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

**SCANNED OCT 0 9 2012** 

	al Revenue Service Note The foundation may b	ie abie to use a copy of this		rany requirements.	
	calendar year 2011 or tax year beginning		, and ending	1. 5	
Nar	ne of foundation			A Employer identification	number
m	HE CHIEF EN ENTLY ECHNINAM	TON		45-2464321	
	HE SHIPLEY FAMILY FOUNDAT  There and street (or P.O. box number if mail is not delivered to street.)	B Telephone number			
	15 NORWAY ST., PO BOX 150	717-771-19	28		
	or town, state, and ZIP code	<u></u>		C If exemption application is po	
	ORK, PA 17405			o il exemplion application to pr	chaing, Groot had by Lass
	theck all that apply: X Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	, check here
•	Final return	Amended return	,		
	Address change	Name change		Foreign organizations me 2. check here and attach co	eting the 85% test,
H C	theck type of organization: X Section 501(c)(3) ex			E If private foundation stat	
		Other taxable private found	ation	under section 507(b)(1)	
I Fa	ur market value of all assets at end of year   J   Accounting		Accrual	F If the foundation is in a (	•
	om Part II, col. (c), line 16)	her (specify)		under section 507(b)(1)	
Ì		mn (d) must be on cash	basis)		
Pa	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
	necessarily equal the amounts in column (a) )	expenses per books	income	income	(cash basis only)
	1 Contributions, gifts, grants, etc., received	25,000.	1212116	N/A	
	2 Check In the foundation is not required to attach Sch. B	) f	e	194-1 2 All 12	The state of the s
	Interest on savings and temporary cash investments				A STANCE OF STANCE
	4 Dividends and interest from securities				
	5a Gross rents				( ** ) ( ** ) ( * ) ( * ) ( * ) ( * )
	b Net rental income or (loss)		*	i e n St. John S	्रा मा प्रमाणिक
ø	6a Net gain or (loss) from sale of assets not on line 10		~; / · · · · · · · · · · · · · · · · · ·	12 15 - 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	( 1.69/15) William 15/15/15/
ű	Gross sales price for all assets on line 6a			1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Carried Control
Revenue	7 Capital gain net income (from Part IV, line 2)	3	0.		
4	8 Net short-term capital gain		<u> </u>		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	9 Income modifications Gross sales less returns	The second of the second	and a second	(2)	Callotte and the formation
	10a and allowances	, , , , , , ,	* * * *	<u> </u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	b Less Cost of goods sold	17.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	c Gross profit or (loss)		- يعد ي - در	<del> </del>	
	11 Other income	25 000			3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	12 Total Add lines 1 through 11	25,000.	0.	<del>                                     </del>	0.
	13 Compensation of officers, directors, trustees, etc	0.	0 .		<u> </u>
	14 Other employee salaries and wages			<del> </del>	
S	15 Pension plans, employee benefits				-
Šuš	16a Legal fees b Accounting fees				
ď	c Other professional fees				
ē M	17 Interest				
aţ	18 Taxes			<u> </u>	
str	19 Depreciation and depletion			1	A STATE OF THE STA
Ë	20 Occupancy			<del> </del>	
Adr	21 Travel, conferences, and meetings			1	
Ď	22 Printing and publications				
8	23 Other expenses				
Operating and Administrative Expenses	24 Total operating and administrative				
)er:	expenses Add lines 13 through 23	0.	0	•	0.
ō	25 Contributions, gifts, grants paid	15,000.		a laborar of the same of the same	15,000.
	26 Total expenses and disbursements.				
	Add lines 24 and 25	15,000.	0	•	15,000
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	10,000.			<u> </u>
	b Net investment income (if negative, enter -0-)		0	•	
_	C Adjusted net income (if negative, enter -0-)			N/A	
1235	oo1 2-11 LHA For Paperwork Reduction Act Notice, see	instructions.			Form <b>990-PF</b> (2011

	Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	End of year		
143	arτ	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value	
$\neg$	1	Cash - non-interest-bearing		10,000.	10,000.	
- 1	2	Savings and temporary cash investments				
1	3	Accounts receivable >				
		Less: allowance for doubtful accounts ▶				
-	4	Pledges receivable ►	رىدە يەنىچىنى دېرىدىغەنلىكى بىدىن ئى يىسى	The same of the sa	and more requests the same and	
ŀ		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons				
	7	Other notes and loans receivable	34	7 · A //	1 12 45	
		Less; allowance for doubtful accounts				
9	8	Inventories for sale or use				
Assets	-	Prepaid expenses and deferred charges				
\\ \		Investments - U.S. and state government obligations				
		Investments - corporate stock				
		Investments - corporate bonds				
		Investments - land, buildings, and equipment basis	\$215 \$ 13 A B A B A B A B A B A B A B A B A B A	Alexander St. St. 2 19	The same of the sa	
		Less accumulated depreciation				
	12	Investments - mortgage loans				
	13	Investments - other				
		Land, buildings, and equipment: basis	, , , , , , , , , , , , , , , , , , , ,	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		
		Less accumulated depreciation				
	15	Other assets (describe >				
	16	Total assets (to be completed by all filers)	0.	10,000.	10,000.	
_	17	Accounts payable and accrued expenses				
	18	Grants payable				
S	19	Deferred revenue			و مرود المجال المحال	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
abii	21	Mortgages and other notes payable			], ;	
Ë		Other liabilities (describe >)				
					1 3 3 2 3 5 3 6 3 6 3 6 5	
	23	Total liabilities (add lines 17 through 22)	0.	0.		
		Foundations that follow SFAS 117, check here				
		and complete lines 24 through 26 and lines 30 and 31.			The second of the second	
Sec	24	Unrestricted			Section Continued	
an	25	Temporarily restricted				
Ba	26	Permanently restricted				
pu		Foundations that do not follow SFAS 117, check here				
ŕ		and complete lines 27 through 31.				
S	27	Capital stock, trust principal, or current funds	0.	. 0.		
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	. 0		
Net Assets or Fund Balance	29	Retained earnings, accumulated income, endowment, or other funds	0.	10,000		
Net	30	Total net assets or fund balances	0.	10,000		
	ŀ					
	31	Total liabilities and net assets/fund balances	0.	10,000	• ( ) ( )	
P	art	III Analysis of Changes in Net Assets or Fund B	Balances			
=					<del>1 </del>	
1		al net assets or fund balances at beginning of year - Part II, column (a), lin	e 30		_	
	•	st agree with end-of-year figure reported on prior year's return)		1	10 000	
2		er amount from Part I, line 27a		2		
3		er increases not included in line 2 (itemize)				
4		lines 1, 2, and 3		4		
5		reases not included in line 2 (itemize)				
6	Tota	al net assets or fund balances at end of year (line 4 minus line 5) - Part II,	column (b), line 30		10,000. Form <b>990-PF</b> (2011)	
					FORM 330-FF (2011)	

