.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	, <u></u>
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	177,814.
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	177,814.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for	the section

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4940(e) reduction of tax in those years.

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, line 7				69,130.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0.	
b Total for prior years:				
,		0.		
3 Excess distributions carryover, if any, to 2011:				
a From 2006 210,959.				
b From 2007 213,045.				
c From 2008 151,191.				
d From 2009 129,902.				
e From 2010 812,801.				
f Total of lines 3a through e	1,517,898.			
4 Qualifying distributions for 2011 from				
Part XII, line 4: ► \$ 177,814.				
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior		•		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2011 distributable amount	100 604			69,130.
e Remaining amount distributed out of corpus	108,684.			0.
5 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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,626,582.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		<u> </u>
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				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.	· · · · · · · · · · · · · · · · · · ·		<u> </u>
8 Excess distributions carryover from 2006				
not applied on line 5 or line 7	210,959.			
9 Excess distributions carryover to 2012.	1 445 600			
Subtract lines 7 and 8 from line 6a	1,415,623.			
0 Analysis of line 9:				
a Excess from 2007 213, 045.				
b Excess from 2008 151,191. c Excess from 2009 129,902.				
d Excess from 2010 812,801. e Excess from 2011 108,684.				
ELAGGOS HUHIZUTI TOO, UO4.				Form 990-PF (2011)

Part XIV Private Operating For	IN FAMILY I		I A superior O		-6420013 Page 10
			I-A, question 9)	N/A	, , , , , , , , , , , , , , , , , , ,
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for		-	· ▶ └──	1.0.00.00	
b Check box to indicate whether the foundation		ing foundation described		」4942(j)(3) or ∟	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(b) 2010	Prior 3 years (c) 2009	(d) 2008	——— (a) Total
income from Part I or the minimum	(a) 2011	(0) 2010	(6) 2009	(0) 2000	(e) Total
investment return from Part X for					
each year listed		 			
b 85% of line 2a		 	<u> </u>		
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			ļ- <u>-</u>		
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:		1			
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on				1	
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 Infor	mation (Compl	ete this part only	if the foundatio	n had \$5,000 c	r more in assets
at any time during the					
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation who		e than 2% of the total con	tributions received by th	e foundation before t	the close of any tax
year (but only if they have contributed m					,
SYLVAN M. TOBIN					
b List any managers of the foundation who	own 10% or more of t	he stock of a corporation	(or an equally large por	tion of the ownership	of a partnership or
other entity) of which the foundation has	a 10% or greater intere	est.		·	
NONE	_				
2 Information Regarding Contribution	on, Grant, Gift, Loar	n, Scholarship, etc., P	rograms:		
Check here X if the foundation or the foundation makes gifts, grants, etc. (nly makes contributions	to preselected charitable	organizations and does		
a The name, address, and telephone numb				pro-o	,
a ino namo, address, and telephone numb	or or the person to WII(ען שושטווס פווטוומטוועקא ווייכ	, auurossou.		
b The form in which applications should be	submitted and inform	ation and materials they s	hould include:		
c Any submission deadlines;			· <u></u>		
		<u> </u>			
d Any restrictions or limitations on awards,	, such as by geographi	cal areas, charitable fields	, kınds of ınstitutions, o	other factors:	
123601 12-02-11					Form 990-PF (2011)

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y		Payment		
Recipient	If recipient is an individual			
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	теория		
.			:	
BRAMSON CENTER FOR JEWISH LIFE	NONE	PUBLIC CHARITY	GENERAL OPERATING	
.425 HORSHAM RD NORTH WALES, PA 19454				500
OKIN WALLS, FA 17434				300
ISH PHILADELPHIA	NONE	PUBLIC CHARITY	GENERAL OPERATING	
0 MONTGOMERY AVENUE				250
OWER MERION, PA 09004				230
ANTI-DEFAMATION LEAGUE	NONE	PUBLIC CHARITY	GENERAL OPERATING	
505 THIRD AVE NEW YORK, NY 10158			İ	2,000
ARTHUR ASH YOUTH TENNIS & EDUCATION 3901 B MAIN STREET	NONE	PUBLIC CHARITY	GENERAL OPERATING	
PHILADELPHIA PA 19127				1,000
ARUNA PARTNERSHIP	NONE	DUDI TO CHARITY	GENERAL OPERATING	
32 HOLLOW OAK DR	HONE	FOBBIC CHARITI	SENERAL OF BRATTING	
SUDBURY MA 01776				1 000
	NTINUATION SHE	ET(S)	▶ 3a	177_814
b Approved for future payment				
NONE				
		ļ		···
			i 	
Total			▶ 3b	0

