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990-PF

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0052

Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2011 or tax year beginning 12/16, 2011, and ending 20 1 1 Name of foundation THE MARTINO FAMILY FOUNDATION A Employer Identification number C/O MICHAEL E. MARTINO 45-6635594 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) (212) 771-1232329 MARIOMI ROAD City or town, state, and ZIP code C If exemption application is pending, check here • • NEW CANAAN, CT 06840 G Check all that apply X Initial return Initial return of a former public charity 1 Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach Address change Name change computation X Section 501(c)(3) exempt private foundation H Check type of organization If private foundation status was terminate Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . Fair market value of all assets at end J Accounting method X Cash If the foundation is in a 60-month termination Other (specify) of year (from Part II, col (c), line under section 507(b)(1)(B), check here . 10,000,000 (Part I, column (d) must be on cash basis.) 16) ▶ \$ Part I Analysis of Revenue and Expenses (The (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)) for charitable expenses per ıncome income purposes books (cash basis only) 10,000,000 Contributions, grifts, grants, etc., received (attach schedule).

Check 3 Interest on savings and temporary cash investments Dividends and interest from securities b Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . Net short-term capital gain Income modifications • 10 a Gross sales less returns b Less Cost of goods sold c Gross profit or (loss) (attach schedule) Other income (attach schedule) 11 10,000,000 Total. Add lines 1 through 11 . 13 Compensation of officers, directors, trustees, etc Other employee salaries and wages Pension plans, employee benefits 15 16a Legal fees (attach schedule) Accounting fees (attach schedule) c Other professional fees (attach schedule). . ပ္တ 17 Ö Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion and A8hi 20 Travel, conferences, and meetings 22 Printing and publications Operating 23 Other expenses (attach schedule) Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid Total expenses and disbursements Add lines 24 and 25 Subtract line 26 from line 12 27 10,000,000. a Excess of revenue over expenses and disbursements . . b Net investment income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions. $^{1\text{E}\,\text{14}\,\text{10}\,\text{1000}}$ 6858DW 702V

c Adjusted net income (if negative, enter -0-)

Form 990-PF (2011)



Part II		'Balance Sheets Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of year			
_	ai t ii	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing		10,000,000.	10,000,000.		
		Savings and temporary cash investments					
		Accounts receivable					
		Less allowance for doubtful accounts ▶		_			
	4	Pledges receivable			-		
		Less allowance for doubtful accounts ▶	· -				
	5	Grants receivable					
		Receivables due from officers, directors, trustees, and other		···			
		disqualified persons (attach schedule) (see instructions)					
		Other notes and loans receivable (attach schedule)	• • • • • • • • • • • • • • • • • • • •				
		Less allowance for doubtful accounts	***************************************		* * ** ** ***		
		Inventories for sale or use					
sets	9	Prepaid expenses and deferred charges			<u> </u>		
SS							
٩		Investments - U S and state government obligations (attach schedule),					
		Investments - corporate stock (attach schedule)					
	11	Investments - corporate bonds (attach schedule)					
			-	~	· -		
		and equipment basis Less accumulated depreciation (attach schedule)					
		Investments - mortgage loans					
	13 14	Investments - other (attach schedule)					
		equipment basis	, .				
		(attach schedule)					
i		Other assets (describe					
		Total assets (to be completed by all filers - see the					
4		instructions Also, see page 1, item I)	0	10,000,000.	10,000,000.		
		Accounts payable and accrued expenses					
		Grants payable					
es		Deferred revenue					
Ħ		Loans from officers, directors, trustees, and other disqualified persons					
Liabilities	21	Mortgages and other notes payable (attach schedule)					
7	22	Other liabilities (describe					
┙	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.					
ances	24	Unrestricted					
	25	Temporarily restricted					
Bal	26	Permanently restricted			ŧ		
2		Foundations that do not follow SFAS 117,					
리		check here and complete lines 27 through 31. ▶ 🗓					
6	27	Capital stock, trust principal, or current funds					
ş	28	Paid-in or capital surplus, or land, bldg , and equipment fund					
SS	29	Retained earnings, accumulated income, endowment, or other funds		10,000,000.			
۲	30	Total net assets or fund balances (see instructions)	0	10,000,000.			
S	31	Total liabilities and net assets/fund balances (see					
		instructions)	0	10,000,000.			
Р	art III	Analysis of Changes in Net Assets or Fund I	Balances				
		net assets or fund balances at beginning of year - Part		must agree with			
		of-year figure reported on prior year's return)			0		
2	Enter	amount from Part I, line 27a		2	10,000,000.		
3	Other	increases not included in line 2 (itemize)		3			
4	Add I				10,000,000.		
_	D			· · · · · · · · · · 	10,000,000.		
6	Total	net assets or fund balances at end of year (line 4 minus li	ine 5) - Part II, column /h), line 30 6	10,000,000.		
<u> </u>	. 5.61	255010 0. Tang Salanoos at one of year time 4 minus i	inc o _j - i art ii, columin (D	/, mrc 50 [5]	10,000,000.		

