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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 Department of the Treasu Internal Revenue Service , 2011, and ending For calendar year 2011 or tax year beginning Name of foundation A Employer Identification number THE TOMARES FAMILY FOUNDATION, INC. 52-2103332 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) (301) 951-0500 8120 WOODMONT AVENUE, SUITE 900 City or town, state, and ZIP code If exemption application is pending, check here - -BETHESDA, MD 20814-2743 G Check all that apply 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 H Check type of organization X Section 501(c)(3) exempt private foundation F If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . 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 . > 329,039. (Part I, column (d) must be on cash basis.) *16)* ▶ \$ Part | 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) for charitable expenses per may not necessarily equal the amounts in income income purposes books column (a) (see instructions)) (cash basis only) 18,000. ATCH 1 Contributions, gifts, grants, etc., received (attach schedule). if the foundation is not required to attach Sch B ATCH 2 3 Interest on savings and temporary cash investments 1,324 1,324. ATCH 3 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) _ 6a 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 and allowances · · · · **b** Less Cost of goods sold . c Gross profit or (loss) (attach schedule) Other income (attach schedule) 11 19,328. 1,328. Total Add lines 1 through 11 . . 13 Compensation of officers, directors, trustees, etc Other employee-salaries and wages . . Expenses 15 Pension-plans, employed benefits Legal fees (attach schedule) both coupuling fees (attach schedule) ATCH 4

Coupuling fees (attach schedule)... 1,650. 1,650. Agministrative Interest 17 Ja Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion. 20 Occupancy 21 Travel, conferences, and meetings Printing and publications 23 Other expenses (attach schedule) Total operating and administrative expenses. 1,650 1,650. Add lines 13 through 23 41,800. 41,800. Contributions, gifts, grants paid 43,450. 0 43,450. Total expenses and disbursements Add lines 24 and 25 Subtract line 26 from line 12 -24,122a Excess of revenue over expenses and disbursements 1,328. b Net investment income (if negative, enter -0-)

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

JSA

Form 990-PF (2011)

For Paperwork Reduction Act Notice, see instructions. $^{1\text{E}_1410\ 1\ 000}\ 4\text{JKFU2}\ 3947\ 6/26/2012\ 11:25:51\ AM\ V\ 11-4.6$

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Ð	art II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End	of year
	ar C II	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
		Savings and temporary cash investments		49,925.	49,925.
	3	Accounts receivable			
		Less allowance for doubtful accounts ▶			
		Pledges receivable			
		Less allowance for doubtful accounts ▶			
		Grants receivable			
		Receivables due from officers, directors, trustees, and other			
ł		disqualified persons (attach schedule) (see instructions)			
ı		Other notes and loans receivable (attach schedule)			
Ì		Less allowance for doubtful accounts ▶			
,		Inventories for sale or use	,		
Assets		Prepaid expenses and deferred charges		-	
A SS		Investments - U S and state government obligations (attach schedule).	1		
		Investments - corporate stock (attach schedule) ATCH 5		45,113.	279,114.
		Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment basis Less accumulated depreciation			
	12	(attach schedule)			
	13 14	Investments - other (attach schedule)			
		Learni, bullottings, and equipment basis Less accumulated depreciation (attach schedule)			
	15	Other assets (describe			<u> </u>
ł		Total assets (to be completed by all filers - see the		05 020	200 020
+		instructions Also, see page 1, item I)	119,160.	95,038.	329,039
		Accounts payable and accrued expenses		· · · · · · · · · · · · · · · · · · ·	
- 1		Grants payable			_
ies		Deferred revenue			
Ħ		Loans from officers, directors, trustees, and other disqualified persons			
Liabilities		Mortgages and other notes payable (attach schedule)			
-	22	Other liabilities (describe			4
				,	
\dashv		Total liabilities (add lines 17 through 22)	0		<u> </u>
		Foundations that follow SFAS 117, check here ▶ and complete lines 24 through 26 and lines 30 and 31.			
Ses	24	Unrestricted			1
ᆵ	25	Temporarily restricted			
Ba	26	Permanently restricted			
or Fund Balance		Foundations that do not follow SFAS 117,			
교		check here and complete lines 27 through 31. $\blacktriangleright X$			
5	27	Capital stock, trust principal, or current funds			_
sts	28	Paid-in or capital surplus, or land, bldg , and equipment fund]
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	119,160.	95,038	
¥.	30	Total net assets or fund balances (see instructions)	119,160.	95,038	
ž	31	Total liabilities and net assets/fund balances (see			
\perp		ınstructions)	119,160.	95,038	,
P	art II	Analysis of Changes in Net Assets or Fund	Balances		
1	Total	net assets or fund balances at beginning of year - Part	II, column (a), line 30 (must agree with	
		of-year figure reported on prior year's return)		-	119,160
				_	-24,122
				_	
		lines 1, 2, and 3			95,038
		eases not included in line 2 (itemize)			
		net assets or fund balances at end of year (line 4 minus			95,038