Enter 1% of net investment income (1% of Part I, line 27b) 6 7 Add lines 5 and 6 7 8 Enter qualifying distributions from Part XII, line 4 8 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Form 996-PF (2011) THE SHIPLEY FAMILY FOUNDAY	TION	45-246	<u>4321</u>	Page -
Part VI Excise Tax Based on Investment Income (Section		1948 - see	instruction	ons)
1a Exempt operating foundations described in section 4940(d)(2), check here	and enter "N/A" on line 1.			
Date of ruling or determination letter: (attach copy of fe	etter if necessary-see instructions)	.	. ,	
b Domestic foundations that meet the section 4940(e) requirements in Part V, check	k here 🕨 🔙 and enter 1%	1		0 .
of Part I, line 27b		1 1 .	, * -{2	
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations	s enter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundation		2		0
3 Add lines 1 and 2	•	3		0
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation	ns only. Others enter -0-)	4		0
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter		5		0
6 Credits/Payments:		1. 1.1	1	٠, -
a 2011 estimated tax payments and 2010 overpayment credited to 2011	6a	, n		,
b Exempt foreign organizations - tax withheld at source	6b	1 ·	S, (,^ ,~_	84
	6c	10 5 10	-, , , , ,	
c Tax paid with application for extension of time to file (Form 8868)	6d	1 (17)	, , , , , , , , , , , , , , , , , , ,	4.7
d Backup withholding erroneously withheld		7   ' ' '	*****	0
7 Total credits and payments. Add lines 6a through 6d	000Whad	<del></del>		
8 Enter any penalty for underpayment of estimated tax. Check here if Form 23	220 is attached	8		0
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9		
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount of		10	·	
11 Enter the amount of line 10 to be: Credited to 2012 estimated tax	Refunded ▶	11		
Part VII-A   Statements Regarding Activities			- 1V-	-151
1a During the tax year, did the foundation attempt to influence any national, state, or	local legislation or did it participate or interver	e in	** Ye	s No
any political campaign?			1a	X
b Did it spend more than \$100 during the year (either directly or indirectly) for polit	ical purposes (see instructions for definition)?		1b	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the ac	tivities and copies of any materials publisi	ned or		<u> </u>
distributed by the foundation in connection with the activities			1, 1	*
c Did the foundation file Form 1120-POL for this year?			1c	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed	during the year:			
(1) On the foundation. > \$ 0. (2) On foundation		•_		305
e Enter the reimbursement (if any) paid by the foundation during the year for politic				
managers. ► \$ 0.	·			
2 Has the foundation engaged in any activities that have not previously been report	ed to the IRS?		2	X
If "Yes," attach a detailed description of the activities			4, 5, ~	
3 Has the foundation made any changes, not previously reported to the IRS, in its g	poverning instrument, articles of incorporation	. or		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the			3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more duri			4a	Х
	ing the year.	N/A	4b	<del></del> -
b If "Yes," has it filed a tax return on Form 990-T for this year?	a the year?	14, 11	5	X
5 Was there a liquidation, termination, dissolution, or substantial contraction during	g the year?		, 10	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
If "Yes," attach the statement required by General Instruction T.	askafiad askage		Train.	
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945)	saustied either.			
By language in the governing instrument, or				1. 12.
<ul> <li>By state legislation that effectively amends the governing instrument so that no remain in the governing instrument?</li> </ul>	o mandatory directions that conflict with the St	ite iaw	6	X
· · · · · · · · · · · · · · · · · · ·			7 X	
7 Did the foundation have at least \$5,000 in assets at any time during the year?			*	- :
If "Yes," complete Part II, col (c), and Part XV.	o instructions)			, , ,
8a Enter the states to which the foundation reports or with which it is registered (see	e instructions)		-   ]	
PA	DC to the Attended Consent (or descent)		-	ا ا
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-			, 1	أ و
of each state as required by General Instruction G? If "No," attach explanat			8b X	
9 Is the foundation claiming status as a private operating foundation within the me		Hendar	7, ~	
year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)?		am.e= 1	9 -	2
40. Did any parence become substantial contributors during the tay year? # **** * ****	sob a schodule listing their names and addresses	STMT 1	1 10 1 2	K l