	d describe the kind(s) of property sold rick warehouse, or common stock, 20		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date so (mo , day, y
a					
b					
c					
d			-		
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a			 		
b			 		
c			 		
d		 	 -		
		 	 	 -	
e			 		
Complete only for assets	showing gain in column (h) and own			Gains (Col (h) g	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less t Losses (from co	
a			<u> </u>		
b					
С					
d					
e					
Capital gain net income or	(DAT CODITOLINGE)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2		
Not short term conital goin	or (loss) as defined in sections f		1		
D. II I O		structions) If (loss), enter -0- in			
	<u> </u>	<u> </u>	1 3 1		
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Form	990-PF (2011)		ı	Page 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	struc	tions	5)
1 a	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 letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0
	here ▶ and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of \mathcal{I}	~		1
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2			0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			0
6	Credits/Payments Credits/Payments			,
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a			,
b	Exempt foreign organizations - tax withheld at source		•	- 4
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld		~ .	
7	Total credits and payments Add lines 6a through 6d			0
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2012 estimated tax ▶ Refunded ▶ 11			
Pai	t VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No
	or intervene in any political campaign?	1 a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the			
	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 or			
	distributed by the foundation in connection with the activities	ra Sonn		
С	Did the foundation file Form 1120-POL for this year?	1 c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			,
	(1) On the foundation (2) On foundation managers (3)			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Ì.,
	on foundation managers \$			1.5
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			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4 b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6		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	7	X	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)			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) of each state as required by General Instruction G? If "No," attach explanation	8 b		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 calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete			
	Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names		17	
	and addresses ATTACHMENT 1	10	Х	l

	990-PF (2011)		1	Page 5
Pa	t 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 privileges? If "Yes," attach statement (see instructions)	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ►N/A			
14	The books are in care of ► MICHAEL E. MARTINO Telephone no ► 212-771	-123	2	
	Located at ▶329 MARIOMI ROAD NEW CANNAN, CT ZIP+4 ▶ 06840			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	$\cdot \Box$
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority	-	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter the name of			
	the foreign country			
Pa	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	İ	/	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No		1	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			\$
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	*		,
	foundation agreed to make a grant to or to employ the official for a period after	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \		, 2%
	termination of government service, if terminating within 90 days)			,
	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	١	>	
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	 -	
	Organizations relying on a current notice regarding disaster assistance check here		\ .	>>
•	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	-	1 24 2	
	were not corrected before the first day of the tax year beginning in 2011?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			1,57
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	ĺ		ĺ
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 before 2011?			
	If "Yes," list the years			í
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			ł
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions)	2b	L	X
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
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 May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2011)	3ь		
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	Did the foundation make any investment in a prior year (but often December 24, 1960) that could increase it.	<u> </u>		

