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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.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

| For | calen | dar year 2011 or tax year beginning | SEP | 8, 2011 | , and ending | DEC 31, 2011 | | |
|---------------------------------|----------|---|--------------------|------------------------------------|--|---|--|--|
| | | | | | | A Employer identification | number | |
| THE P&A FAMILY FOUNDATION, INC. | | | | | | 45-3189487 | | |
| Nur | nber ar | nd street (or PO box number if mail is not deli | B Telephone number | | | | | |
| 8 | 40! | 5 GREENSBORO DR C | O ARG | Y WILTSE & R | 0 700 | 703-893-06 | 00 | |
| City | y or to | wn, state, and ZIP code | | | | C If exemption application is p | ending, check here | |
| _ <u>M</u> | [CL] | EAN, VA 22102 | | | | | | |
| G | Check | all that apply: X Initial return | | Initial return of a fo | rmer public charity | D 1 Foreign organizations | s, check here | |
| | | Final return | • | Amended return | | Foreign ergenizations me | ating the 95% test | |
| | | X Address cha | inge | Name change | | Foreign organizations me 2. check here and attach co | mputation | |
| H (| heck | type of organization: X Section | 501(c)(3) ex | cempt private foundation | | E If private foundation stat | tus was terminated | |
| | Sec | ction 4947(a)(1) nonexempt charitable | trust | Other taxable private founda | ition | under section 507(b)(1) | (A), check here | |
| I Fa | air ma | rket value of all assets at end of year | J Accounti | ng method: X Cash | Accruat | F If the foundation is in a (| 60-month termination | |
| (fi | rom F | Part II, col (c), line 16) | | her (specify) | | under section 507(b)(1) | (B), check here | |
| | - \$ | | (Part I, colu | mn (d) must be on cash l | oasis) | | T | |
| Pá | art I | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and necessarily equal the amounts in column (a) | | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) | |
| | 1 | Contributions, gifts, grants, etc., receiv | red | 2,000,000. | 1. 2. 1. S. 29 T. 1. 1. 1. | N/A | | |
| | 2 | Check if the foundation is not required to | attach Sch B | 17 - 2 / - 2/654 | | | | |
| | 3 | Interest on savings and temporary cash investments | | 757. | 757. | | STATEMENT 1 | |
| | 4 | Dividends and interest from securities | | | | | | |
| | 5a | Gross rents | | | | <u></u> | 第一年 31 付薪 34 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| | b | Net rental income or (loss) | <u> </u> | | | | The state of the s | |
| a) | 6a | Net gain or (loss) from sale of assets not on li | ne 10 | | 1、13年上海海市 | | 2000年 | |
| Ž | Ь | Gross sales price for all assets on line 6a | | -3 13 | | | | |
| Revei | 7 | Capital gain net income (from Part IV, line 2) | | | 0. | THE TEST | V - 2 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 | |
| a | 8 | Net short-term capital gain | | 1 | The second secon | | プログラ 中型子 (A) A (| |
| | 9 | Income modifications | | | 4 24 - 1 1 1 2 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 | MAD 2 | 3 3012 7 0 | |
| | 10a | Gross sales less returns and allowances | | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 14 5 1 00 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | |
| | b | Less Cost of goods sold | | | | Control of the second | DE TERMINATION OF THE PROPERTY | |
| | 1 | Gross profit or (loss) | | | The state of the s | | MN: CO I Sala | |
| | 11 | Other income | | 0 000 757 | 7.7 | | | |
| | 12 | Total. Add lines 1 through 11 | | 2,000,757. | 757. | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| | 13 | Compensation of officers, directors, trustees, | etc | 0. | 0. | <u> </u> | <u> </u> | |
| | ł | Other employee salaries and wages | | | | | | |
| ຜູ | | Pension plans, employee benefits | | | | | | |
| Expenses | 16a | Legal fees | | | <u> </u> | · | | |
| CDe | D | Accounting fees | | | · · · · · · · · · · · · · · · · · · · | | <u> </u> | |
| _ | | Other professional fees | | | | | <u> </u> | |
| کے ative | 1/ | Interest | | | | | | |
| o 16 Stra | 18 | Taxes Depreciation and depletion | | | | | The way of the first of the fir | |
| dministr | 19 20 | Occupancy | | | | | | |
| ં 🗹 | 21 | Travel, conferences, and meetings | | | | | | |
| الاست and/ | | Printing and publications | | | | | | |
| | 22 | Other expenses | | | <u> </u> | | | |
| | 24 | Total operating and administrative | | | | | | |
| | - | expenses. Add lines 13 through 23 | | 0. | 0. | | 0. | |
| Alving Ar Operating | 25 | Contributions, gifts, grants paid | | | | | 0. | |
| | 26 | Total expenses and disbursements. | | | | | | |
| 2 | | Add lines 24 and 25 | | 0. | 0. | | 0. | |
| 5 — | 27 | Subtract line 26 from line 12: | <u>-</u> . | | | | | |
| | 1 | Excess of revenue over expenses and disbur | sements | 2,000,757. | | | | |
| | 1 | Net investment income (if negative, enter | | | 757. | | 32 | |
| | | Adjusted net income (if negative, enter - | | | ``, | N/A | | |
| 123 | | LHA For Paperwork Reduction Act | | instructions | | | Form 990-PF (2011) | |