	d describe the kind(s) of property sold (e g , real estate,	(b) How acquired	(c) Date	(d) Date sold
	rick warehouse, or common stock, 200		P-Purchase D-Donation	àcquired (mo , day, yr)	(mo, day, yr)
a					
b					
<u>c</u>			-		
<u>d</u>			-		
<u>e</u>	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	<u> </u>
(e) Gross sales price	(or allowable)	plus expense of sale		(e) plus (f) minu	
a					
b					
С					
d					
Operation and the contract		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Complete only for assets	showing gain in column (h) and owne			Gains (Col (h) g (k), but not less t	
(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	00,	Losses (from co	
a					•
b					
C					
d					
e					
Capital gain net income or		gain, also enter in Part I, line 7			
	· · · · · · · · · · · · · · · · · · ·	(loss), enter -0- in Part I, line 7	2		
	or (loss) as defined in sections 12				
	t I, line 8, column (c) (see inst	ructions) If (loss), enter -0- in			
Part I, line 8		·	3		
Part V Qualification User optional use by domestic	Jnder Section 4940(e) for Recognition private foundations subject to the	duced Tax on Net Investment I e section 4940(a) tax on net invest		me)	
Part V Qualification User optional use by domestic section 4940(d)(2) applies, Vas the foundation liable for	Inder Section 4940(e) for Recognition private foundations subject to the leave this part blank the section 4942 tax on the distribution.	duced Tax on Net Investment I e section 4940(a) tax on net invest outable amount of any year in the b	ment inco		Yes X N
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Part V Qualification Use or optional use by domestic section 4940(d)(2) applies, as the foundation liable for "Yes," the foundation does Enter the appropriate amount (a) Base penod years Calendar year (or tax year beginning in) 2010 2009 2008 2007 2006 Total of line 1, column (d) Average distribution ration number of years the foundation for the foundation of the second form of the s	Inder Section 4940(e) for Receptive private foundations subject to the private foundations subject to the leave this part blank the section 4942 tax on the distribution qualify under section 4940(e) point in each column for each year (b) Adjusted qualifying distributions 36,785. 39,051. 32,746. 41,160. 52,113. for the 5-year base period - divided dation has been in existence if less incharitable-use assets for 2011 from the income (1% of Part I, line 27b).	duced Tax on Net Investment I e section 4940(a) tax on net invest butable amount of any year in the butable	ase period g any entr	d? (d) Distribution of (col (b) divided by	0.111562 0.151001 0.102201 0.090473 0.101899 0.557136 0.111427 378,428. 42,167. 13.

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	struc	tions	<u> </u>
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			13.
	here ► X and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of 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			13.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			13.
6	Credits/Payments			
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 857.			
b	Exempt foreign organizations - tax withheld at source 6b			
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		8	357.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			344.
11	Enter the amount of line 10 to be Credited to 2012 estimated tax ▶ 844. Refunded ▶ 11			
	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?	1a		X
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the			
	instructions for definition)?	1 b		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			X
	Did the foundation file Form 1120-POL for this year?	1 c		_^
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
_	(1) On the foundation >\$ (2) On foundation managers > \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
2	on foundation managers \$ Has the foundation engaged in any activities that have not previously been reported to the IRS?		-	x
-	If "Yes," attach a detailed description of the activities	2		
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?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
•	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	Х	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	MD,			
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		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses	10		X