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

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	t VII-B Statements Regarding Activities for		720 May Be Requ	ired (continued)		
5 a	During the year did the foundation pay or incur any amou					
	(1) Carry on propaganda, or otherwise attempt to influer			_	'	
	(2) Influence the outcome of any specific public ele		•			
	directly or indirectly, any voter registration drive?				·	
	(3) Provide a grant to an individual for travel, study, or other	ner similar purposes?		. Yes X No	·	
	(4) Provide a grant to an organization other than a		•			
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s	see instructions)		. Yes X No		
	(5) Provide for any purpose other than religious, ch		• •			
	purposes, or for the prevention of cruelty to children of	r anımals?		. Yes X No	. []	
b	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the e	xceptions described in		
	Regulations section 53 4945 or in a current notice regard	ing disaster assistan	ce (see instructions)?	<i>.</i> <u></u>	5b	
	Organizations relying on a current notice regarding disast	ter assistance check h	nere	▶□		
C	If the answer is "Yes" to question 5a(4), does the	foundation claim ex	emption from the ta	×		
	because it maintained expenditure responsibility for the gi	rant?	<i>.</i>	. Yes No		
	If "Yes," attach the statement required by Regulations sect	tion 53 4945-5(d)				
6 a	Did the foundation, during the year, receive any fund	is, directly or indire	ctly, to pay premium	s		
	on a personal benefit contract?			. Yes X No	. _ .	
b	Did the foundation, during the year, pay premiums, direct				6ь	
	If "Yes" to 6b, file Form 8870	•	•			
7 a	At any time during the tax year, was the foundation a par	rty to a prohibited tax	shelter transaction?	. Yes X No	.	
<u> </u>	If "Yes," did the foundation receive any proceeds or have	e any net income attri	butable to the transaction		76	
Pai	t VIII Information About Officers, Directors	, Trustees, Foun	dation Managers,	Highly Paid Emplo	yees,	
1	and Contractors List all officers, directors, trustees, foundation in	nanagers and thei	r compensation (see	instructions)		
_	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans	(e) Expense a	
		devoted to position	-0-)	and deferred compensation		
ΔΨ:	TACHMENT 2		l c	٨		0
	11101111011112			1		
			-			
						
2	Compensation of five highest-paid employees "NONE."	(other than thos	se included on line	e 1 - see instruction	ons). If none	e, enter
		(b) Title and supress	-	(d) Contributions to		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expense a other allows	
		devoted to position		compensation		
- 						
	NONE					
	·		·			
	I number of other employees hald over \$50,000			·		

Form **990-PF** (2011)

Form 990-PF	(2011) ,		Page 7
Part VIII		nagers, Highly Paid Emplo	yees,
3 Five	highest-paid independent contractors for professional services (see ins	tructions). If none, enter "NONE	"
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
		,	
Total access	nor of others recovered ever \$50,000 for professional angular		
Total numi	ber of others receiving over \$50,000 for professional services	<u> </u>	
Part IX-A	Summary of Direct Charitable Activities		
	indation's four largest direct charitable activities during the tax year. Include relevant statisticans and other beneficianes served, conferences convened, research papers produced, etc.	al information such as the number of	Expenses
1 N/A			
2			· · · · · · · · · · · · · · · · · · ·
			
3			
3			
,	 		
4			
B	The state of the s		
Part IX-E			A
	ne two largest program-related investments made by the foundation during the tax year on lines 1	and 2	Amount
1 NONE	; 		
2			
All other pr	rogram-related investments. See instructions		
3 NONE			
Total. Add	lines 1 through 3	<u> </u>	

Form **990-PF** (2011)

Pa	art X Minimum Investment Return (All domestic foundations must complete this part see instructions.)	t Foreign foundation	ns,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable,	etc,	
	purposes	7 of ant	
а	Average monthly fair market value of securities	1a	
þ	Average of monthly cash balances	1b	416,667.
С	: Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	416,667.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	416,667.
4	Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, s	see	
	instructions)	4	6,250.
5	Instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line	4 5	410,417.
6	Minimum investment return. Enter 5% of line 5	6	897.
Pa	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ and do not comple	ng	
1	Minimum investment return from Part X, line 6	1	897.
2 a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011 (This does not include the tax from Part VI)		
С	· · · · · · · · · · · · · · · · · · ·	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	897.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	l – l	897.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XI	iii.	
	line 1	1 1	897.
Pa	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	- 1 1	
' a		1 a	
b	Program-related investments - total from Part IX-B	1b	
2	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable,	etc	
-	purposes		
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	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	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment inc		· · · · · · · · · · · · · · · · · · ·
	Enter 1% of Part I, line 27b (see instructions)		0
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 wh		ther the foundation
	qualifies for the section 4940(e) reduction of tax in those years	5	