INC.

| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) | | | | | (b) | How ac - Purcl - Dona | quired hase ition | (c) Date (mo., | acquired day, yr.) | (d) Date sold (mo., day, yr.) | |
|---|---------------------------|--|-------------------|--------------------------------------|--------------|-----------------------------|-------------------------|------------------------|---|----------------------------------|--|
| 1a | | | | | | | | | | | |
| | NE | | | | + | | | | | | |
| <u>c</u> | | | . | | ┼ | | | | | | |
| <u>d</u> e | | | ····- | | | | | | | | |
| (e) Gross sales price | (f) Depreciat (or allo | | | st or other basis expense of sale | | | | | Gain or (loss) is (f) minus (| | |
| a | | | | | | | | · | | - | |
| <u>b</u> | | | | | | | | | | | |
| <u>c</u> | | | | | \dashv | | | | | | |
| e | | | | | | | | | | | |
| Complete only for assets show | ng gain in column (| h) and owned by | the foundation | on 12/31/69 | | | | | Col. (h) gaın | | |
| (i) F.M.V. as of 12/31/69 | (j) Adjust as of 12 | | (k) Ex over | cess of col. (1) col. (j), if any | _ | | | ol. (k), but Losses | not less than (from col. (| 1 -0-) or h)) | |
| a | | | | | | | | | | | |
| <u>b</u> | | · | ļ | | | - | | | | | |
| C | | | | | | | | | | | |
| <u>d</u> | | | | | - | | | | | | |
| <u>e</u> | | 16 | l | 7 | 7 | | | | | | |
| 2 Capital gain net income or (net c | • | If gain, also enter If (loss), enter -0 | - ın Part I, line | 7 | } | 2 | | | | | |
| 3 Net short-term capital gain or (lo if gain, also enter in Part I, line 8 | column (c). | ctions 1222(5) ar | nd (6): | | } | 2 | | | | | |
| If (loss), enter -0- in Part I, line 8 Part V Qualification U | Inder Section | 1 4940(e) for | Reduced | Tax on Net | lnv | estn | nent In | come | | | |
| If section 4940(d)(2) applies, leave to Was the foundation liable for the sectif "Yes," the foundation does not qual Enter the appropriate amount in | ction 4942 tax on th | 940(e). Do not co | omplete this pa | art. | | | | | | Yes No | |
| (a) Base period years Calendar year (or tax year beginn | ing in) Adju | (b) sted qualifying dis | stributions | Net value of no | (c) oncha | ritable- | use asse | ts | (d) Distribution ratio (col. (b) divided by col. (c)) | | |
| 2010 | | | | | | | | | | | |
| 2009 | | | | | | | | | | | |
| 2008 | | | | | | | | _ | | | |
| 2007 | - | | | | | | | | | | |
| | | | | | • | | | | | | |
| 2 Total of line 1, column (d) 2 Average distribution ratio for the | E year bace period | - duude the total | on line 2 hy 5 | or by the number | r of ve | ore | | 2 | | | |
| 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years | | | | | | 3_ | | | | | |
| 4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5 | | | | | | 4 | | | | | |
| 5 Multiply line 4 by line 3 | | | | | | | 5 | | | | |
| 6 Enter 1% of net investment inco | me (1% of Part I, III | ne 27b) | | | | | | 6_ | | | |
| 7 Add lines 5 and 6 | | | | | | | | 7 | ļ | | |
| 8 Enter qualifying distributions fro | | | | | | | | 8 | | | |
| If line 8 is equal to or greater tha See the Part VI instructions. | n line 7, check the | box in Part VI, line | th, and com | plete that part usii | ng a 1 | % tax | rate. | _ | | | |