Pa	rt 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			
		of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12		foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person h	ad advisory privileges? If "Yes," attach statement (see instructions)	12		Х
13		oundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website	address ▶N/A			
14	The bool	s are in care of AARON TOMARES Telephone no 301-951	-05	00	
	Located	at \triangleright 8120 WOODMONT AVE., #900 BETHESDA, MD ZIP+4 \triangleright 20814-2	743		
15		4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	$\cdot \square$
	and ente	r 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 ba	ink, securities, or other financial account in a foreign country?	16		X
	See the	instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter the name of			
		gn country 🕨			<u> </u>
Pa		Statements Regarding Activities for Which Form 4720 May Be Required		ı———	
	File For	m 4720 if any item is checked in the "Yes" column, unless an exception applies.	ļ	Yes	No
1 a	During tl	ne year did the foundation (either directly or indirectly)			
	(1) Enga	age in the sale or exchange, or leasing of property with a disqualified person? Yes X No		}	
		ow money from, lend money to, or otherwise extend credit to (or accept it from) a		İ	}
		ualified person? Yes X No			İ
		ish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	}		
		compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No]		ļ
		sfer any income or assets to a disqualified person (or make any of either available for			İ
		penefit or use of a disqualified person)?		İ	
		e to pay money or property to a government official? (Exception, Check "No" if the			
		dation agreed to make a grant to or to employ the official for a period after ination of government service if terminating within 90 days.)			
		nswer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
		i3 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b		<u> </u>
,		foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
•		corrected before the first day of the tax year beginning in 2011?	1 c		x
2		n failure to distribute income (section 4942) (does not apply for years the foundation was a private	10	ļ	
_		g foundation defined in section 4942(j)(3) or 4942(j)(5))			
á		nd of tax year 2011, did the foundation have any undistributed income (lines 6d and			
		XIII) for tax year(s) beginning before 2011?			
		list the years			
t	Are the	re any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
		to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		1	
		listed, answer "No" and attach statement - see instructions)	2 b		
c		ovisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>				
3 a		oundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any tii	ne during the year?			
t		did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or			
	disqualif	ed persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commiss	sioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
		, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
		on had excess business holdings in 2011)	3 b		<u> </u>
		oundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	X
k	Did the	foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitabl	e purpose that had not been removed from leopardy before the first day of the tax year beginning in 2011?	4 b	l	X

Par	t VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	ired (continued)		
5 a	During the year did the foundation pay or incur any amou	nt to				
	(1) Carry on propaganda, or otherwise attempt to influer	nce legislation (section	4945(e))?	Yes X No	o	
	(2) Influence the outcome of any specific public ele					
	directly or indirectly, any voter registration drive?			Yes X N	.	
	(3) Provide a grant to an individual for travel, study, or otl					į
	(4) Provide a grant to an organization other than a					
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s				,	
	(5) Provide for any purpose other than religious, ch				'	Ì
	purposes, or for the prevention of cruelty to children of		• .		_	
_						
D	If any answer is "Yes" to 5a(1)-(5), did any of the		• •	•		
	Regulations section 53 4945 or in a current notice regard	<u> </u>	•		<u>5b</u>	
	Organizations relying on a current notice regarding disast			· · · · · · · —		1
С	If the answer is "Yes" to question 5a(4), does the		•			
	because it maintained expenditure responsibility for the gi			. Yes No	>	
	If "Yes," attach the statement required by Regulations sec	tion 53 4945-5(d)				
6 a	Did the foundation, during the year, receive any fund					
	on a personal benefit contract?			Yes X N	o	
b	Did the foundation, during the year, pay premiums, direct	ctly or indirectly, on a j	personal benefit contra	ot?	6b	X
	If "Yes" to 6b, file Form 8870					
7 a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction?	Yes X N	o	
b	If "Yes," did the foundation receive any proceeds or have	e any net income attrit	outable to the transaction	on?	7ь	
Pai	t VIII Information About Officers, Directors	, Trustees, Foun	dation Managers,	Highly Paid Empl	oyees,	
1	and Contractors List all officers, directors, trustees, foundation in	nanagore and their	componentian (see	inctructions)		
	·	(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Evnens	se account,
	(a) Name and address	hours per week devoted to position	(if not paid, enter -0-)	employee benefit plans and deferred compensation		owances
AΤ	FACHMENT 6		0	0		0
						
						
2	Compensation of five highest-paid employees	(other than the	e included on lin	e 1 - see instructi	ions) If n	one enter
-	"NONE."	(other than thos	oc moladed on mi	e i - see mstructi	,0113 <i>j</i> . 11 11	one, enter
		(b) Title, and average		(d) Contributions to	(a) Evnenu	se account,
(a	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	other all	lowances
		devoted to position	-	compensation		
-	NONE					
	NONE					
					İ	
	I number of other employees paid over \$50,000 .					