1 Distributable amount for 2011 from Part XI, Inne 4 \$ a Applied to undistributed income of prior years but and a prior to 2010, Inne 7	d)
1 Distributable amount for 2011 from Part XI, Inne 7	
line 7 Undistributed income, if any, as of the end of 2011 Enter amount for 2010 only Total for pnor years 20 09 20 08 20 07 Excess distributions carryover, if any, to 2011 From 2006 From 2007 From 2008 From 2009 From 2010 Total of lines 3a through e Qualifying distributions for 2011 from Part XII, line 4 \$ Applied to 2010, but not more than line 2a b Applied to undistributed income of prior years	111
2 Undistributed income, if any, as of the end of 2011 a Enter amount for 2010 only	897.
a Enter amount for 2010 only b Total for pnor years 20 09 20 08 20 07 3 Excess distributions carryover, if any, to 2011 a From 2006 b From 2007 c From 2008 d From 2009 e From 2010 f Total of lines 3a through e 4 Qualifying distributions for 2011 from Part XII, line 4 \$ a Applied to 2010, but not more than line 2a b Applied to undistributed income of prior years	091.
b Total for pnor years 20 09 ,20 08 ,20 07 3 Excess distributions carryover, if any, to 2011 a From 2006	
a From 2006	
a From 2006 b From 2007 c From 2008 d From 2009 e From 2010 f Total of lines 3a through e 4 Qualifying distributions for 2011 from Part XII, line 4 \$\infty\$ \$\square\$ a Applied to 2010, but not more than line 2a b Applied to undistributed income of prior years	
b From 2007 c From 2008 d From 2009 e From 2010 f Total of lines 3a through e 4 Qualifying distributions for 2011 from Part XII, line 4 \$ a Applied to 2010, but not more than line 2a b Applied to undistributed income of prior years	
c From 2008	
d From 2009	
d From 2009	
e From 2010	
f Total of lines 3a through e Qualifying distributions for 2011 from Part XII, line 4 \$\simeq \square \qquare \qqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqq	
4 Qualifying distributions for 2011 from Part XII, line 4 ▶ \$ a Applied to 2010, but not more than line 2a b Applied to undistributed income of prior years	
line 4 ▶ \$ a Applied to 2010, but not more than line 2a b Applied to undistributed income of prior years	
a Applied to 2010, but not more than line 2a b Applied to undistributed income of prior years	
b Applied to undistributed income of prior years	
(Election required - see instructions).	
c Treated as distributions out of corpus (Election	
required - see instructions)	
d Applied to 2011 distributable amount	
e Remaining amount distributed out of corpus	
5 Excess distributions carryover applied to 2011	
(If an amount appears in column (d), the same	
amount must be shown in column (a))	
6 Enter the net total of each column as indicated below:	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	
b Prior years' undistributed income Subtract	
line 4b from line 2b 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	
d Subtract line 6c from line 6b Taxable	
amount - see instructions	
e Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount - see	
Instructions	
f Undistributed income for 2011 Subtract lines	
4d and 5 from line 1. This amount must be	
distributed in 2012	897.
7 Amounts treated as distributions out of corpus	
to satisfy requirements imposed by section	
170(b)(1)(F) or 4942(g)(3) (see instructions)	
8 Excess distributions carryover from 2006 not	
applied on line 5 or line 7 (see instructions)	
9 Excess distributions carryover to 2012.	
Subtract lines 7 and 8 from line 6a	
10 Analysis of line 9	
a Excess from 2007	
b Excess from 2008	
c Excess from 2009	
d Excess from 2010	
e Excess from 2011	