Part XVI-A Analysis of Income-Producing Activities

	Uncolated			h., aaatta	4 -
enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	7 Willouit	- Idilodoli ilioonio
b	_ _				
c	1 1				
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments				20.264	
4 Dividends and interest from securities			14	30,364.	·*·———
5 Net rental income or (loss) from real estate:					
a Debt-financed property	-				
b Not debt-financed property		· · · · · · · · · · · · · · · · · · ·			
6 Net rental income or (loss) from personal					
property 7 Other investment income			14	445.	
Gain or (loss) from sales of assets other				773.	
than inventory			18	0.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
			1 1		
a					
a b				. , , - , -	
b					
b					
b d					
b c d e Subtotal. Add columns (b), (d), and (e)			0.	30,809.	0
b			0.	30,809.	
b	.)			13	
b c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s to the Acco	mplishment of	Exempt F	13 Purposes	30,809
b c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie	s to the Acco	mplishment of	Exempt F	13 Purposes	30,809
b c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s to the Acco	mplishment of	Exempt F	13 Purposes	30,809
b c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s to the Acco	mplishment of	Exempt F	13 Purposes	30,809
b c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s to the Acco	mplishment of	Exempt F	13 Purposes	30,809
b c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s to the Acco	mplishment of	Exempt F	13 Purposes	30,809
b c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s to the Acco	mplishment of	Exempt F	13 Purposes	30,809
b c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s to the Acco	mplishment of	Exempt F	13 Purposes	30,809
b c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s to the Acco	mplishment of	Exempt F	13 Purposes	30,809
b c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s to the Acco	mplishment of	Exempt F	13 Purposes	30,809
b c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s to the Acco	mplishment of	Exempt F	13 Purposes	30,809
b c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s to the Acco	mplishment of	Exempt F	13 Purposes	30,809
b c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s to the Acco	mplishment of	Exempt F	13 Purposes	30,809
b c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s to the Acco	mplishment of	Exempt F	13 Purposes	30,809
b c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s to the Acco	mplishment of	Exempt F	13 Purposes	30,809
b c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s to the Acco	mplishment of	Exempt F	13 Purposes	30,809
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b c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s to the Acco	mplishment of	Exempt F	13 Purposes	30,809

THE TOBIN FAMILY FOUNDATION 23-6420013 Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: X (1) Cash 1a(1) Х 1a(2) (2) Other assets **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) 1b(3) (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) 1b(6) (6) Performance of services or membership or fundraising solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization (b) Amount involved (a) Line no (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No Yes in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this return with the preparer shown below (see instr.)? Sign Here X Yes Signature of officer or trustee Title Date Print/Type preparer's name Check I if Date self-employed CHRISTOPHER M. **Paid** P00734965 PEKULA Firm's EIN ► 42-0714325 Preparer Firm's name ► MCGLADREY LLP **Use Only** Firm's address ▶ 751 ARBOR WAY, SUITE 200

Form **990-PF** (2011)

215.641.8600

Phone no.

BLUE BELL, PA 19422

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 contribution Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient BRYN MAWR HOSPITAL FOUNDATION NONE PUBLIC CHARITY GENERAL OPERATING 130 SOUTH BRYN MAWR AVENUE BRYN MAWR, PA 19010 100. CCTC - CHILDREN'S CRISIS TREATMENT NONE PUBLIC CHARITY GENERAL OPERATING CENTER 1823 CALLOWHILL ST PHILADELPHIA PA 19130 5,000. CURTIS INSTITUTE OF MUSIC NONE PUBLIC CHARITY GENERAL OPERATING 1726 LOCUST ST 1,000. PHILADELPHIA, PA 19103 DANA FARBER CANCER INST NONE PUBLIC CHARITY GENERAL OPERATING 450 BROOKLINE AVENUE 400. BOSTON, MA 02215 ED SNIDER YOUTH HOCKEY FOUNDATION NONE PUBLIC CHARITY GENERAL OPERATING 3601 S. BROAD STREET PHILADELPHIA PA 19148 1,000. PUBLIC CHARITY GENERAL OPERATING ELIZABTH GLASER PEDIATRIC AIDS NONE 2950 31ST ST. STE 125 SANTA MONICA, CA 90405 400. EPILEPSY FOUNDATION OF EASTERN PUBLIC CHARITY GENERAL OPERATING NONE PENNSYLVANIA 919 WALNUT STREET, SUITE 700 PHILADELPHIA PA 19107 500. NONE PUBLIC CHARITY GENERAL OPERATING FEDERATION EARLY LEARNING SERVICES 10700 JAMISON ST PHILADELPHIA PA 19116 500. FREIRE CHARTER SCHOOL PUBLIC CHARITY GENERAL OPERATING NONE 2027 CHESTNUT STREET 250. PHILADELPHIA, PA 19103 GALLERIES AT MOORE NONE PUBLIC CHARITY GENERAL OPERATING 20TH ST. & THE PARKWAY PHILADELPHIA, PA 19103 500. Total from continuation sheets 173 064