Part VIII Information About Officers, I and Contractors (continued)	Directors, Trustees, Foundation Managers, F	lighly Paid Employees,
3 Five highest-paid independent contract	ors for professional services (see instructions).	If none, enter "NONE."
(a) Name and address of each pers	on paid more than \$50,000 (b)	Type of service (c) Compensation
·		
NONE		
-		
		
otal number of others receiving over \$50,000) for professional services	<u></u> ▶
Part IX-A Summary of Direct Charita	ble Activities	
List the foundation's four largest direct charitable activit organizations and other beneficianes served, conferences	ies during the tax year. Include relevant statistical information convened, research papers produced, etc	such as the number of Expenses
1 N/A		
2		
3		
*		
4		
	ted Investments (see instructions)	
Describe the two largest program-related investments m	ade by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		
		
2		
All other program-related investments See instructions		
3 NONE		
Total. Add lines 1 through 3	<u></u>	

Pa	art X Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	reign foundatio	ns,
<u> </u>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	,	
	purposes.		
а	Average monthly fair market value of securities	1a	314,404.
b	Average of monthly cash balances	1b	69,787.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	384,191.
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	0.14	3	384,191.
1	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see	•	
		4	5,763.
5	Instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	378,428.
3	Minimum investment return. Enter 5% of line 5	6	18,921.
Рa	art XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating	- 1	· - · - · - · · ·
	foundations and certain foreign organizations check here > and do not complete th	is part.)	
$\overline{\Gamma}$	Minimum investment return from Part X, line 6	. 1	18,921.
2 a		3.	
b	Income tax for 2011 (This does not include the tax from Part VI.) 2b		
	Add base 0 - and 0b	2c	13.
3	Distributable amount before adjustments Subtract line 2c from line 1		18,908.
1	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	1 - 1	18,908.
3	Deduction from distributable amount (see instructions)	. 6	
7	Deduction from distributable amount (see instructions) Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,	•	
	line 1 · · · · · · · · · · · · · · · · · ·	1 _ 1	18,908.
		<u> </u>	
Pa	art XII Qualifying Distributions (see instructions)		
<u> </u>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а		1a	43,450.
b		1 1	
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	9	
3	Amounts set aside for specific charitable projects that satisfy the:	•	
a		3a	
b			
1	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4		43,450.
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 (see instructions)		13.
3	Adjusted qualifying distributions. Subtract line 5 from line 4	6	43,437.
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when	<u> </u>	
	qualifies for the section 4940(e) reduction of tax in those years	Taroarating Will	the realitation

Page 9

	rt XIII Undistributed Income (see instru	ctions)			Page 9
Га	TEXIII On pist ibuted income (see institution)	<u> </u>	/6.)		
1	Distributable amount for 2011 from Part XI,	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011 18,908.
	line 7				10,900.
2	Undistributed income, if any, as of the end of 2011				
а	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				
С	06.104				
a -	From 2009				
	Total of lines 3a through e	109,395.			
	Qualifying distributions for 2011 from Part XII,		· · · · · · · · · · · · · · · · · · ·		
•	line 4 ▶ \$ 43, 450.				
а	Applied to 2010, but not more than line 2a				
	Applied to undistributed income of prior years				
b	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2011 distributable amount				18,908.
	Remaining amount distributed out of corpus	24,542.			
5	Excess distributions carryover applied to 2011				
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a)) Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	133,937.			
	Prior years' undistributed income Subtract				
-	line 4b from line 2b				
С	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	<u> </u>			
	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				
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)	26,584.			
9	Excess distributions carryover to 2012.				
	Subtract lines 7 and 8 from line 6a	107,353.			
	Analysis of line 9				
а	Excess from 2007				
b	Excess from 2008 16, 934.				
С	Excess from 2009 26, 194.				
d	Excess from 2010 20, 329.				
e	Excess from 2011 24,542.			·	- 000 55
					Form 990-PF (2011)