Pa	rt XIV. Private Oper	ating Foundations (see instructions and	l Part VII-A, question	9)	NOT APPLICABLE
1 a	If the foundation has foundation, and the ruling				ting	
ь	Check box to indicate wh				4942()	(3) or 4942(j)(5)
	Officer box to indicate with	Tax year	private operating round	Prior 3 years	4342()	(3) 01 4342())(3)
2 a	Enter the lesser of the ad-		/b) 2010	<u> </u>	(d) 2008	(e) Total
	Justed net income from Part I or the minimum investment return from Part X for each	(a) 2011	(b) 2010	(c) 2009	(a) 2008	
	year listed			İ		•
ь	85% of line 2a					
_	Qualifying distributions from Part					
·	XII, line 4 for each year listed					
d	Amounts included in line 2c not					
	used directly for active conduct of exempt activities					
е	Qualifying distributions made					
	directly for active conduct of exempt activities Subtract line					
3	2d from line 2c Complete 3a, b, or c for the		-			
	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section					
	4942(j)(3)(B)(i)				···	
D	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X,					
	line 6 for each year listed					
C	"Support" alternative test - enter					
	(1) Total support other than					
	gross investment income (interest, dividends, rents,					
	payments on securities					
	loans (section 512(a)(5)), or royalties)					
	(2) Support from general					
	public and 5 or more exempt organizations as					
	provided in section 4942					
	(j)(3)(B)(ui)					
	port from an exempt					
	organization (4) Gross investment income					
Pa		ary Information (C	omplete this part	only if the founda	tion had \$5,000	or more in assets
	at any time o	during the year - se	e instructions.)			
1	Information Regarding	•				
а	List any managers of before the close of any					ed by the foundation
	MICHAEL E.	MARTINO				
b	List any managers of	the foundation who	own 10% or more of	the stock of a corpo	ration (or an equally	large portion of the
	ownership of a partner	ship or other entity) of	which the foundation	has a 10% or greater	interest	
	N/A					
2	Information Regarding	g Contribution, Grant	, Gift, Loan, Scholarsh	ip, etc., Programs:		
	Check here ► X if t unsolicited requests for	or funds If the found:	ation makes gifts, gra	to preselected charitants, etc (see instruction	able organizations a ons) to individuals or	nd does not accept organizations under
	other conditions, comp					
а	The name, address, a	nd telephone number	of the person to whon	n applications should be	addressed	
<u>_</u>	The form in which app	lications should be sul	omitted and information	on and materials they	should include	
	The form in which app	ilications should be sui	Jimted and information	on and materials they s	snould include	
	Annah manana and and and					
С	Any submission deadle	nes				
d	Any restrictions or li	mitations on awards	such as by geogra	iphical areas, charital	ole fields, kinds of	nstitutions, or other
_	factors	a.a.a.a.a.a.a.a.a.a.a.a.a.a.a.a.a.		arado, orialitat	,	

3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Progress as morrowing Name and address (home or business) a Paid during the year Total Total Total Total Total Total Total	3 Grants and Contributions Paid Dur	ing the Year or Appr	oved for I	-uture Payment	
Total	Recipient	show any relationship to	Foundation status of	Purpose of grant or	Amount
Total	Name and address (home or business)	or substantial contributor	recipient	Contribution	
b Approved for future payment	a Paid during the year				
b Approved for future payment				[
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	A Analysis of Income-Produ		ated business income	Evoluded by	y section 512, 513, or 514	(e)
•	amounts unless otherwise indicated	(a) Business code	(b) Amount	(c)	(d) Amount	Related or exemp function income
_	service revenue			Exact Code	7,,,,,	(See instructions)
		_		+		
				 		
Fees a	and contracts from government agencies					
lembers	ship dues and assessments					
	n savings and temporary cash investments					
	s and interest from securities					
	al income or (loss) from real estate			 		
	financed property	_				_
	ebt-financed property					
	income or (loss) from personal property		 ·	+		
	vestment income					
•	me or (loss) from special events	<u> </u>				
	ofit or (loss) from sales of inventory.					
-	enue a					
	ld line 12, columns (b), (d), and (e)					
worksh	Relationship of Activities	to the Ac		<u></u>		uted importantly to
worksh t XVI- No.	eet in line 13 instructions to verify calc	to the Ac	h income is reported	ın column (e) of Part XVI-A contrib	
worksh t XVI- e No.	Relationship of Activities Explain below how each activities	to the Ac	h income is reported	ın column (e) of Part XVI-A contrib	
worksh t XVI- No.	Relationship of Activities Explain below how each activities	to the Ac	h income is reported	ın column (e) of Part XVI-A contrib	
worksh t XVI- No.	Relationship of Activities Explain below how each activities	to the Ac	h income is reported	ın column (e) of Part XVI-A contrib	
worksh t XVI- No.	Relationship of Activities Explain below how each activities	to the Ac	h income is reported	ın column (e) of Part XVI-A contrib	
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worksh t XVI- No.	Relationship of Activities Explain below how each activities	to the Ac	h income is reported	ın column (e) of Part XVI-A contrib	
worksh t XVI- No.	Relationship of Activities Explain below how each activities	to the Ac	h income is reported	ın column (e) of Part XVI-A contrib	
worksh t XVI- No.	Relationship of Activities Explain below how each activities	to the Ac	h income is reported	ın column (e) of Part XVI-A contrib	
worksh	Relationship of Activities Explain below how each activities	to the Ac	h income is reported	ın column (e) of Part XVI-A contrib	