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or Foundation show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor GHS ALUMNAE ASSOCIATION NONE PUBLIC CHARITY GENERAL OPERATING 1400 W. OLNEY AVENUE 25. PHILADELPHIA, PA 19141 HAR ZION TEMPLE NONE PUBLIC CHARITY GENERAL OPERATING 1500 HAGYS FORD RD PENN VALLEY PA 19072 284. JDRF NONE PUBLIC CHARITY GENERAL OPERATING 26 BROADWAY 25. NEW YORK, NY 10004 JEWISH FAMILY SERVICES NONE PUBLIC CHARITY GENERAL OPERATING 299 WATERMAN ST 400. PROVIDENCE, RI 02906 JEWISH FEDERATION OF GREATER PHILA NONE PUBLIC CHARITY GENERAL OPERATING 2100 ARCH STREET 125,000. PHILADELPHIA, PA 19103 JEWISH THEOLOGICAL SEMINARY NONE PUBLIC CHARITY GENERAL OPERATING 3080 BROADWAY NEW YORK, NY 10027 3,000. LONGPORT PBA LOCAL 363 NONE PUBLIC CHARITY GENERAL OPERATING 2305 LONGPORT AVE LONGPORT, NJ 50. PUBLIC CHARITY GENERAL OPERATING LOWER MERION FOR NONE 75 EAST LANCASTER AVE 150 ARDMORE PA 19003 MAGEE REHABILITION CENTER NONE PUBLIC CHARITY GENERAL OPERATING 1513 RACE STREET PHILADELPHIA PA 19102 500. MATERNITY CARE COALITION NONE PUBLIC CHARITY GENERAL OPERATING 2000 HAMILTON ST, STE 205 PHILADELPHIA, PA 19130 200. Total from continuation sheets

23-6420013

ual,		
to Foundation status of	Purpose of grant or contribution	Amount
TOT recipient PUBLIC CHARITY	GENERAL OPERATING	
		500
PUBLIC CHARITY G	GENERAL OPERATING	20
PUBLIC CHARITY C	GENERAL OPERATING	10
PUBLIC CHARITY G	GENERAL OPERATING	25
PUBLIC CHARITY	GENERAL OPERATING	100
PUBLIC CHARITY C	GENERAL OPERATING	1,000
PUBLIC CHARITY G	GENERAL OPERATING	25
PUBLIC CHARITY C	GENERAL OPERATING	500
PUBLIC CHARITY	GENERAL OPERATING	50
PUBLIC CHARITY C	GENERAL OPERATING	1,000
-		PUBLIC CHARITY GENERAL OPERATING PUBLIC CHARITY GENERAL OPERATING