123521 12-02-11

| | 990-PF (2011) THE P&A FAMILY FOUNDATION, INC. rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4940(c) | <u>45-</u> 948 | 318 - see | 9487 instru | ction | Page 4 |
|----|--|-------------------|--------------|------------------------|-----------------|----------------------|
| | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. | | , | | | |
| 14 | Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) | | : | ٠- | t | |
| h | Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% | 1 | | | | 15. |
| · | of Part I, line 27b | ٠, ٠ | , | ٠, | | -; |
| r | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). | * . | f 7 | $V_{i} = V_{i}$ | | |
| | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 2 | | | | o. |
| 3 | Add lines 1 and 2 | 3 | | | | <u>15.</u> |
| 4 | 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 | | | | $\overline{15.}$ |
| | Credits/Payments: | | | · · · · · | 1, 1, | |
| | 2011 estimated tax payments and 2010 overpayment credited to 2011 6a 6a | ٠,٠, | | 7- '4 <u>1-</u> " | ^ | |
| | Exempt foreign organizations - tax withheld at source 6b | ŗ | | ر ان ^ا ا | ģ | |
| | Tax paid with application for extension of time to file (Form 8868) 6c | , j Lie | ., | ا جوجي في خا | , , | rati. |
| | Backup withholding erroneously withheld 6d | 1 | | - 11 · | | 1 7 7- 1 |
| | Total credits and payments. Add lines 6a through 6d | 7 | ľ | 7 | | 0. |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached | 8 | | | | |
| - | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | | | | 15. |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | | | | |
| | Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶ Refunded ▶ | 11 | | | | |
| Pa | rt VII-A Statements Regarding Activities | | | | | |
| _ | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene | ın | | (, () | Yes | No |
| | any political campaign? | | | 1a | | X |
| 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. | | | | 1, | , |
| c | Did the foundation file Form 1120-POL for this year? | | | 10 | . | X |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | | 1 2 3 | ۳.۰ | |
| ٠ | (1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0. | | | | ž., . | () |
| e | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | | , min | ر مرا از مرا | |
| Ū | managers. ►\$ 0. | | | 1 2.1 | .) .) | 医遗 |
| 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. | | | \tau_{-1}^{\tau_{-1}}\ | , | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, o | r | | | 1 | .32 |
| • | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | | 3 | | X |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | | 4a | | X |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | N | I/A | 4b | | <u> </u> |
| | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | 5 | | X |
| | If "Yes," attach the statement required by General Instruction T. | | | 30 | 141 | *** 3 |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | | 7,5 | -1, 1 | |
| | By language in the governing instrument, or | | | 1 | , 'm' | ا ريالي" داخيلا - |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state | law | | 7 - 7" | ` | 1, 1, 24 |
| | remain in the governing instrument? | | | 6 | X | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? | | | 7 | X_ | |
| | If "Yes," complete Part II, col. (c), and Part XV. | | | 1,5 | 2 | 2 1 1 |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) | | | | 4 | رُ ، |
| | DE, VA | | | | i | 1 |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) | | | 3.7 | ~ ' ~ ' = | . p. 1 # |
| _ | 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 cale | ndar | | 7 ¥ , | , , | 2,4 |
| • | year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV | | | 9 | | X |
| 10 | | TMT | | 10 | Х | |
| | | | F | orm 990 | -PF | 2011) |