Part >				ansfers To and Transa	actions	and Relations	ships With No	nchar		_{age} 13 e
เก	sect	_	-	engage in any of the follo section 501(c)(3) organiza	-				Yes	No
a Ti	ransfe	ers from the reportir	ng foundation to	a noncharitable exempt of	rganızatıo	n of			1	
(1	I) Cas	sh						1a(1)	<u> </u>	X
									ļ	X
		ransactions								-
(1	I) Sal	es of assets to a no	incharitable exer	mpt organization				1 <u>b(1</u>)		X
(2	2) Pur	chases of assets fro	om a noncharita	able exempt organization				1b(2)		X
(3	3) Rei	ntal of facilities, equ	ipment, or other	assets				1b(3)		X
(4	i) Kei	mbursement arrang	ements					1b(4)	_	X
(5) LOE	ins or loan guarante.	es					1b(5)		X
				its, other assets, or paid em					1	$\frac{x}{x}$
				s," complete the following					fair n	
				ces given by the reporting						
				gement, show in column (
(a) Line	no	(b) Amount involved	(c) Name of n	noncharitable exempt organization	(d)	Description of transfe	ers, transactions, and sh	anng am	ıngeme	nts
		N/A			N/	/A				
			 							
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de	escrib) of the Code (or	filiated with, or related to, ther than section 501(c)(3)			organizations	Y	es X	⊡ No
		(a) Name of organizatio		(b) Type of organization	ภา	(0) Description of relation	nship		
	_	· · · · · · · · · · · · · · · · · · ·								
		<u></u>								
	1,,,,,,,,	penalties of penury I decl					a Aba bast of one beauty		halad a	
Sign		penalties of perjury I decl		ned this return, including accompany amager) is based on all information of w		r has any knowledge		RS discus	-	retum
Here				11-9-12	_ 🔼	rustee		preparer_		below
	Sign	ture of officer or trustee		Date	Title		(see instruct	ons)?	Yes	X No
	<u> </u>	Print/Type preparer's	s name	Preparer's signature		Date	Toball I.	PTIÑ		
Paid		MICHAEL ANDRE		1 5/1.11	•		Check if self-employed		ነበፍበ4	50
Prepa	arer		OLA OO USA, LLP	1 / 000 0/		11-8-10	Firm's EIN ▶13-			, , , , , , , , , , , , , , , , , , ,
Use C	Only	Firm's address > 1		NUE			I mill 2 EIM TO	33013		
	•	_	EW YORK, N			10017-5001	Phone no 212-	885-8	000	
							= = = -			

Schedule B

(Form 990, 990-EZ, or 990-PF)
Department of the Treasury Internal Revenue Service
Name of the organization

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				
THE MARTINO FAMILY FOUN						
C/O MICHAEL E. MARTINO		45-6635594				
Organization type (check one)						
Filers of:	Section:					
Form 990 or 990-EZ						
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation				
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundat	ion				
	501(c)(3) taxable private foundation					
Note. Only a section 501(c)(7), (8) instructions General Rule), or (10) organization can check boxes for both the General Rule and a S	Special Rule See				
X For an organization filing	Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 contributor. Complete Parts I and II	or more (in money or				
Special Rules						
under sections 509(a)(1)	organization filing Form 990 or 990-EZ that met the 33 1/3 % support to and 170(b)(1)(A)(vi) and received from any one contributor, during the or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form	e year, a contribution of				
during the year, total cor	(8), or (10) organization filing Form 990 or 990-EZ that received from a htributions of more than \$1,000 for use <i>exclusively</i> for religious, charital , or the prevention of cruelty to children or animals. Complete Parts I, II,	ble, scientific, literary,				
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.						
990-EZ, or 990-PF), but it must an	of covered by the General Rule and/or the Special Rules does not file So swer "No" on Part IV, line 2, of its Form 990, or check the box on line H to certify that it does not meet the filing requirements of Schedule B (For	l of its Form 990-EZ or on				

Schedule B (Form 990, 990-EZ, or 990-PF) (2011) Page 2 Name of organization THE MARTINO FAMILY FOUNDATION Employer identification number C/O MICHAEL E. MARTINO 45-6635594 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) (b) (c) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution _ _ 1 MICHAEL E MARTINO Person Payroll 10,000,000. 329 MARIOMI ROAD, Noncash (Complete Part II if there is NEW CANAAN, CT 06840 a noncash contribution) (a) (b) (c) (d) Total contributions No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) Total contributions Name, address, and ZIP + 4 Type of contribution No. Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) (a) (b) (c) Type of contribution No. Name, address, and ZIP + 4 Total contributions Person Payroll Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II if there is

a noncash contribution)