The name, address, and telephone number of the person to whom applications should be addressed The form in which applications should be submitted and information and materials they should include Any submission deadlines Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors Form 990-PF (2011)

3 Grants and Contributions Paid Duri	ng the Year or Appr	oved for F	Inture Payment	
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	If recipient is an individual,	Foundation	Purpose of ametor	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or outside continued			
ATTACHMENT 7				
		;		
Total			▶ 3a	41,800.
b Approved for future payment				
Total		<u> </u>	▶ 3b	
				- AAA DE

	llysis of Income-Produ	,	ated business income	Evaluded by	u cootion 512 - 512 - or 514	(e)
nter gross amounts u	nless otherwise indicated			· · · · · · · · · · · · · · · · · · ·	y section 512, 513, or 514	Related or exempt
4 D		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income
Program service rev				Exclusion code	/ III GUIK	(See instructions)
				-		
_				 		
	-			- 		
f						
	s from government agencies				-	
	and assessments	ļ		1.4	4	
	d temporary cash investments			14	4.	
	rest from securities			14	1,324.	
	or (loss) from real estate					
a Debt-financed p	property					
	ed property					
	(loss) from personal property .					
7 Other investment in	ncome					
3 Gain or (loss) from sa	les of assets other than inventory					·
Net income or (loss	s) from special events					
O Gross profit or (loss	s) from sales of inventory					
						1- 1
d						
d e						
e	nns (b), (d), and (e)				1,328.	
e 2 Subtotal Add colun 3 Total Add line 12, See worksheet in line	nns (b), (d), and (e) columns (b), (d), and (e)	ulations)			13	
e 2 Subtotal Add colun 3 Total Add line 12, See worksheet in line	columns (b), (d), and (e)	ulations)			13	
e 2 Subtotal Add colun 3 Total. Add line 12, See worksheet in line Part XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calc	ulations) to the Ac	complishment of E	xempt Purp		1,328
2 Subtotal Add colun 3 Total. Add line 12, See worksheet in line Part XVI-B Rel Line No. Explain	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,329
2 Subtotal Add colun 3 Total. Add line 12, See worksheet in line Part XVI-B Rel Line No. Explain	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,320
Subtotal Add column Total. Add line 12, see worksheet in line Part XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,32
Subtotal Add column Total. Add line 12, see worksheet in line art XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,32
Subtotal Add colum Total. Add line 12, ee worksheet in line art XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,320
Subtotal Add column Total. Add line 12, see worksheet in line art XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,32
Subtotal Add column Total. Add line 12, see worksheet in line art XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,32
Subtotal Add colum Total. Add line 12, ee worksheet in line art XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,32
s Subtotal Add columns Total. Add line 12, ee worksheet in line art XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,32
e Subtotal Add colum 3 Total Add line 12, ee worksheet in line art XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,32
Subtotal Add colum Total. Add line 12, ee worksheet in line art XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,32
e Subtotal Add colum 3 Total Add line 12, ee worksheet in line art XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,32
e Subtotal Add colum 3 Total Add line 12, ee worksheet in line art XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,32
Subtotal Add colum Total. Add line 12, ee worksheet in line art XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,32
Subtotal Add column Total. Add line 12, see worksheet in line art XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,32
Subtotal Add column Total. Add line 12, see worksheet in line art XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,32
Subtotal Add column Total. Add line 12, see worksheet in line art XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,32
Subtotal Add column Total. Add line 12, see worksheet in line art XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,32
Subtotal Add column Total. Add line 12, see worksheet in line Part XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,32
Subtotal Add column Total. Add line 12, see worksheet in line Part XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,32
2 Subtotal Add colun 3 Total. Add line 12, See worksheet in line Part XVI-B Rel Line No. Explain	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,32
Subtotal Add column Total. Add line 12, see worksheet in line art XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,32
Subtotal Add colum Total. Add line 12, ee worksheet in line art XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,32
Subtotal Add column Total. Add line 12, see worksheet in line Part XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,320
Subtotal Add column Total. Add line 12, see worksheet in line art XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,329
Subtotal Add column Total. Add line 12, see worksheet in line art XVI-B Rel	columns (b), (d), and (e) 13 instructions to verify calcationship of Activities below how each activit	ulations) s to the Ac	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	1,328