		<u>5-2464</u>	<u> 321</u>	F	age 5
Pa	irt VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
	section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory private the foundation of a disqualified person had advisory private the foundation of the foundation	/ıleaes?			
	If "Yes," attach statement (see instructions)		12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	х	
	Website address ► N/A	•			
1.4	The books are in care of ► THE FOUNDATION  Telephone no. ►	717-77	1-19	128	
17		ZIP+4 ▶17			
15	Section 4947(a)(1) nonexempt charitable trusts filling Form 990-PF in lieu of Form 1041 - Check here	, 11 77 <u>2 1 1</u>	103		$\overline{\Box}$
13	· · · · · · · · · · · · · · · · · · ·	15	N,	/ <b>X</b>	LJ
10		10		Yes	No
10	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,	,	16	.03	X
	Securities, or other financial account in a foreign country?		10 1	_ ,	<u>م</u> ارز کرد
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign		^ •	73.	- ريخ ۱۰۰
Da	country  The Statements Regarding Activities for Which Form 4720 May Be Required			·/	
<u> </u>				Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		7	162	INO
1a	During the year did the foundation (either directly or indirectly):	<b>.</b>		2507	
		X No	1		<b>1</b>
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	<b>.</b>		5.7	ا رُدِيد
		X No	12.5	47 77	À '-
		X No	(*************************************	• 773	المراجع المراجع
		X No	- 0,-3	1-1	# ,
	(5) Transfer any income or assets to a disqualified person (or make any of either available	[ <b>17</b> ]		770	
	, , , , , , , , , , , , , , , , , , , ,	X No	3	7	3
	(6) Agree to pay money or property to a government official? (Exception Check "No"			7	
	if the foundation agreed to make a grant to or to employ the official for a period after	( •• )			
	, , , , , , , , , , , , , , , , , , , ,	X No	1376	يني ا	40) : T
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	n= / n		:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here		1 345	132	- 14.
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		, ,		2
	before the first day of the tax year beginning in 2011?		1c		<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		<b>.</b> . `	4.3 % 4	375
	defined in section 4942(j)(3) or 4942(j)(5)):		\$ · · ` \	7.4	*`}``,
a	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		1.6	* 14-	ا م
		X No	- 1	الهمرة أوري	
	If "Yes," list the years >			- ""	~;} \[ \cdot \]
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		14		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	27/2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ند آلک	3364
	statement - see instructions.)	N/A	2b	. 3	, 35,
(	: If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.		1. Sept. 1.	٠٠٠ د مؤورون	38 32
	<b>&gt;</b>		2		"ZE.
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		46. T		\$
	• •	s X No	11/4		3
t	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after			- ( -	[: F.
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dis		.	, (,	37.0%
	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,		';		۰۰۰ ا
	Form 4720, to determine if the foundation had excess business holdings in 2011)	N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
1	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose	that	-	1	
	had not been removed from jeopardy before the first day of the tax year beginning in 2011?		4b	L	_X_
		For	m <b>990</b>	-PF	(2011)

orm 990-PF (2011) THE SHIPLEY FAMILY FOUND			<u>45-24643</u>	21 Page 6	
Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	ued)		
5a During the year did the foundation pay or incur any amount to					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	☐ Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, directly or indire	ectly,			
any voter registration drive?		Ye	s X No	10	
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<b>,</b>	☐ Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s 🗶 No 🏅	,	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or	1		
• • • • • • • • • • • • • • • • • • • •	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 und	n Regulations	L)	4-5		
section 53.4945 or in a current notice regarding disaster assistance (see instru	-	N/A	5b		
Organizations relying on a current notice regarding disaster assistance check hi	•		▶□	\$1 4.1	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ined			
expenditure responsibility for the grant?		I/A 🔲 Ye	s 🔲 No 🕒		
If "Yes," attach the statement required by Regulations section 53.4945		· ——-	ļ.;	表記(** 1/3. <sub>2</sub>	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to provide the foundation of the second secon			-		
a personal benefit contract?	- •	Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X	
If "Yes" to 6b, file Form 8870			<del> </del> -		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	
Information About Officers, Directors, Trusto		nagers, Highly			
Part VIII Paid Employees, and Contractors					
List all officers, directors, trustees, foundation managers and their	compensation.		,	<del></del>	
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other	
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowances	
SEE STATEMENT 2		0.	0.	0.	
				1	
			-	Ì	
				1	
Compensation of five highest-paid employees (other than those inc		enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other	
(a) Name and address of each employee paid more than \$50,000	devoted to position	(C) Compensation	and deterred compensation	allowances	
NONE					
	1	1			
<del></del>	1				
<del></del>					
Total number of other employees paid over \$50,000				0	

Form **990-PF** (2011)

Form 990'PF (2011) THE SHIPLEY FAMILY FOUNDATION	45-2	464321 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NC	NE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced	nformation such as the , etc.	Expenses
1 N/A		
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 lines	1 and 2.	Amount
1 N/A		
	<u></u>	
2		
All alban annual related annual protection (Consumb All alban)		
All other program-related investments. See instructions.		
<u> </u>		
Total. Add lines 1 through 3	<b>&gt;</b>	0.