123531 12-02-11

| orm 990-PF (2011) THE P&A FAMILY FOUNDATIO | N, INC. | Da i al / | 45-31894 | 87 Page 6 |
|---|---|--|--|--|
| Part VII-B Statements Regarding Activities for Which F | orm 4/20 May Be | Requirea (contin | ued) | |
| 5a During the year did the foundation pay or incur any amount to: | 4045(4))0 | | es X No | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | | | ו מאו באם ss | |
| (2) Influence the outcome of any specific public election (see section 4955); o | r to carry on, directly or moir | | es X No | |
| any voter registration drive? | 2 | | s X No | ? · . |
| (3) Provide a grant to an individual for travel, study, or other similar purposes' | | 11 | S LALINU | |
| (4) Provide a grant to an organization other than a charitable, etc., organization | i described in section | | s X No | |
| 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, | or aducational nurnocae or | | יין אונבבו אי | |
| the prevention of cruelty to children or animals? | or educational purposes, or | | s X No | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und | ler the excentions described | | <u> </u> | 空 [文句] 2号 |
| section 53.4945 or in a current notice regarding disaster assistance (see instru | | iii riogalations | N/A | ib |
| Organizations relying on a current notice regarding disaster assistance check h | | | | 7 7 20 1.30 |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr | | uned | | |
| expenditure responsibility for the grant? | | | s No | |
| If "Yes," attach the statement required by Regulations section 53.4945 | | ., | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to p | | | | |
| a personal benefit contract? | ouy promisimo on | | s X No | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | ersonal benefit contract? | | | b X |
| If "Yes" to 6b, file Form 8870. | orderia berrani derritadi | | -, 1 | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | helter transaction? | | s 🗓 No | 11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 |
| b If "Yes," did the foundation receive any proceeds or have any net income attribu | | | . — | b |
| Information About Officers Directors Trust | | nagers, Highly | | - L L |
| Part VIII Paid Employees, and Contractors | | | , | |
| 1 List all officers, directors, trustees, foundation managers and their | compensation. | | | |
| | (b) Title, and average hours per week devoted | (c) Compensation (If not paid, | (d) Contributions to employee benefit plans and deferred | (e) Expense account, other |
| (a) Name and address | to position | enter -0-) | and deferred compensation | allowances |
| | | | | |
| | | } | | |
| SEE STATEMENT 3 | | 0. | 0. | 0. |
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| | | | | |
| | 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | A HALONE II | | |
| 2 Compensation of five highest-paid employees (other than those inc | (b) Title, and average | , enter "NUNE." | (d) Contributions to | (a) Eynense |
| (a) Name and address of each employee paid more than \$50,000 | hours per week | (c) Compensation | (d) Contributions to employee benefit plans and deferred | (e) Expense account, other |
| | devoted to position | | compensation | allowances |
| NONE | | | | |
| | | | | |
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| | i | | | |
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| | | | | |
| Post to complete of other employees and accomplete 000 | | 1 | | |
| Total number of other employees paid over \$50,000 | | | Earm C | 90-PF (2011) |
| | | | 101111 5 | (2011) |

| Form 990-PF (2011) THE P&A FAMILY FOUNDATION, INC. | 45-3 | 189487 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 Part IX-A Summary of Direct Charitable Activities | | <u>▶</u> 0 |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in | Iformation such as the | |
| number of organizations and other beneficiaries served, conferences convened, research papers produced, | etc. | Expenses |
| 1 <u>N/A</u> | | |
| | | |
| 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 <u>N/A</u> | | |
| | | |
| 2 | | |
| | | |
| All alban areas related in victorials Co. instructions | | |
| All other program-related investments. See instructions. 3 | | |
| | | |
| | | 0. |
| Total Add lines 1 through 3 | ▶ | 0. |

| P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four | ndations | s, see instructions) |
|----|---|-------------|-----------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| a | Average monthly fair market value of securities | 1a | 0. |
| b | Average of monthly cash balances | 1b | 2,000,417. |
| C | Fair market value of all other assets | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 2,000,417. |
| 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 | 2,000,417. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 30,006. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 1,970,411. |
| 6 | Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD | 6 | 31,040. |
| P | art XI 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 | I |
| 1 | Minimum investment return from Part X, line 6 | 1 | 31,040. |
| 2a | · | | |
| b | Income tax for 2011. (This does not include the tax from Part VI.) | . | |
| C | Add lines 2a and 2b | 2c | 15. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 31,025. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 31,025. |
| 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 | 31,025. |
| P | art:XII* Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | ` | |
| а | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 0. |
| 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 | | 3a | |
| b | , | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 0. |
| 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 | |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 0. |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years. | qualifies f | or the section |