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 any foundation manager status of Name and address (home or business) or substantial contributor recipient PUBLIC CHARITY GENERAL OPERATING ROYAL OTTAWA FOUNDATION FOR MENTAL NONE HEALTH 1145 CARLING AV 100. OTTAWA, CANADA, CANADA K1Z 7K4 SMILE TRAIN NONE PUBLIC CHARITY GENERAL OPERATING 41 MADISON AVE., 28TH FLOOR 25. NEW YORK, NY 10010 SMITHSONIAN INSTITUTE NONE PUBLIC CHARITY GENERAL OPERATING PO BOX 9016 250. PITTSFIELD MA 01202-9016 SPRING LAKE RANCH NONE PUBLIC CHARITY GENERAL OPERATING 1169 SPRING LAKE ROAD CUTTINGSVILLE VT 05738 1,000. SUSAN G. KOMEN FOR THE CURE NONE PUBLIC CHARITY GENERAL OPERATING 5005 LBJ FREEWAY 200. DALLAS TX 75244 THE WHEELER SCHOOL NONE PUBLIC CHARITY GENERAL OPERATING 216 HOPE ST 700. PROVIDENCE, RI 02906 THE WOLF SCHOOL NONE PUBLIC CHARITY GENERAL OPERATING 215 FERRIS AVE RUMFORD, RI 02916 300. THORNCROFT EQUESTRIAN CENTER NONE PUBLIC CHARITY GENERAL OPERATING 190 LINE ROAD MALVERN PA 19355 200. PUBLIC CHARITY GENERAL OPERATING TRIUMPHANT LOVE LUTHERAN CHURCH NONE 5254 BLANCO ROAD 150. SAN ANTONIO TX 78216 TRUSTEES OF THE UNIVERSITY OF NONE PUBLIC CHARITY GENERAL OPERATING PENNSYLVANIA 3451 WALNUT STREET 1,000. PHILADELPHIA PA 19104 Total from continuation sheets

3 Grants and Contributions Paid During the		_		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
USOC	NONE	PUBLIC CHARITY	GENERAL OPERATING	
NATIONAL PROCESSING CENTER, PO BOX 7010 ALBERT LEA, MN 56007				12!
WILLIAM PENN CHARTER SCHOOL 3000 WEST SCHOLL HOUSE LANE PHILADELPHIA, PA 19144	NONE	PUBLIC CHARITY	GENERAL OPERATING	400
WISTAR INSTITUTE	NONE	PUBLIC CHARITY	GENERAL OPERATING	
3601 SPRUCE ST, STE 242 PHILADELPHIA, PA 19104				25,80
WOMEN CENTER OF RHODE ISLAND PO BOX 603300	NONE	PUBLIC CHARITY	GENERAL OPERATING	
PROVIDENCE, RI 02906				30

FORM 990-PF DIVIDENI	OS AND	INTER	EST	FROM	SEC	JRITIES	STATEMENT	1
SOURCE		GROSS	AMC	UNT	_	PITAL GAINS DIVIDENDS	COLUMN (A)
DIVIDEND INCOME INTEREST INCOME	-	·· <u>·</u> ·		376. 988.		0.	6,3 23,9	
TOTAL TO FM 990-PF, PART I, I	LN 4		30,	364.		0.	30,3	64.
FORM 990-PF	0	THER I	NCON	Œ	<u> </u>		STATEMENT	2
DESCRIPTION			REV	A) ENUE BOOK	5	(B) NET INVEST MENT INCOM		
OTHER INCOME					445.	44	<u> </u>	
TOTAL TO FORM 990-PF, PART I	, LINE	11		-	445.	44	5. 	
FORM 990-PF		TAX	ES				STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS		(B) INVI IT IN		(C) ADJUSTE NET INCO		
TAXES FOREIGN TAXES		1,929.	<u> </u>		0 263			0.
TO FORM 990-PF, PG 1, LN 18		2,192.	_	····	263	•		0.
FORM 990-PF	CO	RPORAT	E ST	OCK	'n.**'	 	STATEMENT	4
DESCRIPTION					В	OOK VALUE	FAIR MARKE VALUE	T
UBS SELECT PRIME INSTITUTION ISHARES TR S&P MID CAP 400 II ISHARES TR S&P SMALL CAP 600	NDEX F	UND -				194,481. 18,100.	194,4 23,6	
SHS ISHARES MSCI EAFE INDEX FUND ISHARES MSCI EMERGING MKTS II	- 650	SHS		SHS		13,295. 43,614. 45,802.	17,7 39,6 37,9	24.
STANDARD & POORS DEP RCPTS UI								