Form **990-PF** (2011)

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 5,555. b Average of monthly cash balances 1b c Fair market value of all other assets 1c 5,555. d Total (add lines 1a, b, and c) 1d Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 2 5.555. 3 3 Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 83. 5,472. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 274. Minimum investment return Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain Part XI foreign organizations check here 
and do not complete this part.) 274. Minimum investment return from Part X, line 6 Tax on investment income for 2011 from Part VI, line 5 2a 2b Income tax for 2011. (This does not include the tax from Part VI.) 2<u>c</u> Add lines 2a and 2b C 274. 3 3 Distributable amount before adjustments. Subtract line 2c from line 1 4 0. 4 Recoveries of amounts treated as qualifying distributions 274. 5 Add lines 3 and 4 5 0. 6 Deduction from distributable amount (see instructions) 6 274. 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 15,000. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a Program-related investments - total from Part IX-B 1b 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. Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b 15,000. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 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 15,000. 6 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 4940(e) reduction of tax in those years.

Form 990-PF (2011)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
4. Distributable amount for 2011 from Port VI		rears prior to 2010	2010	2011
1 Distributable amount for 2011 from Part XI, line 7			, '	274.
2 Undistributed income, if any, as of the end of 2011	, ,		· · · · · · · · · · · · · · · · · · ·	
a Enter amount for 2010 only		Tanget Son A to the Manager 1848 Bare and	0.	*
b Total for prior years.	• ,		-,	
y rotal for prior you.	and the state of t	0.	۶۷ - وکي يا د ۱۹۸ - وکي يا د	4, 4,
3 Excess distributions carryover, if any, to 2011:			J. 1	
a From 2006	· · · · · · · · · · · · · · · · · · ·			The state of the
b From 2007	يريخ فيزي			
<b>c</b> From 2008		[1] [1] [1] [1] [1] [1] [1] [1] [1] [1]		
d From 2009				
e From 2010	and the state of t	The state of the s		· 医含物 (基本) 100
f Total of lines 3a through e	0.	2 (3. 3. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
4 Qualifying distributions for 2011 from				
Part XII, line 4: ► \$ 15,000.		(多) 12 (B) (最)		
a Applied to 2010, but not more than line 2a	*		0.	
b Applied to undistributed income of prior	1 2 8 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5			(本)的 (本)的
years (Election required - see instructions)	* * * * * * * * * * * * * * * * * * * *	0.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	1,37-4 ( 3,47,68	「大久 (2011 - 1427会") / 2   おい	274
d Applied to 2011 distributable amount	14 726			2/4.
e Remaining amount distributed out of corpus	14,726.	\$1.7	747 45"	0.
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount	<u>U.</u>			10 20 130 0
must be shown in column (a) )  6 Enter the net total of each column as			1 2 4 4	
indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	14,726.		5. 3 m 3./ " .	18 18 18 18 18 18 18 18 18 18 18 18 18 1
b Prior years' undistributed income. Subtract			,	
line 4b from line 2b	<u> </u>	0.		
c Enter the amount of prior years'	, , , , ,			1 1/2 1/2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
undistributed income for which a notice of deficiency has been issued, or on which	, , , ,			
the section 4942(a) tax has been previously	* , , , , , , , , , , , , , , , , , , ,			12 ( 200) 1 1
assessed		0.		
d Subtract line 6c from line 6b. Taxable	- ( ' -	0.	- 14, 1	
amount - see instructions	\$ 1 2 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	("sı " ; ; ;	\(\frac{1}{2} \cdot \frac{1}{2} \cdot \frac{1}{2	The state of the s
e Undistributed income for 2010. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011. Subtract	7 /	3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	7.	, , , , , , , , , , , , , , , , , , , ,
lines 4d and 5 from line 1. This amount must	(			
be distributed in 2012				0.
7 Amounts treated as distributions out of	-1.0			;
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.		21	1.
8 Excess distributions carryover from 2006	· · · · · · · · · · · · · · · · · · ·	* * * ;		, <del>26</del>
not applied on line 5 or line 7	0.		<u> </u>	*
9 Excess distributions carryover to 2012		-	, ,	
Subtract lines 7 and 8 from line 6a	14,726.	, , ,		
10 Analysis of line 9:	25		5	ا رود د الله المراتبة
a Excess from 2007	1			
b Excess from 2008	_			
c Excess from 2009	_	,		
d Excess from 2010	-			
e Excess from 2011 14,726.			1	Form <b>990-PF</b> (2011)