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 | | | - | 31,025. |
| 2 Undistributed income, if any, as of the end of 2011 | 1. | , | - | |
| a Enter amount for 2010 only | | | 0. | , ~ , , , , , , , , , , , , , , , , , , |
| b Total for prior years: | <u>'</u> | | | 7 7 |
| | | 0. | · | |
| 3 Excess distributions carryover, if any, to 2011: | * | | | |
| a From 2006 | | The second of the second | | |
| b From 2007 c From 2008 | | , | | , ', |
| d From 2009 | , , | | | , , , , , , , , , , , , , , , , , , , |
| e From 2010 | | | | |
| f Total of lines 3a through e | 0. | | | , |
| 4 Qualifying distributions for 2011 from | A Commence of the second | grant og en en en de spanie | ~ | |
| Part XII, line 4: ►\$ 0 . | Light of the Control | | | |
| a Applied to 2010, but not more than line 2a |) - 'q' | in the fire | 0. | |
| b Applied to undistributed income of prior | | | | |
| years (Election required - see instructions) | 104°12 12, 1, 1 | 0. | | |
| c Treated as distributions out of corpus | _ | | | |
| (Election required - see instructions) | 0. | | · | |
| d Applied to 2011 distributable amount | | * | | 0. |
| e Remaining amount distributed out of corpus | 0. | | | 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: | | To the same | - | |
| 8 Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 0. | 1. 3 m/ 8 36 - 3 | | 7 |
| b Prior years' undistributed income. Subtract | | | | 1、10分別的可能 |
| line 4b from line 2b | The second of th | 0. | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | | | - " - " - " - " - " - " - " - " - " - " |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2010. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | A. 4 | 1,5 | 0. | |
| f Undistributed income for 2011. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | 21 025 |
| be distributed in 2012 | | | | 31,025. |
| 7 Amounts treated as distributions out of | | 1 | | |
| corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) | 0. | | • | |
| 8 Excess distributions carryover from 2006 | | -: 1 | | , ~ (> 5 |
| not applied on line 5 or line 7 | 0. | | | |
| 9 Excess distributions carryover to 2012. | | 2 30 30 30 30 | -1 '. | , |
| Subtract lines 7 and 8 from line 6a | 0. | May the second | 3 | , |
| 10 Analysis of line 9: | | | | |
| a Excess from 2007 | | | | |
| b Excess from 2008 | | | The state of the s | |
| c Excess from 2009 | | | | |
| d Excess from 2010 | | | | |
| e Excess from 2011 | 1 | <u> </u> | 1 | Form 990-PF (2011) |

| Part XIV Private Operating F | | UNDATION, IN | | N/A | 89487 Page 10 |
|---|---------------------------|-------------------------------|------------------------------|-----------------------------|---------------------------|
| 1 a If the foundation has received a ruling o | | | 77, question 5) | N/A | |
| foundation, and the ruling is effective to | | | | | |
| b Check box to indicate whether the found | • | | in section | 4942(j)(3) or 49 | 942(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | ing touridation described | Prior 3 years | 1372())(0) 01 1 13 | 1-2())(3) |
| income from Part I or the minimum | (a) 2011 | (b) 2010 | (c) 2009 | (d) 2008 | (e) Total |
| investment return from Part X for | (0) | (0) 20 10 | (0) - 000 | (4) | (0) (0.0) |
| | | | | | |
| each year listed | | | | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, | | | | | |
| line 4 for each year listed | ļ | | | | |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | | | |
| exempt activities | | | ļ | | |
| 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) Value of all assets | | | | | |
| (2) Value of assets qualifying | | | | | |
| under section 4942(j)(3)(B)(i) | | | | | |
| b "Endowment" alternative test - enter | | | 1 | | |
| 2/3 of minimum investment return shown in Part X, line 6 for each year | | | | | |
| listed | | <u> </u> | | | |
| c "Support" alternative test - enter: | | | | | |
| (1) Total support other than gross | | | | | |
| investment income (interest, | | | | | |
| dividends, rents, payments on securities loans (section | | } | | | |
| 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public | | | - | | |
| and 5 or more exempt | | ı | İ | | |
| organizations as provided in section 4942(j)(3)(B)(iii) | | | 1 | | |
| (3) Largest amount of support from | | | | | |
| an exempt organization | | | | | |
| (4) Gross investment income | | | | | |
| Part XV Supplementary Info | | | if the foundation | had \$5,000 or mo | ore in assets |
| at any time during t | he year-see inst | tructions.) | - - | | <u></u> |
| 1 Information Regarding Foundation | n Managers: | | | | |
| a List any managers of the foundation wh | | | ributions received by the | foundation before the clos | se of any tax |
| year (but only if they have contributed n | nore than \$5,000). (See | section 507(d)(2).) | | | |
| ABBAS YAZDANI | | | | | |
| b List any managers of the foundation wh | | | (or an equally large portion | on of the ownership of a pa | artnership or |
| other entity) of which the foundation has | s a 10% or greater intere | est. | | | |
| NONE | | | | | |
| 2 Information Regarding Contributi | | | | | |
| Check here 🕨 🔀 if the foundation o | | | | | |
| the foundation makes gifts, grants, etc. | (see instructions) to ind | ividuals or organizations t | inder other conditions, co | omplete items 2a, b, c, and | l d |
| a The name, address, and telephone num | ber of the person to who | om applications should be | addressed: | | |
| | | | | | |
| | | | | | |
| b The form in which applications should be | e submitted and inform | ation and materials they s | hould include; | | |
| c Any submission deadlines: | | | | | |
| | | | | | |
| d Any restrictions or limitations on awards | s, such as by geographic | cal areas, charitable fields, | kinds of institutions, or o | other factors: | · — |
| | | | | | |
| 123601 12-02-11 | | 10 | | | Form 990-PF (2011) |