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Part	XVII	Information R Exempt Organ		ansters to and	l Transacti	ions ar	nd Relation	ships With Non	chari	table	•
1 [old the	organization direct		engage in any of	the following	g with a	iny other orga	nızation described		Yes	No
		on 501(c) of the Co	-	-		-					
		ations?	•	, , , ,	_	•		•			
a T	ransfe	rs from the reportin	g foundation to	a noncharitable e	exempt organ	ization o	of:				
(1) Cas	h							1a(1)		X
(2) Oth	er assets							1a(2)		X
b C	Other to	ansactions									
(1) Sale	es of assets to a no	ncharitable exe	mpt organization .					1b(1)		X
(2) Pur	chases of assets fro	om a noncharita	able exempt organi	zation				1b(2)		X
(3) Ren	tal of facilities, equi	pment, or other	assets					1b(3)		X
(-	4) Reii	nbursement arrange	ements						1b(4)		X
(5) Loa	ns or loan guarantee	es						1b(5)		X
		formance of service							1b(6)		X
		of facilities, equipn							1c		X
								should always show			
								lation received less			
								s, other assets, or s			
(a) Line	e no	(b) Amount involved N/A	(c) Name of r	noncharitable exempt o	rganization	N/A	scription of trans	ers, transactions, and shar	ing arra	ngemer	nts
		11/21				IV/A					
	-										
							 .			·	
											
	-	·									
		- "									•
2a	the f	oundation directly	or indirectly af	filiated with or re	alated to one	e or mo	ro tay oyomo	t organizations			
d	lescrib	ed in section 501(c)	of the Code (o	ther than section !	501(c)(3)) or	in sectio	on 5272	(Organizations	7	es X	No
b li	"Yes."	complete the follo	wing schedule	ther than bootion t	301(0)(0)) 01	5000	311 027	· · · · · · · · · · · · · · · · · · ·	'`	JJ [_ 140
		(a) Name of organization		(b) Type o	f organization			(c) Description of relations	hip		
								· <u>· · · · · · · · · · · · · · · · · · </u>			
					•						
							•				
	-							**			
	Under	penalties of penjury, I declar	re that I have exami	ned this return, including	accompanying so	thedules an	d statements, and	to the best of my knowledg	e and b	elief, it	is true
Sign	correct	, and complete Declaration of	r preparer (other than t	axpayer) is based on all inf	ormation of which p	preparer has	s any knowledge				
Here		War I	Mous	7/19	7/1a		instee		discus eparer		
	Sign	ature of officer or trustee		Date	7	Title		(see instruction		Yes	No
		•								L	
Paid		Print/Type preparer's	name	Preparer's sign	iture		Date	Check If	PTIN		
				W		1	- Alu	self-employed	P008	5068	9
Prepa		Firm's name ► AR	ONSON LLC	-				Firm's EIN ▶ 37-1			
Use (Only	Firm's address ▶ 80		RM BLVD., 3R	D FLOOR						-
			CKVILLE,	MD		20	0850	Phone no 301-2	31-6	200	

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 THE TOMARES FAMILY FOUNDATION, INC. 52-2103332 Organization type (check one): 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 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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)

lame of organization	THE	TOMARES	FAMILY	FOUNDATION,	INC.

Employer identification number 52-2103332

Part I	Contributors (see instructions). Use duplicate copies of	of Part I if additional space is need	led.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1 _	VICTOR WINSTON 8120 WOODMONT AVENUE, SUITE 900 BETHESDA, MD 20814	\$18,000.	Person X 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 Payroli Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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)

Name of organization THE TOMARES FAMILY FOUNDATION, INC.

Employer identification number 52-2103332

Part II Noncash Property (see instructions). Use duplicate copies of Part 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 Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\ \\$	

Employer identification number

52-2103332

Use	ributions of \$1,000 or less for the duplicate copies of Part III if addition		once. See instructions.) > \$
No. om ort I	(b) Purpose of gift (c) Use of gift		(d) Description of how gift is held
-		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<u>t I</u>			
-		(e) Transfer of gift	
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(b) Purpose of gift (c) Use		
m	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
m	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
m		(e) Transfer of gift	
m	(b) Purpose of gift Transferee's name, address, an	(e) Transfer of gift	(d) Description of how gift is held
m t l		(e) Transfer of gift	
No. m	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee

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27897

THE TOMARES FAMILY FOUNDATION, INC.