		FOUNDATION			64321 Page 10
Part XIV Private Operating F			II-A, question 9)	N/A	
1 a If the foundation has received a ruling or		•			
foundation, and the ruling is effective for	•	•	▶ └		
<b>b</b> Check box to indicate whether the found		ng foundation described		4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	" 1 0040	Prior 3 years	1 (1) 0000	ļ ,, <del>,</del> , ,
income from Part I or the minimum	(a) 2011	<b>(b)</b> 2010	(c) 2009	(d) 2008	(e) Total
investment return from Part X for	I		-		
each year listed				<u></u>	
<b>b</b> 85% of line 2a			ļ <u>.</u>	<del>                                     </del>	
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not	1				
used directly for active conduct of					
exempt activities		ļ		ļ	
e Qualifying distributions made directly					j
for active conduct of exempt activities.	1				
Subtract line 2d from line 2c				ļ	ļ
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets	ļ				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	L				
b "Endowment" alternative test - enter	1				
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	1				
investment income (interest,	1				
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public	1				
and 5 or more exempt organizations as provided in	1				
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization	<u> </u>				
(4) Gross investment income		<u> </u>	<u> </u>		<u> </u>
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during t		ructions.)			
1 Information Regarding Foundatio	·			6 14 1 6 1b 1c	
a List any managers of the foundation who year (but only if they have contributed m			tributions received by the	toundation before the cic	ise of any tax
NONE	10.0 1.10.1 \$0,000,1 (000 1	300			
b List any managers of the foundation wh	o own 10% or more of th	ne stock of a cornoration	for an equally large ports	on of the ownership of a r	partnership or
other entity) of which the foundation has			to an equally large porti	on or the ownership or a p	armeroring or
NONE	-				
2 Information Regarding Contributi	on, Grant, Gift I nan	. Scholarship, etc. P	rograms:	<del>-</del>	<del></del>
Check here ► X if the foundation o				not accept unsolicited rea	uests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	per of the person to who	m applications should be	e addressed:	-	
			_		
b The form in which applications should b	e submitted and informa	ation and materials they s	should include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields	, kinds of institutions, or	other factors:	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelat	Unrelated business income		ded by section 512, 513, or 514	(e)	
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income	
	code		1 3000			
a b			1			
	-		$\vdash$			
	1		<del>                                     </del>			
	Į.					
e	<del></del>		†			
g Fees and contracts from government agencies	_		<del> </del>			
2 Membership dues and assessments			1			
3 Interest on savings and temporary cash			1			
investments						
4 Dividends and interest from securities					. <u></u>	
5 Net rental income or (loss) from real estate:	3., ,	A & 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		The state of the s	. I Li HAM SHO	
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property			<u> </u>			
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory						
9 Net income or (loss) from special events			ļ			
O Gross profit or (loss) from sales of inventory			<u> </u>			
1 Other revenue:						
a						
b			-			
C			<b></b> -		ļ	
d						
e	<del> </del>		, , ,			
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>	0.	, ,		0.	
13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions to verify calculations.)				13	0.	
				A D		
Part XVI-B Relationship of Activities	to the Acc	omplishment of E		ot Purposes 	-·	
Line No Explain below how each activity for which ince			A contri	buted importantly to the accor	mplishment of	
the foundation's exempt purposes (other than	by providing fi	unds for such purposes).			· ·· · · · · · · · · · · · · · · · · ·	
					<del></del>	
				<del></del>		
					· <u>-</u>	
			_		· · · · · · · · · · · · · · · · · · ·	
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					·	
					<del>.</del>	
			•		<del> </del>	