123811 12-02-11

Total

Form **990-PF** (2011)

▶ 3b

| Enter gross amounts unless otherwise indicated. | | d business income | | ded by section 512, 513, or 514 | (e) |
|---|--|------------------------|------------------------|---|---------------------------------------|
| 1 Program service revenue: | (a) Business code | (b) Amount | Exclu- sion code | (d) Amount | Related or exempt function income |
| a | | | | | |
| b | | | | | |
| C | | _ | | | |
| d | | | | | |
| e | | | | | |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | · · · · · · · · · · · · · · · · · · · | |
| 3 Interest on savings and temporary cash | | | | | |
| investments | | | 14 | 757. | |
| Dividends and interest from securities | | | | | |
| 5 Net rental income or (loss) from real estate: | (" | Traffic | | | |
| a Debt-financed property | | | | · · · · · · · · · · · · · · · · · · · | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | | | |
| 9 Net income or (loss) from special events | | | | <u> </u> | |
| O Gross profit or (loss) from sales of inventory | | | | | |
| 1 Other revenue: | | | | | |
| a | _ | | | | |
| b | | | | | |
| c | _ | | | | · · · · · · · · · · · · · · · · · · · |
| d | | | | | |
| e | #1. 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | | |
| 2 Subtotal. Add columns (b), (d), and (e) | 製作されて | | 0. | 757. | |
| 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations | | | | 13 | 757 |
| Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which is the foundation's exempt purposes (other the | ncome is reported ii | n column (e) of Part X | (VI-A contrib | | nplishment of |
| N/A | | | <u> </u> | | |
| | | | | | |
| | | | | - · · · · · · · · · · · · · · · · · · · | |
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123621 12-02-11