THE TOBIN FAMILY FOUNDATION			23-6420013		
ALPS ETF TRUST EQUAL SECTOR	92,240.	89,000.			
TOTAL TO FORM 990-PF, PART II,	LINE 10B	482,282.	493,446.		
FORM 990-PF	CORPORATE BONDS		STATEMENT 5		
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE		
BANCO POPULAR 4.5% 9/19/11 DISCOVER BK DE US 4.7% 9/17/12		0. 95,000.	0. 97,746.		
AMER EXP BK 2.3% 4/8/11		0.	0.		
CONESTOGA BK 2.25% 6/27/11 CITIBANK 3.15% 10/7/14		0. 100,000.	0. 104,337.		
GE MONEY BANK 1.5% 10/30/12		100,000.	100,904.		
DORAL BK 2.4% 1/11/13		50,000.	50,854.		
AMERICAN EXP CENT 2.0% 2/04/13		100,000.	101,529.		
BARCLAYS BK 2.35% 2/10/14 BARCLAYS BK 2.75% 2/24/15		100,000. 100,000.	102,512. 103,745.		
FFCB BOND 1.2500%		100,000.	100,447.		
TOTAL TO FORM 990-PF, PART II,	LINE 10C	745,000.	762,074.		

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

Form 8868 (Rev. 1-2012)

If you	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 t	this form).			
Do not c	omplete Part II unless you have already been granted a	an automa	tic 3-month extension on a previous	ly filed For	m 8868.		
Electron	ic filing (e-file). You can electronically file Form 8868 if y	ou need a	3-month automatic extension of time	ne to file (6	months for a con	oration	
equired	to file Form 990-T), or an additional (not automatic) 3-moi	nth extens	ion of time. You can electronically fi	le Form 88	68 to request an	extension	
of time to	file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for 1	Transfers A	ssociated With C	ertain	
Personal	Benefit Contracts, which must be sent to the IRS in pap	er format (see instructions). For more details o	on the elec	tronic filing of this	form,	
ısit wwv	v.irs.gov/efile and click on e-file for Chanties & Nonprofits	١.					
Part I	Automatic 3-Month Extension of Time	. Only s	ubmit original (no copies ne	eded).			
A corpor	ation required to file Form 990-T and requesting an autor	natic 6-mo	nth extension - check this box and	complete			
art I on	l y)	-	
All other	corporations (including 1120-C filers), partnerships, REM	IICs, and to	usts must use Form 7004 to reques	st an extens	sion of time		
o file inc	ome tax returns.						
Гуре ог	Name of exempt organization or other filer, see instru	ctions.		Employer	identification nun	ber (EIN) or	
print				X 23-6420013			
	THE TOBIN FAMILY FOUNDATION	N					
file by the due date fo	Number, street, and room or suite no. If a P O box, s	ee instruct	lions.	Social sec	curity number (SS		
iling your	101 CHESWOLD LANE UNIT 5D		· · · · · · · · · · · · · · · · · · ·		,	•	
return See instructions		oreign add	ress, see instructions.				
	HAVERFORD, PA 19041						
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)			0 4	
		,	,	•	• •		
Applicat	lion	Return	Application	-		Return	
s For		Code	Is For			Code	
orm 99	0	01	Form 990-T (corporation)			07	
Form 990-BL			Form 1041-A			08	
Form 99				09			
Form 99	n 990-PF 04 Form 5227			10			
Form 99	rm 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069				11		
Form 990-T (trust other than above)		06	Form 8870			12	
	SYLVAN TOBIN	<u> </u>					
• The t	ooks are in the care of > 101 CHESWOLD LI	N - H	AVERFORD, PA 19041	•			
	hone No ▶ 610-649-7024		FAX No. ▶	·			
	organization does not have an office or place of busines	s in the Ur				▶ □	
	is for a Group Return, enter the organization's four digit				r the whole aroup	check this	
box 🕨	. If it is for part of the group, check this box						
1 Ire	equest an automatic 3-month (6 months for a corporation					.= .=	
-		•	tion return for the organization nam		The extension		
13	for the organization's return for:	J					
	X calendar year 2011 or						
>	tax year beginning	an	d ending				
>					—		
>							
2 151	the tax year entered in line 1 is for less than 12 months. o	heck reas	on: Initial return	Final return	n		
2	the tax year entered in line 1 is for less than 12 months, o	check reas	on: Initial return	Final retur	n		
2	the tax year entered in line 1 is for less than 12 months, o	check reas	on: Initial return	Final retur	n		
	Change in accounting period			Final return	n	·	
3a lf	Change in accounting period this application is for Form 990-BL, 990-PF, 990-T, 4720,					600	
3a If 1	Change in accounting period this application is for Form 990-BL, 990-PF, 990-T, 4720, onrefundable credits. See instructions.	or 6069, e	nter the tentative tax, less any	Final return	s	600.	
3a If 1	this application is for Form 990-PF, 990-T, 4720, onrefundable credits. See instructions.	or 6069, e	nter the tentative tax, less any refundable credits and				
3a If 1	Change in accounting period this application is for Form 990-BL, 990-PF, 990-T, 4720, orrefundable credits. See instructions. this application is for Form 990-PF, 990-T, 4720, or 6069, stimated tax payments made. Include any prior year over	or 6069, e enter any payment a	nter the tentative tax, less any refundable credits and llowed as a credit.			600.	
3a If I	this application is for Form 990-PF, 990-T, 4720, onrefundable credits. See instructions.	or 6069, e enter any payment a ayment wit	refundable credits and llowed as a credit. h this form, if required,	3a	\$		