Form 990	):PF (2011) THE S	SHIPLEY FAMILY F	FOUNDATION	45-246	54321 Page 13
Part 2			and Transactions ar	nd Relationships With Nonch	aritable
	Exempt Organ				
		lirectly engage in any of the followi			Yes No
the	Code (other than section 501(o	c)(3) organizations) or in section 5	27, relating to political organiz	zations?	
<b>a</b> Tra	nsfers from the reporting found	dation to a noncharitable exempt or	rganization of:		
-	Cash	-			1a(1) X
(2)	Other assets				1a(2) X
b Oth	er transactions:				
(1) Sales of assets to a noncharitable exempt organization					1b(1) X
(2)	Purchases of assets from a no	oncharitable exempt organization			1b(2) X
(3)	Rental of facilities, equipment,	, or other assets			1b(3) X
(4)	Reimbursement arrangements	5			1b(4) X
(5)	Loans or loan guarantees				1b(5) X
(6)	Performance of services or m	embership or fundraising solicitation	ons		1b(6) X
		ailing lists, other assets, or paid en	• •		1c X
				ays show the fair market value of the goods	
				e in any transaction or sharing arrangement	, show in
		, other assets, or services received		1	
(a) Line n	(b) Amount involved	(c) Name of noncharitabl	le exempt organization	(d) Description of transfers, transactions, ar	id sharing arrangements
		N/A			- Parameter
		<del> </del>		<u> </u>	
		<del> </del>		<u> </u>	
				<del> </del>	
		<u></u>			
	<del></del>	<del> </del>			<del></del>
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		<del> </del>	<u>.</u>		
		<del> </del>			
		<del> </del>			
	<u> </u>				
	•	ctly affiliated with, or related to, one		ations described	
		er than section 501(c)(3)) or in sec	ction 52/7		Yes X No
<u> </u>	/es," complete the following scl		(b) Type of organization	(c) Description of relation	nchin
	(a) Name of or	yanızanını	(b) Type of Organization	(c) Description of relation	nsinp
	N/A		-		
					· · · · · · · · · · · · · · · · · · ·
	Under penalties of penury. I declare	e that I have examined this return, include	ing accompanying schedules and s	statements, and to the best of my knowledge	
Sign				ation of which preparer has any knowledge	May the IRS discuss this eturn with the preparer
Here	V. O) G	10.	18/12/17	PRESTOENT	shown below (see instr.)?
	Signature of officer or truste		Date	Title	X Yes  No
	Print/Type preparer's r			Date Check If PTI	<u> </u>
	i i i i i i i i i i i i i i i i i i i		2 Wen CPA	self- employed	•
Paid	ERIC R WEI		R WENGER, CPA		00546907
Prepa		INSEL KUNTZ LESH		Firm's EIN ► 23-	
•					· · <del>-</del> · ·

Form **990-PF** (2011)

(717)394-5666

Phone no

Use Only

Firm's address ▶ PO BOX 8408

LANCASTER, PA 17604-8408

# Schedule B

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

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

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

OMB No 1545-0047

2011

Employer identification number Name of the organization 45-2464321 THE SHIPLEY FAMILY FOUNDATION Organization type (check one): Filers of: Section: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions **General Rule** [X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990.PF, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Employer identification number

#### THE SHIPLEY FAMILY FOUNDATION

45-2464321

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
1	SHIPLEY ENERGY 415 NORWAY STREET YORK, PA 17403	\$\$.	Person X Payroll				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroll Complete Part II if there is a noncash contribution )				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
<del></del>		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution.				

Name of organization

Employer identification number

### THE SHIPLEY FAMILY FOUNDATION

45-2464321

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Employer identification number