FORM 990PF, PART I - CONTRIBUTIONS, GIFTS AND GRANTS RECEIVED

NAME AND ADDRESS

DATE

DIRECT PUBLIC

SUPPORT

18,000.

8120 WOODMONT AVENUE, SUITE 900 BETHESDA, MD 20814

VICTOR WINSTON

08/16/2011

18,000.

TOTAL CONTRIBUTION AMOUNTS

ATTACHMENT 1 PAGE 19

- INTEREST ON TEMPORARY CASH INVESTMENTS PART I FORM 990PF,

THE TOMARES FAMILY FOUNDATION, INC.

	NET	INVESTMENT	INCOME	4.	4.
REVENUE	AND	EXPENSES	PER BOOKS	4.	4
					TOTAL
			DESCRIPTION	WELLS FARGO	

- DIVIDENDS AND INTEREST FROM SECURITIES PART I FORM 990PF,

	REVENUE AND FXPFNSFS	NET
DESCRIPTION	PER BOOKS	INCOM
WELLS FARGO	1,324.	

TOTAL

MENT ME

1,324.

1,324.

1,324.

ATTACHMENT 3 PAGE 21

THE TOMARES FAMILY FOUNDATION, INC.

ATTACHMENT

- ACCOUNTING FEES PART I FORM 990PE,

ADJUSTED NET INCOME INVESTMENT NET 1,650. EXPENSES PER BOOKS REVENUE AND ACCOUNTING FEES DESCRIPTION

CHARITABLE PURPOSES

1,650.

1,650.

TOTALS

1,650.

വ	
ATTACHMENT	

STOCK
CORPORATE
ì
ΙI
PART
PF,
9901
ORM

ENDING	279,114.	279,114.
ENDING BOOK VALUE	45,113.	45,113.
BEGINNING BOOK VALUE	45,113.	45,113.
		TOTALS
DESCRIPTION	6600 SHS CAPITAL ONE	

THE TOMARES FAMILY FOUNDATION, INC.

ATTACHMENT 6	CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER BENEFIT PLANS ALLOWANCES	0	0	0	0	0	0 .
	CONTRIBUTION TO EMPLOYEE COMPENSATION BENEFIT PLA	0	0	0	0	0	0
FICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	DIRECTOR 1.00	DIRECTOR 1.00	DIRECTOR 1.00	DIRECTOR 1.00	DIRECTOR 1.00	GRAND TOTALS
FORM 990PF, PART VIII - LIST OF OFFICERS,	NAME AND ADDRESS	AARON TOMARES 8120 WOODMONT AVENUE, SUITE 900 BETHESDA, MD 20814	ZIVA TOMARES 8120 WOODMONT AVENUE, SUITE 900 BETHESDA, MD 20814	JONATHAN TOMARES 8120 WOODMONT AVENUE, SUITE 900 BETHESDA, MD 20814	STEVEN TOMARES 8120 WOODMONT AVENUE, SUITE 900 BETHESDA, MD 20814	STUART TOMARES 8120 WOODMONT AVENUE, SUITE 900 BETHESDA, MD 20814	

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR.

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		•
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
JEWISH FEDERATION OF GREATER WASHINGTON ROCKVILLE, MD	NONE PUBLIC CHARITY	GENERAL OPERATING SUPPORT	15,000.
CHABAD SHUL OF POTOWAC POTOWAC, MD	NONE PUBLIC CHARITY	GENERAL OPERATING SUPPORT	1,800.
VANDERBILT UNIVERSITY NASHVILLE, TN	NONE PUBLIC CHARITY	GENERAL OPERATING SUPPORT	5,000.
JEWISH COMMUNITY CENTER OF GREATER WASHINGTON ROCKVILLE, MD	NONE PUBLIC CHARITY	GENERAL OPERATING SUPPORT	1,000.
TRINIDAD GOLF ASSOCIATION AURORA, CO	NONE PUBLIC CHARITY	GENERAL OPERATING SUPPORT	1,000.
HUNTINGTON FON FOR DEVELOPMENTAL DISABILITIES HUNTINGTON, WV	NONE PUBLIC CHARITY	GENERAL OPERATING SUPPORT	18,000.