| Form 990 Part | | Q11) THE P | &A FAMII | | | | and Dalational | | 3189487 | | age 13 |
|------------------|--------------|---|-----------------------|---------------------------------------|-----------------|-----------------|-----------------------|---------------------------------------|--------------------|--------------|--------------|
| Fait | VAII. | Exempt Organ | | ansiers 10 | and Irans | actions a | and Relations | nips with Nor | cnaritable |) | |
| 1 Did | the or | ganization directly or indi | rectly engage in a | ny of the following | ng with any otl | ner organizatio | on described in secti | on 501(c) of | | Yes | No |
| the | Code (| other than section 501(c | :)(3) organizations |) or in section 5 | 27, relating to | political organ | nizations? | | <u> </u> | , | , |
| | | from the reporting found | ation to a nonchai | ritable exempt or | ganization of: | | | | ٠. | , | |
| ٠. | Cash | | | | | | | - | 1a(1) | | X |
| | Other | | | | | | | | 1a(2) | - | X |
| - | | sactions: | ble evennt ergen | ration | | | | | 15/43 | · · | v |
| | | of assets to a noncharita ases of assets from a no | • • | | | | | | 1b(1) 1b(2) | | X |
| | | l of facilities, equipment, | | or organization | | | | | 1b(3) | | X |
| | | oursement arrangements | | | | | | | 1b(4) | | X |
| | | or loan guarantees | | | | | | | 1b(5) | | X |
| (6) | Perfo | mance of services or me | embership or fund | raising solicitatio | ons | | | | 1b(6) | | X |
| c Sha | aring of | facilities, equipment, ma | ılıng lists, other as | ssets, or paid em | nployees | | | | 1c | | X |
| | | er to any of the above is | | - | | | | _ | | ets, | |
| | | given by the reporting for | | | | ıır market valu | ie in any transaction | or sharing arranger | nent, show in | | |
| | |) the value of the goods, (b) Amount involved | | ervices received. of noncharitable | | nization | (4) - | | | | |
| (a) Line n | - | (b) Amount involved | (c) Name | N/A | e exempt orga | HIZALION | (u) Description | of transfers, transaction | is, and sharing an | rangeme | nts |
| | | | | N/A | | | | · | | | |
| | | | | · | | | | · · · · · · · · · · · · · · · · · · · | | | |
| | | | <u> </u> | | | | | | | | |
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| | | | | | | | | | | | |
| | | dation directly or indirec | | | | xempt organi | zations described | | | | _ |
| | | 501(c) of the Code (other | | l(c)(3)) or in sec | tion 527? | | | | Yes | LX |] No |
| b If | es, co | mplete the following sch (a) Name of org | | | (b) Type of | organization | | c) Description of rel | ationehin | | |
| | | N/A | Janization | | (b) Type of | Urganization | | c) Description of rei | allonship | | |
| | | N/A | | | | | | | | | |
| | | | | | _ | | | · · · · · · · · · · · · · · · · · · · | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | penalties of perjury, I declare lief, it is true, correct, and con | | | | | | | May the IRS | liscuss | this |
| Sign | | 11/ | //// | proporo (omograno | ک ا | 11/1/21 | | | return with the | (see ins | pr (tr.)? |
| Here | Sugar | Many | The Sa | the same | | 14/2014 | PRESID | ENT | _ X Yes | | J No |
| | Sign | alure of officer or trustee Print/Type preparer's na | | Preparer's s | Date_ | | Title Date | Check If | PTIN | | |
| | | Thirtype preparer 5 no | ATTEG | | | | , , | self- employed | | | |
| Paid | | JOAN C. HO | LTZ | Dan | - (Hob | T CPA | 3/15/12 | | P00836 | 429 | |
| Prepa | arer | Firm's name ► ARG | | E & ROE | INSON. | P.C. | <u> </u> | Firm's EIN ► 54 | | | |
| Use (| | | | | | | | | | | |
| | | Firm's address > 84 | 05 GREEN | ISBORO D | RIVE, | SUITE | 700 | | | | |

(703) 893-0600

Phone no.

MCLEAN, VA 22102

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

Name of the organization

Employer identification number

| 5 | THE P&A FAMILY FOUNDATION, INC. | 45-3189487 | | | | | |
|--|---|---------------------------------|--|--|--|--|--|
| Organization type (check | | | | | | | |
| Filers of: | Section: | | | | | | |
| Form 990 or 990-EZ | 501(c)() (enter number) organization | | | | | | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | | | | | | |
| | 527 political organization | | | | | | |
| Form 990-PF | X 501(c)(3) exempt private foundation | | | | | | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | | | | |
| | 501(c)(3) taxable private foundation | | | | | | |
| - , | n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special R | ule. See instructions. | | | | | |
| General Rule | | | | | | | |
| ' | tion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in n mplete Parts I and II | noney or property) from any one | | | | | |
| Special Rules | | | | | | | |
| 509(a)(1) and 17 | 01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the re 70(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II | | | | | | |
| total contributio | 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. | | | | | | |
| contributions fo If this box is che purpose. Do no | 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 lf 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 | | | | | | |
| but it must answer "No" | n that is not covered by the General Rule and/or the Special Rules does not file Schedule on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Par eet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). | | | | | | |

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

Employer identification number

THE P&A FAMILY FOUNDATION, INC.