	HIPLEY FAMILY FOUNDATION	<u> </u>		45-2464321			
Part III	Exclusively religious, charitable, etc., individually year. Complete columns (a) through (e) and the	dual contributions to section 501(c)	(7), (8), or (10) organizations ns completing Part III, enter	ns that total more than \$1,000 for the			
	the total of exclusively religious, charitable, etc.	, contributions of \$1,000 or less for	the year. (Enter this information once	, <b>&gt;</b> \$			
(a) No	Use duplicate copies of Part III if additional	space is needed	<del></del>				
(a) No, from	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held			
Part I							
j							
<del></del>							
1							
Ī	(e) Transfer of gift						
	(*** · · · · · · · · · · · · · · · · · ·						
ļ	Transferee's name, address, and	Relationship of tra	Relationship of transferor to transferee				
1							
1							
(a) No.	<u>-</u>		<del></del>				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held			
1 41(1							
ł							
ļ							
i		(e) Transfer of gift	t .				
ŀ	Transferee's name, address, and	<u> </u>	Relationship of tra	nsferor to transferee			
Ì							
			<del></del>	*			
(a) No. from	415		(4) D				
Part I	(b) Purpose of gift	(c) Use of gift	(a) Desc	ription of how gift is held			
	<del></del>						
		-					
ŀ		(a) Tanadau ad aid					
	(e) Transfer of gift						
	Transferee's name, address, and	d ZIP + 4	Relationship of tra	nsferor to transferee			
İ							
	-		<del></del>				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held			
Part I	(4)	(-,					
J							
ł	(e) Transfer of gift						
	(e) Hansler of Sitt						
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee				

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	1
NAME OF CONTRIBUTOR	ADDRESS		
SHIPLEY ENERGY	415 NORWAY STREET YORK, PA 17403		

	LIST OF OFFICERS, DIRECTORS AND FOUNDATION MANAGERS		STATEMENT 2	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
WILLIAM S SHIPLEY 415 NORWAY STREET YORK, PA 17403	PRESIDENT 0.10	0.	0.	0.
ERIN M SHAFFER 415 NORWAY STREET YORK, PA 17403	VICE PRESIDENT 0.10	0.	0.	0.
SHIRLEY D SHIPLEY 415 NORWAY STREET YORK, PA 17403	SECRETARY 0.10	0.	0.	0.
RICHARD M BEAMESDERFER 415 NORWAY STREET YORK, PA 17403	TREASURER 0.10	0.	o -	0.
MICHELLE L SHIPLEY 415 NORWAY STREET YORK, PA 17403	BOARD MEMBER 0.10	0.	0.	0.
ANDREW P SHAFFER 415 NORWAY STREET YORK, PA 17403	BOARD MEMBER 0.10	0.	0.	0.
SARAH E SHIPLEY 415 NORWAY STREET YORK, PA 17403	BOARD MEMBER 0.10	0.	0.	0.
BENJAMIN G SHIPLEY 415 NORWAY STREET YORK, PA 17403	BOARD MEMBER 0.10	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PA	AGE 6, PART VIII	0.	0.	0.

#### 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)

 $\triangleright \mathbf{X}$  If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs gov/efile and click on e-file for Chanties & Nonprofits Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Name of exempt organization or other filer, see instructions Employer identification number (EIN) or Type or print 45-2464321 THE SHIPLEY FAMILY FOUNDATION File by the Social security number (SSN) Number, street, and room or suite no. If a P O box, see instructions due date for filing your 415 NORWAY ST., PO BOX 1509 City, town or post office, state, and ZIP code For a foreign address, see instructions instructions YORK, PA 17405 0 4 Enter the Return code for the return that this application is for (file a separate application for each return) Return Return Application Application Code Code Is For Is For Form 990 01 Form 990-T (corporation) 07 80 02 Form 1041-A Form 990-BL Form 4720 09 01 Form 990-EZ 10 04 Form 5227 Form 990-PF 05 Form 6069 11 Form 990-T (sec 401(a) or 408(a) trust) 12 Form 990-T (trust other than above) 06 Form 8870 THE FOUNDATION PO BOX 1509 - YORK, PA 17405 The books are in the care of > 415 NORWAY ST., Telephone No ► 717-771-1928 FAX No If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)

If this is for the whole group, check this box | If it is for part of the group, check this box | and attach a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2012 , to file the exempt organization return for the organization named above. The extension is for the organization's return for. ► X calendar year 2011 or tax year beginning , and ending Initial return If the tax year entered in line 1 is for less than 12 months, check reason Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions За If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 3ь \$ Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

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