TOTAL CONTRIBUTIONS PAID

41,800.

PAGE 25 ATTACHMENT 7

27897

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Form **8868**

(Rev January 2012)

Application for Extension of Time To File an Exempt Organization Return

Internal Revenue	•	► File a	separate ap	plication for each return.				
 If you are 	filing for an	Automatic 3-Month Extension, c	omplete o	nly Part I and check the	is box			▶ X
		Additional (Not Automatic) 3-Mo						
•	_	<i>inless</i> you have already been gran			· · · ·			168.
a corporatio	n required t	You can electronically file Form 8 to file Form 990-T), or an addition tension of time to file any of the	al (not aut	omatic) 3-month exten	sion of time. You can	elec	tronic	ally file Form
		associated With Certain Personal						
		details on the electronic filing of th						
Part I Au	tomatic 3	-Month Extension of Time. On	ly submit	original (no copies ne	eeded).			
A corporatio	n required	to file Form 990-T and requesting	an automa	tic 6-month extension	- check this box and co	mple	te	
Part I only								▶ 🔲
All other cor	porations (including 1120-C filers), partnershi	ips, REMIC	s, and trusts must use F	orm 7004 to request a	n exte	ensioi	n of time
to file incom	e tax return	s			Enter filer's identify	ing nu	mber,	see instructions
Tuna ar	Name of ex	kempt organization or other filer, see in	structions.		Employer identific	cation	numb	er (EIN) or
Type or print	ł							
File by the		MARES FAMILY FOUNDATIO			X 52-21033	32		
due date for		reet, and room or suite no If a P O. box	•	tions.	Social security nu	mber	(SSN)	
filing your		OODMONT AVENUE, SUITE						
return See instructions		or post office, state, and ZIP code For	a foreign add	dress, see instructions.				
	<u> </u>	DA, MD 20814-2743						
Enter the Re	eturn code 1	for the return that this application i	s for (file a	separate application fo	or each return)		• • •	0 4
Application			Return	Application				Return
ls For			Code	ls For				Code
Form 990	·		01	Form 990-T (corporat	ion)			07
Form 990-Bi	_		02	Form 1041-A			-	08
Form 990-E2	 Z		01	Form 4720				09
Form 990-PI	=		04	Form 5227				10
Form 990-T	(sec. 401(a	a) or 408(a) trust)	05	Form 6069				11
		than above)	06	Form 8870				12
		care of ► <u>AARON TOMARES</u> 301 951-0500	·	FAX No ▶				
 If the orga 	anızation do	oes not have an office or place of t	— ousiness ın	the United States, chec	ck this box			▶□
• If this is fo	or a Group I	Return, enter the organizat <u>ion's</u> for	ur digit Gro	up Exemption Number ((GEN)			this is
		eck this box ▶ 🔲 . If					and a	attach
a list with the	e names ar	d EINs of all members the extensi	on is for					
		natic 3-month (6 months for a cor		quired to file Form 990)-T) extension of time			
until		08/15 , 20 12 , to file the	exempt org	janization return for the	organization named	abov	e. The	extension is
		n's return for						
► X	calendar y	ear 20 <u>11</u> or						
> []	tax year be	ear 20 <u>11</u> or eginning	, 20	, and ending		, 20		
		ered in line 1 is for less than 12 m						
		ccounting period	oritrio, once	milari	etumT marrett			
		ıs for Form 990-BL, 990-PF, 99	0-Т, 4720	, or 6069, enter the	tentative tax, less an	* I		
		dits. See instructions	4700	0000		3 a	 \$	13.
		n is for Form 990-PF, 990-T, ments made Include any prior yea		•		d 3 b		13.
		tract line 3b from line 3a. Include				_	1	
		I Tax Payment System) See instru		on via ans ioni, il le	quieu, by using EFTF	3 c	\$	
		ing to make an electronic fund v		with this Form 8868,	see Form 8453-EO			8879-EO for
payment ins	tructions.							