LHA

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

Form 886	68 (Rev. 1 2012)						Page 2
If you	are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II and check this	box		▶ [X
Note. Or	ily complete Part II if you have already been granted an a	automatic	3-month extension on a previously fil	ed Form 8	868.		
If you	are filing for an Automatic 3-Month Extension, comple	te only Pa	rt I (on page 1).				
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies	needed).	
			Enter filer's	identifyin	g num	ber, see instru	etions
Type or	Name of exempt organization or other filer, see instru-	ctions		Employer	ployer identification number (EIN) or		
print							
File by the	THE TOBIN FAMILY FOUNDATION		•	X	23-	-6420013	j
due date for	date for Number, street, and room or suite no. If a P.O. box, see instructions.			Social se	cial security number (SSN)		
filing your return See	101 CHESWOLD LANE UNIT 5D				•	, ,	
instructions	City, town or post office, state, and ZIP code. For a fo	oreign add	ress, see instructions.				
	HAVERFORD, PA 19041	•					
				 			
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)			.[0 4
				· · · · · · · · · · · · · · · · · · ·			
Applicat	ion	Return	Application				Return
<u>Is For</u>		Code	is For				Code
Form 99		01					
Form 99	0-BL	02	Form 1041-A				08
Form 99	0-EZ	01	Form 4720				09
Form 99		04	Form 5227				10
Form 99	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11
	0-T (trust other than above)	06	Form 8870				12
STOP! C	o not complete Part II if you were not already granted	an autor	<u>natic 3-month extension on a prev</u>	iously file	d Forr	n 8868.	
	SYLVAN TOBIN						
	ooks are in the care of 101 CHESWOLD LI	N - H				 	
	hone No. ► 610-649-7024		FAX No. D			~.	
	organization does not have an office or place of business					. > 1	J
	is for a Group Return, enter the organization's four digit						
box 🕨	If it is for part of the group, check this box			all memb	ers the	extension is fo	or.
	equest an additional 3-month extension of time until	NOVEM					
	r calendar year 2011, or other tax year beginning		, and endin			_	·
6 If 1	the tax year entered in line 5 is for less than 12 months, o	check reas	on: Initial return	Final r	eturn		
_ L	Change in accounting period						
	ate in detail why you need the extension		1 601/01 7077 1170 166				
<u>A</u>	DDITIONAL TIME IS NEEDED TO	KITR .	A COMPLETE AND ACC	URATE	RE	TURN.	
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On 16:	his application is for Form 990-BL, 990-PF, 990-T, 4720,	ar 6060 a					
		or ouce, e	inter the tentative tax, less any				٥
-	nrefundable credits. See instructions.			8a	\$		0.
	this application is for Form 990-PF, 990-T, 4720, or 6069,						
	c payments made. Include any prior year overpayment al	lowed as a	a credit and any amount paid				600
	reviously with Form 8868.			<u>85</u>	\$		600.
	Ilance due. Subtract line 8b from line 8a. Include your pa		ur uns form, ir requirea, by using		۱ .		Δ
	TPS (Electronic Federal Tax Payment System) See Instru		st be completed for Part II o	8c	<u> </u>		0.
Under no					- با د بحم ا	oudedee and had	1
it is true.	naities of perjury. Lectare that I have examined this form? include correct, and pomplete, and that am authorized to prepare this fo	my accom) orm.	panying schedules and statements, and to	o uie dest c	н ніў КП	lowieuge and Del	ici,
Signature			CLA	Date		8/2/20	12
DIGHTALUIT	Tille P			Date			

Form 8868 (Rev. 1-2012)