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization THE MARTINO FAMILY FOUNDATION

C/O MICHAEL E. MARTINO

Employer identification number

45-6635594

Part Nonc	ash Property (see instructions). Use duplicate copies	s of Part II if additional space is ne	eded.
(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
		<u> </u>	
(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
		 \$	

Name of organization THE MARTINO FAMILY FOUNDATION Employer identification number C/O MICHAEL E. MARTINO 45-6635594 Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, charitable, etc. contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶\$ Use duplicate copies of Part III if additional space is needed (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

	II
CONTRIBUTORS	
NEW SUBSTANTIAL	
- NE	
10	
LINE 10	
PART VII-A,	
PART	
990PF,	
FORM	

ATTACHMENT

SUPPORT	DATE	RESS	NAME AND ADDRESS
PUBLIC			
DIRECT			

Ы

12/21/2011 MICHAEL E MARTINO 329 MARIOMI ROAD, NEW CANAAN, CT 06840

TOTAL CONTRIBUTION AMOUNTS

10,000,000.

10,000,000.

		0		
FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	DIRECTOR	GRAND TOTALS	
FORM 990PF, PART VIII - LIST	NAME AND ADDRESS	MICHAEL E. MARTINO 329 MARIOMI ROAD NEW CANAAN, CT 06840		

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ATTACHMENT 2

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

If you are	filing for an Automatic 3-Month Extension, in filing for an Additional (Not Automatic) 3-Month Part II unlesson have already been gra	onth Extens	ion, complete only Part	t II (on page 2 of this form)	▶ X	
a corporation 8868 to re- Return for instructions)	filing (e-file) You can electronically file Form required to file Form 990-T), or an addition quest an extension of time to file any of the Transfers Associated With Certain Person For more details on the electronic filing of	onal (not aut e forms liste nal Benefit (this form, vis	tomatic) 3-month extend in Part I or Part II w Contracts, which must sit www.irs.gov/efile an	ision of time. You can electronicall with the exception of Form 8870, It be sent to the IRS in paper f d click on e-file for Charities & Nonj	y file Form Information ormat (see	
	Itomatic 3-Month Extension of Time. O					
	on required to file Form 990-T and requesting a			•		
Part I only					▶ 🔲	
All other cor	porations (including 1120-C filers), partnership	os, REMICs,	and trusts must use For	rm 7004 to request an extension of t	ime	
to file incom	e tax returns		·	Enter flier's identifying number, se	e Instructions	
Type or	Name of exempt organization or other filer, see in			Employer identification number (EIN) or	
neint The PARTING PARTER FOUNDATION						
•	C/O MICHAEL E. MARTINO			X 45-6635594		
File by the due date for	Number, street, and room or suite no. If a P.O. bo	ox, see instruc	tions	Social security number (SSN)		
filling your return See	329 MARIOMI ROAD			J <u>lJ</u>		
instructions	City, town or post office, state, and ZIP code For	a foreign add	ress, see instructions			
	NEW CANAAN, CT 06840					
Enter the Ro	eturn code for the return that this application is	for (file a se	parate application for ea	ach return)	. 0 4	
A 12 42	<u> </u>		14 0 0			
Application		Return	Application		Return	
Is For		Code	Is For		Code	
Form 990		01	Form 990-T (corporati	on)	07	
Form 990-B		02	 	Form 1041-A		
Form 990-E		01	Form 4720		09	
Form 990-P		04	Form 5227		10	
	(sec 401(a) or 408(a) trust)	05	Form 6069		11	
Form 990-1	(trust other than above)	06	Form 8870		12	
The bool	ks are in the care of ▶ MICHAEL E. MA	RTINO				
Telephor	ne No. ▶ 212 771-1232		FAX No. >			
 If the org 	anization does not have an office or place of	business in t	the United States, check	this box	▶□	
	or a Group Return, enter the organization's fo				nis is	
	e group, check this box ▶				tach	
a list with th	e names and EINs of all members the extensi	on is for				
	est an automatic 3-month (6 months for a corp		red to file Form 990-T)	extension of time		
until_	08/15 , 20 12 , to file the	exempt org	anization return for the o	organization named above. The exte	ension is	
	organization's return for					
<u>X</u>	calendar year 20 11 or tax year beginning					
▶	tax year beginning	, 20	, and ending	, 20		
	tax year entered in line 1 is for less than 12 me Change in accounting period	onths, check	reason Initial r	eturn Final retum		
	application is for Form 990-BL, 990-PF, fundable credits. See instructions.	990-T, 4720	, or 6069, enter the	tentative tax, less any		
	s application is for Form 990-PF, 990-T	4720 0	r 6069 enter any s			
	ated tax payments made include any prior y		•	, t		
	ce due. Subtract line 3b from line 3a Includ					
(Elect	ronic Federal Tax Payment System) See insti	ructions		3c \$		
	you are going to make an electronic fund	withdrawat	with this Form 8868.	, see Form 8453-EO and Form 8	879-EO for	
payment in	structions.					