45-3189487

| Part I | Contributors (see instructions) Use duplicate copies of Part I if addition | nal space is needed. | |
|------------|--|----------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | ABBAS YAZDANI 8405 GREENSBORO DRIVE, STE 700; C/O ARGY, WILTSE & ROBINSON, P.C. MCLEAN, VA 22102 | \$2,000,000. | 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 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 Oncash 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) |

Employer identification number

THE P&A FAMILY FOUNDATION, INC.

45-3189487

| art II Nonc | ash Property (see instructions) Use duplicate copies of P | art II if additional space is needed | |
|------------------------------|---|--|--------------------------|
| (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 | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | | |
| | | \$ | 90, 990-EZ, or 990-PF) (|

| lame of organization | | | | Employer identification number | |
|---------------------------|--|--|---|--|--|
| THE P& Part III | A FAMILY FOUNDATION, I Exclusively religious, charitable, etc., indi year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. | vidual contributions to section 501(c) |)(7), (8), or (10) organizations completing Part III, enter | 45-3189487 ns that total more than \$1,000 for the | |
| | Use duplicate copies of Part III if addition | nal space is needed | tire year. (Enter this information once | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Desc | (d) Description of how gift is held | |
| | | (e) Transfer of gift | t | | |
| _ | Transferee's name, address, a | nd ZIP + 4 | Relationship of tra | nsferor to transferee | |
| (a) No. | (b) Purpose of gift | (c) Use of gift | (d) Desc | ription of how gift is held | |
| Part I | | | | | |
| - | (e) Transfer of gift | | | | |
| | Transferee's name, address, a | nd ZIP + 4 | Relationship of tra | nsferor to transferee | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Desc | ription of how gift is held | |
| | | | | | |
| - | (e) Transfer of gift | | | | |
| - | Transferee's name, address, a | nd ZIP + 4 | Relationship of tra | nsferor to transferee | |
| (a) No. | | | | | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Desc | ription of how gift is held | |
| | | | | | |
| | (e) Transfer of gift | | | | |
| - | Transferee's name, address, a | nd ZIP + 4 | Relationship of tra | nsferor to transferee | |
| | | | | | |

| FORM 990-PF INTERE | ST ON SAVINGS AND TEMPORARY CASH INVESTMENTS | STATEMENT 1 |
|-----------------------------------|---|---------------|
| SOURCE | | AMOUNT |
| JPM #3031970779 JPM #W56419000 | | 722. 35. |
| TOTAL TO FORM 990-P | F, PART I, LINE 3, COLUMN A | 757. |
| FORM 990-PF | ORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10 | |
| NAME OF CONTRIBUTOR | ADDRESS | |
| ABBAS YAZDANI | 8405 GREENSBORO DRIVE, STE 7 WILTSE & ROBINSON, P.C. MCLEAN, VA 22102 | 00; C/O ARGY, |

| | OF OFFICERS, DI | STATEMENT 3 | | |
|--|--------------------------|-------------|---------------------------------|---------|
| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | COMPEN- | EMPLOYEE BEN PLAN CONTRIB | EXPENSE |
| ABBAS YAZDANI 8405 GREENSBORO DRIVE, STE 700; C/O ARGY, WILTSE & ROBINSON, P.C. MCLEAN, VA 22102 | PRESIDENT, CHAI | · | % TREAS | 0. |
| PAMELA YAZDANI 8405 GREENSBORO DRIVE, STE 700; C/O ARGY, WILTSE & ROBINSON, P.C. MCLEAN, VA 22102 | | | 0. | 0. |
| AMIR YAZDANI 8405 GREENSBORO DRIVE, STE 700; C/O ARGY, WILTSE & ROBINSON, P.C. MCLEAN, VA 22102 | ASSISTANT SECRE | | 0. | 0. |
| AZIZ YAZDANI 8405 GREENSBORO DRIVE, STE 700; C/O ARGY, WILTSE & ROBINSON, P.C. MCLEAN, VA 22102 | ASSISTANT SECRE | | 0. | 0. |
| DAVID YAZDANI 8405 GREENSBORO DRIVE, STE 700; C/O ARGY, WILTSE & ROBINSON, P.C. MCLEAN, VA 22102 | ASSISTANT SECRE | | 0. | 0. |
| TOTALS INCLUDED ON 990-PF, PAGE 6, | PART VIII | 0. | 0. | 0. |