



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



THE TWIN TO TWIN TRANSFUSION  
SYNDROME FOUNDATION  
411 LONGBEACH PARKWAY  
BAY VILLAGE OH 44140

DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Mary Slamon-Joyner  
Signature of officer or trustee  
Founder and President  
Title

January 28, 2013  
Date