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

Form 8868 (Rev 1-2012)

Form 8	868 (Rev	v 1-2012)				Page 2	
• If y	ou are	filing for an Additional (Not Automatic) 3-Mo	onth Exten	sion, complete only Part II	and check this box		
		omplete Part II if you have already been grain					
 If y 	ou are	filing for an Automatic 3-Month Extension, of	omplete o	only Part I (on page 1)			
Part	art II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)						
	Enter filer's identifying number, see instr						
	Name of exempt organization or other filer, see instructions Employer identification number					er (EIN) or	
Туре	or	THE MARTINO FAMILY FOUNDATION	N				
print		C/O MICHAEL E. MARTINO			X 45-6635594		
File by	the	Number, street, and room or suite no. If a P.O. box	P O box, see instructions.		Social security number (SSN)		
due da	te for	329 MARIOMI ROAD					
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.						
instructions NEW CANAAN, CT 06840							
Enter	the Re	turn code for the return that this application	s for (file a	separate application for ea	ich return)	. 04	
	cation		Return	Application		Return	
ls For	·		Code	ls For	Code		
Form	990		01	经验证据的证据制度	1 th 1 th 1 th 1 th 1 th 1 th 1 th 1 th		
Form	990-BI	-	02	Form 1041-A		08	
Form	990-EZ	7	01	Form 4720		09	
Form	990-PF		04	Form 5227		10	
Form	990-T	(sec 401(a) or 408(a) trust)	05	Form 6069		11	
Form	990-T	(trust other than above)	06	Form 8870		12	
STOP	l Do no	ot complete Part II if you were not already	granted ar	automatic 3-month exten	sion on a previously filed Form	n 8868.	
● If ti ● If ti for th	he orga his is fo e whole	anization does not have an office or place of lor a Group Return, enter the organization's for a group, check this box ▶ ☐ If	business in ur digit Gro f it is for pa	oup Exemption Number (GEI	N) If th		
		names and EINs of all members the extension		1	1/15 , 20 12 .		
		st an additional 3-month extension of time uilled endar year 2011 , or other tax year beginning				20 .	
		endal year <u>2011</u> , or other tax year begins ax year entered in line 5 is for less than 12 m			turn Final return	20	
	c	hange in accounting period	onus, are	x reason midar re	tum r marretum		
		n detail why you need the extension	VDI DMD	AND ACCUPANT MAY D	THUNK TO NOT		
		MATION NECESSARY TO FILE A CO	MPLETE	AND ACCURATE TAX R	ETURN IS NOT		
:	IEI A	VAILABLE FROM THIRD PARTIES.		 			
	16 Ab		O T 4700		45-4-1-1-1-1		
		application is for Form 990-BL, 990-PF, 99	90-1, 4720	, or 6069, enter the tent	*		
		andable credits. See instructions application is for Form 990-PF, 990-T,	4720 00	COCO antos anu sofue	doble erodite and have		
		• •		•	Ke. 1		
		ted tax payments made Include any pri	o year c	verpayment allowed as	·		
		t paid previously with Form 8868	VOUE DOVE	ant with this form if requir	8b \$		
		e Due. Subtract line 8b from line 8a Include		encwitt this form, it requir	- · · · - . .		
	(Liectii	onic Federal Tax Payment System). See instru		ot be completed for D			
		Signature and Verification of perjury, I declare that I have examined this form, and complete, and that I am authorized to prepare this form.	including acc	<u>-</u>	<u> </u>	ge and belief,	
Signatu	ıre –	KU SC		Title ▶ CPA	Date ► 8 8	12	
	17				Form 8868	(Rev. 1-2012)	